



Blue Shield TotalDual Plan (HMO D-SNP)

دليل مقدمي الخدمات لعام 2024

المقاطعة: San Diego

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Blue Shield TotalDual Plan | دليل مقدمي الخدمات لعام 2024

مقدمة

يشمل دليل مقدمي الخدمات هذا معلومات عن أنواع مقدمي الخدمات في خطة Blue Shield TotalDual Plan وقوائم بجميع مقدمي الخدمات المتضمنين في الخطة اعتباراً من تاريخ هذا الدليل. وتحتوي القوائم على عناوين ومعلومات الاتصال بالإضافة إلى تفاصيل أخرى مثل أيام وساعات العمل والتخصصات والمهارات. تظهر المصطلحات الرئيسية وتعريفاتها بالترتيب الأبجدي في الفصل الأخير من إثبات التغطية.

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†مقدم خدمات DSNP المسجل أيضاً في Medi-Cal
إن كانت لديك أية أسئلة، يرجى الاتصال بـ Blue Shield TotalDual Plan على الرقم 1-800-452-4413 (TTY: 711)، من 8:00 صباحاً إلى 8:00 مساءً، سبعة أيام في الأسبوع. الاتصال الهاتفي مجاني. لمزيد من المعلومات، يرجى زيارة الموقع الإلكتروني
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A. إخلاءات المسؤولية

- ❖ يتضمن هذا الدليل قوائم بمتخصصي الرعاية الصحية (مثل الأطباء والممرضين الممارسين والاختصاصيين النفسيين) والمرافق (مثل المستشفيات أو العيادات). يسرد هذا الدليل أيضاً مقدمي الخدمات لبرنامج الخدمات والدعم طويل الأجل (LTSS) (مثل مقدمو خدمات الكبار والرعاية الصحية المنزلية) التي قد تستخدمها بوصفك عضواً في خطة Blue Shield TotalDual Plan. ونسرد أيضاً الصيدليات التي قد تستخدمها للحصول على الأدوية الموصوفة.
- ❖ يشار إليها باسم "مقدمي الخدمات بالشبكة" في هذا الدليل. وقد وقع مقدمو الخدمات هؤلاء عقداً معنا لتقديم الخدمات لك. فيما يلي قائمة بشبكة مقدمي الخدمات الخاصة بـ Blue Shield TotalDual Plan لمقاطعة San Diego.
- ❖ يمكنك الحصول على هذه الوثيقة مجاناً بتنسيقات أخرى، مثل الملفات المطبوعة بحجم كبير أو برايل للمكفوفين أو الملفات الصوتية. اتصل بالرقم 1-800-452-4413 (TTY: 711) ، من 8:00 صباحاً إلى 8:00 مساءً، سبعة أيام في الأسبوع. الاتصال الهاتفي مجاني.
- ❖ نقدم خدمات الترجمة الفورية المجانية للإجابة عن أي أسئلة قد تكون لديك حول خطتنا الصحية أو الدوائية. للحصول على خدمة مترجم فوري، اتصل بنا على 1-800-452-4413. يمكن أن تحصل على المساعدة من شخص يتحدث الإنجليزية أو الإسبانية أو العربية أو الفارسية أو الأرمنية أو الخميرية أو الكورية أو الروسية أو التاجالوجية أو الفيتنامية. هذه هي خدمة مجانية. يمكنك تقديم طلب دائم للحصول على هذه الوثيقة بلغة خلاف الإنجليزية أو في صيغة بديلة الآن وفي المستقبل. لتقديم طلب، يرجى الاتصال بخدمات رعاية العملاء لخطة Blue Shield TotalDual Plan، وستسجل خدمة رعاية العملاء معلومات اللغة والصيغة المفضلة لتستخدم عند التواصل لاحقاً. لإجراء أي تحديثات على تفضيلاتك، يرجى الاتصال بـ Blue Shield TotalDual Plan.
- ❖ القائمة محدثة اعتباراً من 04/02/2024، لكن يجب أن تدرك ما يلي:
 - قد يجري إضافة أو إزالة بعض مقدمي خدمات Blue Shield TotalDual Plan من شبكتنا بعد نشر هذا الدليل.
 - بعض مقدمي خدمات Blue Shield TotalDual Plan في شبكتنا قد لا يقبلون أعضاء جددًا. إذا واجهت صعوبة في العثور على أحد مقدمي الخدمات ممن يقبلون أعضاء جدد، اتصل بخدمة رعاية العملاء على 1-800-452-4413 (TTY: 711) وسوف نساعدك.
 - للحصول على آخر المعلومات عن مقدمي الخدمات في شبكة Blue Shield TotalDual Plan، زر الموقع www.blueshieldca.com/medicare أو اتصل بخدمة رعاية العملاء على 1-800-452-4413 (TTY: 711) ، من 8:00 صباحاً إلى 8:00 مساءً، سبعة أيام في الأسبوع. الاتصال مجاني.
- الأطباء وغيرهم من المتخصصين في الرعاية الصحية في شبكة Blue Shield TotalDual Plan مدرجون في 13-24266 يمكنك استخدام الفهرس في آخر الدليل للعثور على صفحة يوجد بها مقدم خدمة أو صيدلية مدرجة.

B1. المصطلحات الرئيسية

يشرح هذا القسم المصطلحات الرئيسية في دليلنا.

- **مقدمو الخدمات** هم متخصصون مثل الأطباء والممرضين والصيادلة والمعالجين وغيرهم من الأفراد الذين يقدمون الرعاية والخدمات. تشمل الخدمات الرعاية الطبية، والخدمات والدعم على المدى الطويل (LTSS)، والإمدادات، والأدوية الموصوفة، والمعدات، والخدمات الأخرى.
 - يشمل مصطلح مقدمي الخدمات منشآت مثل المستشفيات والعيادات والأماكن الأخرى التي تقدم الخدمات الطبية والمعدات الطبية. ويشمل أيضاً مقدمي خدمات LTSS الذين قد تلجأ إليهم بوصفك عضواً في خطة Blue Shield TotalDual Plan.
 - يُطلق على مقدمي الخدمات الذين يشكلون جزءاً من شبكة خطتنا "مقدمي الخدمات بالشبكة".
- **تعاقد مقدمو الخدمات بالشبكة** معنا لتقديم الخدمات للأعضاء في خطتنا. يشارك مقدمو الخدمات بالشبكة في خطتنا. هذا يعني أنهم يقبلون أعضاء خطتنا ويقدمون الخدمات التي تغطيها خطتنا. فعندما تلجأ لأحد مقدمي الخدمات بالشبكة، فإنك عادة لا تدفع شيئاً مقابل الخدمات المغطاة.
- **طبيب الرعاية الأولية (PCP)** هو طبيب باطني، أو طبيب أسرة، أو ممارس عام، أو اختصاصي يقدم لك رعاية صحية روتينية. سيحتفظ PCP المسؤول عنك بسجلتك الطبية ويتعرف على احتياجاتك الصحية بمرور الوقت. كما سيتولى PCP المسؤول عنك أيضاً إحالتك إذا كنت بحاجة إلى استشارة اختصاصي أو مقدم خدمة آخر.
- **الاختصاصيون** هم الأطباء الذين يقدمون خدمات الرعاية الصحية لمرض معين أو جزء من الجسم. هناك أنواع عديدة من الاختصاصيين. وفيما يلي بعض الأمثلة عليها:
 - أطباء الأورام لعلاج مرضى السرطان.
 - أطباء القلب لعلاج مرضى القلب.
 - أطباء العظام لعلاج المرضى الذين يعانون من أمراض معينة في العظام أو المفاصل أو العضلات.
- **المجموعة الطبية** أو جمعية الأطباء المستقلة (IPA) هي منظمة تم تشكيلها بموجب قانون ولاية California وتتعاقد مع الخطط الصحية لتوفير أو الترتيب لتوفير خدمات الرعاية الصحية للمُسجلين في الخطة الصحية. الرجاء مراجعة القسم B3 للحصول على معلومات إضافية.
- **قد تحتاج إلى إحالة أو تصريح مسبق** لمقابلة اختصاصي أو شخص آخر ليس PCP المسؤول عنك. تعني الإحالة أن PCP يجب أن يمنحك الموافقة قبل أن تتمكن من رؤية مقدم آخر للخدمات. **التصريح المسبق** يختلف عن الإحالة. وهذا يعني أن Blue Shield TotalDual Plan (وليس شبكة PCP المسؤول عنك) يجب أن تمنحك الموافقة قبل أن نغطي خدمة أو عنصراً أو عقاراً معيناً أو مقدم للخدمة خارج الشبكة. قد لا تغطي Blue Shield TotalDual Plan تكلفة خدمة أو عنصر أو العقار إذا لم تحصل على إحالة أو تصريح مسبق.
 - الإحالات أو التصريحات المسبقة غير مطلوبة لما يلي:
 - الرعاية الطارئة؛
 - الرعاية العاجلة المطلوبة؛
 - خدمات الديال الكلوي التي تحصل عليها في منشأة الديال الكلوي المعتمدة من Medicare عندما تكون خارج

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منطقة خدمة الخطة؛

- خدمات من اختصاصي لصحة المرأة؛
 - جميع الخدمات الوقائية التي يغطيها Medicare، بما في ذلك الفحوصات واللقاحات.
 - بالإضافة إلى ذلك، إذا كنت مؤهلاً للحصول على خدمات من مقدمي الرعاية الصحية من الأمريكيين الأصليين، فيمكنك اللجوء لمقدمي الخدمات هؤلاء دون إحالة. وملتزم بدفع تكاليف خدمات مقدم الرعاية الصحية من الأمريكيين الأصليين حتى لو كانت خارج شبكة خطتنا.
 - يتوفر مزيد من المعلومات عن الإحالات والتصريحات المسبقة في الفصل 3 من إثبات التغطية.
 - سيتم أيضاً تعيين فريق للرعاية لك. يبدأ فريق الرعاية المسؤول عنك بعلاقة بينك وبين PCP المسؤول عنك. قد يشمل فريق الرعاية: مقدم رعاية، ومستكشف الرعاية، والاختصاصي، وغيرهم، بناءً على مستوى الحاجة الموضحة في خطة الرعاية الخاصة بك. يعمل كل فرد في فريق الرعاية معاً لضمان تنسيق رعايتك. وذلك يعني أنهم يتأكدون من أنك تخضع لجميع الاختبارات والفحوص المختبرية والرعاية التي تحتاج إليها، وأن النتائج يتم مشاركتها مع مقدمي الخدمات المناسبين. وهذا يعني أيضاً أن PCP المسؤول عنك يجب أن يعرف جميع الأدوية التي تتلقاها حتى يتمكن من الحد من أي تأثيرات سلبية. سيحصل PCP المسؤول عنك دائماً على إذن منك قبل مشاركة معلوماتك الطبية مع مقدمي الخدمات الآخرين. قد يشمل أعضاء فريق الرعاية المسؤول عنك ما يلي:
 - مستكشف الرعاية الذي يساعدك في إدارة مقدمي الخدمات الطبية والخدمات الخاصة بك.
 - طبيب الرعاية الأولية المسؤول عنك
- سيساعدك فريق رعاية المسؤول عنك أيضاً في العثور على مقدمي الخدمات الطبية أو السلوكية أو خدمات الدعم طويلة الأجل (LTSS) إذا كنت بحاجة إلى اختصاصي أو مقدم رعاية صحية آخر. وبذلك، ستحصل على مقدم الخدمة المناسب لمساعدتك في حل مخاوفك.

B2. أوقات الانتظار للرعاية الأولية والصحة السلوكية

- نلتزم بأن نوفر لك إمكانية الوصول إلى خدمات الرعاية الأولية والصحة السلوكية في غضون الأطر الزمنية التالية:
- فوراً بالنسبة للخدمات المطلوبة بشكل عاجل أو حالات الطوارئ؛
 - في غضون 7 أيام بالنسبة للخدمات التي ليست طارئة أو مطلوبة بشكل عاجل، لكنك تتطلب العناية الطبية؛
 - في غضون 30 يوماً بالنسبة للرعاية الروتينية أو الوقائية.

B3. كيفية اختيار طبيب الرعاية الأولية (PCP)

أولاً، عليك اختيار طبيب الرعاية الأولية (PCP). قد تكون قادراً على الاستعانة باختصاصي يؤدي دور PCP المسؤول عنك. يمكنك اختيار اختصاصي ليكون PCP المسؤول عنك إذا وافق الاختصاصي على تقديم جميع الخدمات التي يقدمها PCP عادة. لطلب أن يكون الاختصاصي المسؤول عنك هو PCP المسؤول عنك، يرجى الاتصال بخدمة رعاية العملاء لخطة Blue Shield TotalDual Plan. يمكنك اختيار أي PCP من شبكتنا يقبل أعضاء جدد.

أطباء PCPs في خطتنا تابعون لمجموعات طبية. عند اختيارك لـ PCP، فإنك تختار أيضاً المجموعة الطبية التي يتبع لها. وذلك يعني أن PCP سيحملك للاختصاصيين ومقدمي الخدمات التابعين لنفس مجموعته الطبية.

- وإذا كان هناك أحد الاختصاصيين أو إحدى المستشفيات التي ترغب في استخدام خدماتهم، من الضروري أن ما إذا كانوا تابعون للمجموعة الطبية التي يتبع لها PCP أم لا. يمكنك البحث في هذا الدليل أو سؤال خدمة رعاية العملاء لدى Blue Shield TotalDual Plan للتحقق مما إذا كان PCP الذي تريده يقوم بإحالات إلى هذا الاختصاصي أو يقدم خدماته في تلك المستشفى.
- إذا لم تبقى مع المجموعة الطبية التي يتبع لها PCP المسؤول عنك، فقد لا تغطي Blue Shield TotalDual Plan تكلفة الخدمة.

لاختيار PCP، راجع قائمة الأطباء على صفحة 13-2436 واختر الطبيب الذي:

- تتعامل معه حالياً، أو
- أوصاك به أحد تثق به، أو
- يسهل عليك الذهاب إلى مكتبه.
- إذا لم تختار PCP من شبكتنا، فستختار Blue Shield TotalDual Plan طبيباً لك.
- إذا كنت تريد المساعدة في اختيار مقدم رعاية أساسية PCP، يرجى الاتصال بخدمة العملاء على الرقم 1-800-452-4413 (TTY: 711)، من 8:00 صباحاً إلى 8:00 مساءً، سبعة أيام في الأسبوع. الاتصال مجاني. أو تفضل بزيارة www.blueshieldca.com/medicare
- إذا كانت لديك أسئلة عما إذا كانت أي خدمة أو رعاية تريدها أو تحتاج إليها مغطاة، تحدث إلى فريق الرعاية المسؤول عنك أو اتصل بخدمة رعاية العملاء على الهاتف 1-800-452-4413 (TTY: 711) واستفسر قبل أن تحصل على الخدمة أو الرعاية.

B4. مقدمو خدمات برنامج الخدمات والدعم طويل الأجل (LTSS)

بصفتك عضواً في خطة Blue Shield TotalDual Plan، ستتمكن من الحصول على خدمات ودعم طويل الأجل (LTSS) إذا احتجت إليها، مثل خدمات رعاية الكبار النهارية المجتمعية (CBAS) التي تقدم خدمات التمريض والخدمات البدنية والمهنية وعلاج النطق والأنشطة العلاجية والوجبات في المراكز المجتمعية. وبالإضافة إلى ذلك، فإن خدمات الدعم في المنزل (IHSS) هي رعاية منزلية للأشخاص الذين لا يستطيعون البقاء بأمان في منازلهم دون مساعدة في الحصول على الرعاية. تساعد LTSS الأشخاص الذين يحتاجون إلى المساعدة للقيام بالمهام اليومية مثل الاستحمام وارتداء الملابس وصنع الطعام وتلقي الأدوية. يتم توفير معظم هذه الخدمات في منزلك أو في مجتمعك المحلي ولكن يمكن توفيرها في دار رعاية أو مستشفى.

إذا كنت بحاجة إلى خدمات LTSS، فيمكن أن يساعدك مستكشف الرعاية أو برنامج MSSP أنت وفريق الرعاية المسؤول عنك في تحديد الخيارات المتاحة لدعمك بالطريقة التي تريدها.

†مقدم خدمات DSNP المسجل أيضاً في Medi-Cal

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B5. كيفية الوصول إلى مقدمي خدمات شبكة Blue Shield TotalDual Plan

يجب أن تحصل على جميع خدماتك المغطاة من مقدمي الخدمات داخل شبكتنا المنتسبين لمجموعة PCP المسؤول عنك. إذا لجأت إلى مقدمي خدمات ليسوا تابعين لشبكة Blue Shield TotalDual Plan ولم يكونوا تابعين للمجموعة الطبية لطبيب الرعاية الأولية (PCP) المسؤول عنك (دون تصريح مسبق)، فسيتم عليك دفع الفاتورة.

التصريح المسبق هو موافقة من Blue Shield TotalDual Plan للبحث عن خدمات خارج شبكتنا أو للحصول على خدمات لا تغطيها شبكتنا بشكل روتيني قبل حصولك على تلك الخدمات.

الاستثناء الوحيد من هذه الحالة عندما تكون في حاجة إلى رعاية عاجلة أو طارئة أو ديال كلوي ولا يمكنك الحصول على ذلك من أحد مزودي الخدمات في الشبكة، مثل أن تكون بعيداً عن منزلك. يمكنك أيضاً الخروج من الخطة أو المجموعة الطبية لطبيب الرعاية الأولية (PCP) المسؤول عنك إذا منحتك Blue Shield TotalDual Plan الإذن أولاً.

- يمكنك تغيير مقدمي الخدمات داخل الشبكة في أي وقت خلال العام. إذا كنت تلجأ إلى أحد مقدمي الخدمات، فلا يتعين عليك الاستمرار في اللجوء إلى نفس مقدم الخدمة. بالنسبة لبعض مقدمي الخدمات، قد تحتاج إلى إحالة من PCP المسؤول عنك. يسري تغيير PCP في اليوم الأول من الشهر التالي، بشرط أن تتلقى طلبك بحلول اليوم العشرين من الشهر الحالي. لتغيير PCP المسؤول عنك، اتصل بخدمة رعاية العملاء. عند الاتصال، تأكد من إخبار خدمة رعاية العملاء عما إذا كنت تلجأ إلى اختصاصي أو تتلقى خدمات مغطاة أخرى تتطلب موافقة PCP (مثل خدمات الصحة المنزلية والمعدات الطبية المعمرة). ستساعدك خدمة رعاية العملاء في التأكد من أنه يمكنك مواصلة الرعاية المتخصصة والخدمات الأخرى عند تغيير PCP المسؤول عنك. ستحقق خدمة رعاية العملاء أيضاً مما إذا كان PCP الذي تريد التغيير إليه يقبل المرضى الجدد. وستغير خدمة رعاية العملاء سجل عضويتك لإظهار اسم PCP الجديد المسؤول عنك وإعلامك عندما يسري التغيير على PCP الجديد المسؤول عنك. سترسل لك خدمة رعاية العملاء أيضاً بطاقة عضوية جديدة تعرض اسم ورقم هاتف PCP الجديد المسؤول عنك.
- وتذكر، أطباء الرعاية الأولية (PCPs) في خطتنا تابعون لمجموعات طبية. إذا قمت بتغيير PCP المسؤول عنك، فقد تغير أيضاً المجموعة الطبية. عندما تطلب التغيير، تأكد من إخبار خدمة رعاية العملاء عما إذا كنت تلجأ لاختصاصي أو تتلقى خدمات مغطاة أخرى تتطلب موافقة PCP. ستساعدك خدمة رعاية العملاء في التأكد من أنه يمكنك مواصلة الرعاية المتخصصة والخدمات الأخرى عند تغيير PCP المسؤول عنك.
- تعمل Blue Shield TotalDual Plan مع جميع مزودي الخدمات في شبكتنا لتلبية احتياجات الأشخاص ذوي الإعاقة. حسب الافتضاء، تتضمن قائمة مقدمي الخدمات بالشبكة في هذا الدليل معلومات عن التسهيلات التي يقدمونها.
- إذا كنت بحاجة إلى مقدم للخدمات ولم تكن متأكدًا مما إذا كان يقدم التسهيلات التي تحتاجها، فيمكن لـ Blue Shield TotalDual Plan مساعدتك. تحدث مع مستكشف الرعاية لمساعدتك.

C. قائمة مقدمي الخدمات بشبكة Blue Shield TotalDual Plan

يتضمن هذا الجزء من الدليل قائمة مقدمي الخدمات في شبكة Blue Shield TotalDual Plan الذين يشاركون وتوافقون على خطة Blue Shield TotalDual Plan. تحتوي على:

- متخصصو الرعاية الصحية بما في ذلك مقدمي الرعاية الأولية والمتخصصين ومقدمي خدمات الصحة السلوكية ومقدمي خدمات طب الأسنان ومقدمي خدمات رعاية الإبصار؛
 - المنشآت بما في ذلك المستشفيات ومنشآت التمريض ومنشآت الصحة السلوكية؛
 - مقدمو خدمات الدعم بما في ذلك الخدمات والدعم طويل الأجل (LTSS) (مثل الصحة النهارية للبالغين) وخدمات الدعم المجتمعي (مثل دعم الأقران).
- يُسرّد مقدمي خدمات رعاية الأسنان المدارة من Medi-Cal على مواقع الويب الخاصة بخطط رعاية الأسنان المدارة. أسماء خطط رعاية الأسنان المدارة حاليًا هي: Liberty Dental Plan، Access Dental Plan، Health Net of California. يمكن إجراء البحث بناءً على اسم مقدم الخدمة أو العنوان أو المدينة أو الرمز البريدي أو التخصص أو اللغات المنطوقة. للحصول على معلومات الخطة الحالية، يمكنك أيضاً الاتصال Health Care Options للحصول على المساعدة على 1-800-430-4263 (يمكن لمستخدمي TTY الاتصال بالهاتف 1-800-430-7077) من الاثنين إلى الجمعة، من 8:00 صباحاً إلى 6:00 مساءً.

مُقدّمو خدمات طب الأسنان مقابل الرسوم من Medi-Cal مدرجون في قائمة دليل مقدمي الخدمات على الموقع الإلكتروني Smile, California: www.dental.dhcs.ca.gov/find-a-dentist/home. يمكن إجراء البحث بناءً على العنوان أو المدينة أو الرمز البريدي أو التخصص أو اللغات المنطوقة. بالإضافة إلى استخدام دليل مقدمي الخدمات للبحث عن مقدمي خدمات طب الأسنان المسجلين، توجد قائمة بأسماء اختصاصيي صحة الأسنان المسجلين والمدرجين حسب المقاطعة في Smile California.

تتم تغطية خدمات طب الأسنان في San Mateo من خلال (HPSM Health Plan of San Mateo). دليل مقدمي الخدمات مدرج في الموقع الإلكتروني للخطة. يمكن إجراء البحث بناءً على اسم مقدم الخدمة أو الرمز البريدي.

يُسرّد مقدمو الخدمات بالترتيب الأبجدي حسب الاسم الأخير. يمكنك أيضاً العثور على اسم مقدم الخدمة والصفحة التي توجد بها معلومات الاتصال الإضافية للمقدم في الفهرس في نهاية الدليل. كما يُسرّد مقدمو الخدمات بالترتيب الأبجدي حسب الاسم الأخير في الفهرس. بالإضافة إلى معلومات الاتصال، تتضمن قوائم مقدمي الخدمات أيضاً التخصصات والمهارات، على سبيل المثال، مثل اللغات المنطوقة أو إكمال تدريب الكفاءة الثقافية.

تدريب الكفاءة الثقافية هو تعليمات إضافية لمقدمي الرعاية الصحية لدينا تساعدكم على فهم خلفيتك الثقافية وقيمك ومعتقداتك بشكل أفضل لتكييف الخدمات لتلبية احتياجاتك الاجتماعية والثقافية واللغوية.

†مقدم خدمات DSNP المسجل أيضاً في Medi-Cal

إن كانت لديك أية أسئلة، يرجى الاتصال بـ Blue Shield TotalDual Plan على الرقم 1-800-452-4413 (TTY: 711)، من 8:00 صباحاً إلى 8:00 مساءً، سبعة أيام في الأسبوع. الاتصال الهاتفي مجاني. لمزيد من المعلومات، يرجى زيارة الموقع الإلكتروني

www.blueshieldca.com/medicare

تتكون شبكة Blue Shield TotalDual Plan إجمالاً مما يلي:

إجمالي عدد أطباء الرعاية الأولية: 2613
(PCPs)

إجمالي عدد الاختصاصيين: 2959

إجمالي عدد المستشفيات: 19

إجمالي عدد مقدمي خدمات المعالجة بالوخز الإبري وتقييم العمود الفقري: No Data

العدد الإجمالي لمقدمي خدمات طب الأسنان: No Data

إجمالي عدد الخدمات الصحية المنزلية: 1

إجمالي عدد مقدمي خدمات الصحة العقلية: 399

إجمالي عدد مقدمي خدمات الإبصار: 429

إجمالي عدد مقدمي خدمات برنامج الخدمات والدعم طويل الأجل: No Data

إجمالي عدد منشآت الصحة العقلية: No Data

إجمالي عدد منشآت التمريض الماهر: 81

مقدمو الخدمات الآخرون: 1

ALVARADO HOSPITAL LLC

Effective as of 01-AUG-12

6655 ALVARADO RD
SAN DIEGO, CA 92120

**ENCOMPASS HEALTH
REHABILITATION HOSPITAL
OF MURRIETA**

Effective as of 01-AUG-20

35470 WHITEWOOD RD
MURRIETA, CA 92563

**HEMET GLOBAL MEDICAL
CENTER**

Effective as of 01-JAN-20

1117 E DEVONSHIRE AVE
HEMET, CA 92543

Birthing Friendly: Y

HOAG HOSPITAL IRVINE

Effective as of 01-FEB-14

16200 SAND CANYON AVE
IRVINE, CA 92618

**HOAG ORTHOPEDIC
INSTITUTE**

Effective as of 01-JAN-12

16250 SAND CANYON AVE
IRVINE, CA 92618

**KINDRED HOSPITAL SAN
DIEGO**

Effective as of 01-JAN-12

1940 EL CAJON BLVD
SAN DIEGO, CA 92104

**MENIFEE GLOBAL MEDICAL
CENTER**

Effective as of 01-JAN-20

28400 MCCALL BLVD
SUN CITY, CA 92585

**MISSION HOSPITAL LAGUNA
BEACH**

Effective as of 01-JAN-10

31872 COAST HWY
LAGUNA BEACH, CA 92651

PALOMAR HEALTH

Effective as of 01-JAN-12

15615 POMERADO RD
POWAY, CA 92064

Birthing Friendly: Y

PALOMAR MEDICAL CENTER

Effective as of 01-JAN-12

2185 CITRACADO PKWY
ESCONDIDO, CA 92029

PARADISE VALLEY HOSPITAL

Effective as of 01-AUG-12

2400 E 4TH ST
NATIONAL CITY, CA 91950

**PROVIDENCE MISSION
HOSPITAL**

Effective as of 01-JAN-10

27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691

Birthing Friendly: Y

**SADDLEBACK MEMORIAL MED
CTR**

Effective as of 01-JAN-12

24451 HEALTH CENTER DR
LAGUNA HILLS, CA 92653

Birthing Friendly: Y

SCRIPPS GREEN HOSPITAL

Effective as of 01-JAN-12

10666 N TORREY PINES RD
MS 220
LA JOLLA, CA 92037

**SCRIPPS MEMORIAL
HOSPITAL**

Effective as of 01-JAN-12

9888 GENESEE AVE
LA JOLLA, CA 92037

Birthing Friendly: Y

**SCRIPPS MEMORIAL
HOSPITAL ENCINITAS**

Effective as of 01-JAN-12

354 SANTA FE DR
ENCINITAS, CA 92024

Birthing Friendly: Y

SCRIPPS MERCY HOSPITAL

Effective as of 01-JAN-12

4077 5TH AVE
SAN DIEGO, CA 92103

Birthing Friendly: Y

**SCRIPPS MERCY HOSPITAL
CHULA VISTA**

Effective as of 01-JAN-12

435 H ST
CHULA VISTA, CA 91910

**SELECT SPECIALTY HOSPITAL
SAN DIEGO**

Effective as of 01-JAN-12

555 WASHINGTON ST
SAN DIEGO, CA 92103

TRI CITY MEDICAL CTR

Effective as of 01-JAN-12

4002 VISTA WAY
OCEANSIDE, CA 92056

Birthing Friendly: Y

**UCSD LA JOLLA JOHN SALLY
THORNTON** ①

Effective as of 01-OCT-14

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

UCSD MEDICAL CTR ①

Effective as of 01-OCT-14

 200 W ARBOR DR
SAN DIEGO, CA 92103

Birthing Friendly: Y

C1. قائمة مقدمي الخدمات بالشبكة
مراكز الرعاية العاجلة

توفر هذه الخطة تغطية للخدمات العاجلة داخل الشبكة وخارجها. للحصول على قائمة محدثة بمراكز الرعاية العاجلة في الشبكة، يرجى الاتصال بمجموعتك الطبية.

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

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

ACCELERATED URGENT CARE

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

CONCENTRA URGENT CARE
542 BROADWAY STE G
CHULA VISTA, CA 91910
(866) 944-6046
M-F 8:00AM-6:00PM

CONCENTRA URGENT CARE
3910 VISTA WAY STE 106
OCEANSIDE, CA 92056
(866) 944-6046
M-F 8:00AM-5:00PM

ACCELERATED URGENT CARE

29400 RANCHO CALIFORNIA RD
TEMECULA, CA 92591
(951) 595-8282
SU-SA 8:00AM-9:00PM

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

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

ACCELERATED URGENT CARE

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

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

CONCENTRA URGENT CARE
5333 MISSION CENTER RD
SAN DIEGO, CA 92108
(866) 944-6046
M-F 8:00AM-6:00PM

ACCELERATED URGENT CARE

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

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

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

ANAHEIM URGENT CARE INC

22855 LAKE FOREST DR
LAKE FOREST, CA 92630
(949) 676-9991

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

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

BAHIA FAMILY MEDICAL GROUP INC

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

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




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

CONCENTRA URGENT CARE

CONCENTRA URGENT CARE

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




CONCENTRA URGENT CARE

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




CONCENTRA URGENT CARE

 740 NORDAHL RD STE 130
SAN MARCOS, CA 92069
 (760) 432-9000




**DOCTORS EXPRESS OF
OCEANSIDE INC**

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

EAST COUNTY URGENT CARE

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

HOAG CLINIC




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

HOAG CLINIC




 26672 PORTOLA PKWY STE

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




HOAG CLINIC

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




HOAG CLINIC

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

HOAG CLINIC



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

**INLAND URGENT CARE A MED
CORP**




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

**INLAND URGENT CARE A MED
CORP**




 29738 RANCHO

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




**INLAND URGENT CARE OF
SUN CITY**

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




MARQUE URGENT CARE

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



MARQUE URGENT CARE

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

MARQUE URGENT CARE


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


MISSION HERITAGE MED GRP

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

MISSION HERITAGE MED GRP


 26800 CROWN VALLEY
PKWY STE 150
MISSION VIEJO, CA 92691

 (949) 276-2111

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


**O C URGENT CARE MEDICAL
GRP INC**

 26781 PORTOLA PKWY STE
4E
FOOTHILL RANCH, CA
92610


 (949) 297-3888


OPTUM

 145 THUNDER DR
VISTA, CA 92083


 (760) 941-9002


**RCH NORTH COUNTY URGENT
CARE**


 625 CITRACADO PKWY STE
100
ESCONDIDO, CA 92025

 (760) 739-1543

**SAND CANYON URGENT CARE
MED CTR**


 15775 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618

 (949) 417-0272

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

**SOUTH COAST MEDICAL
GROUP**

 5 JOURNEY STE 130
ALISO VIEJO, CA 92656


 (949) 360-1069


 SU 10:00AM-3:00PM

M-F 8:00AM-7:00PM
SA 9:00AM-3:00PM

SOUTHBAY URGENT CARE INC

 1628 PALM AVE
SAN DIEGO, CA 92154

 (619) 591-9999

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

FAMILY PRACTICE

OCONNOR, SHANNON, MD^F

Provider ID: 100027672005

5 JOURNEY STE 130
ALISO VIEJO, CA 92656

(949) 360-1069

Effective as of 01-JUL-12

OCONNOR, SHANNON, MD^F

Provider ID: 100027672003

5 JOURNEY STE 130
ALISO VIEJO, CA 92656

(949) 360-1069

Effective as of 01-JUL-12

OCONNOR, SHANNON, MD^F

Provider ID: 100027672006

5 JOURNEY STE 130
ALISO VIEJO, CA 92656

(949) 360-1069

Effective as of 01-OCT-07

GENERAL PRACTICE

THOMAS, SEAN, MD^{M†}

Provider ID: 100112751013

15 MAREBLU STE 310
ALISO VIEJO, CA 92656

(949) 831-1001

French, Spanish

Effective as of 01-APR-19

INTERNAL MEDICINE

HERMAN, SAM, MD^M

Provider ID: 100414181004

26671 ALISO CREEK RD STE
206

ALISO VIEJO, CA 92656

(949) 791-3104

Effective as of 01-SEP-23

KAYE, SHAWN, MD^M

Provider ID: 100347353012

26671 ALISO CREEK RD STE
206

ALISO VIEJO, CA 92656

(949) 791-3104

Effective as of 01-JAN-21

FAMILY PRACTICE

DUBE, BIANCA, MD^{F†}

Provider ID: 100374087003

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

(619) 662-4100

Teleservice

Effective as of 01-JUL-21

FQHC

**SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE,**

Provider ID: PG0094125003

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

(619) 662-4100

Teleservice

Effective as of 01-JAN-21

FAMILY PRACTICE

AJIR, MAHYAR, DO^{M†}

Provider ID: 100067406005

2801 JEFFERSON ST
CARLSBAD, CA 92008

(760) 729-4952

Farsi, Spanish

Effective as of 01-APR-16

KORFF, GARY, MD^{M†}

Provider ID: 100021811011

2910 JEFFERSON ST STE
100

CARLSBAD, CA 92008

(760) 729-7186

Spanish

Effective as of 01-JAN-23

PEREZ, RONALD, MD^{M†}

Provider ID: 100323488011

1207 CARLSBAD VILLAGE
DR STE A

CARLSBAD, CA 92008

(760) 896-3030

Spanish, Tagalog

Effective as of 01-JAN-20

VOURLITIS, MELISSA, DO^{F*}

Provider ID: 100090572021

2855 CARLSBAD BLVD
CARLSBAD, CA 92008

(858) 832-2500

Teleservice

Effective as of 01-NOV-23

FQHC

TRUECARE,

Provider ID: PG0092587007

1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

(760) 736-6767

Teleservice

Effective as of 01-JUL-22

GENERAL PRACTICE

KREMER, ARNOLD, DO^M

Provider ID: 100023664010

5814 VAN ALLEN WAY STE
215

CARLSBAD, CA 92008

(760) 444-5544

French

Teleservice

Effective as of 01-APR-23

INTERNAL MEDICINE

CHONG, YOO JIN, MD^{M†}

Provider ID: 100055662004

5930 PRIESTLY DR
CARLSBAD, CA 92008
(760) 434-6060
Korean
Effective as of 01-NOV-21

CHONG, MARIBETH, MD^F
Provider ID: 100092861004
5930 PRIESTLY DR
CARLSBAD, CA 92008
(760) 434-6060
Spanish, Tagalog
Effective as of 01-NOV-21

CHONG, YOO JIN, MD^{M†}
Provider ID: 100055662003
5930 PRIESTLY DR
CARLSBAD, CA 92008
(760) 434-6060
Korean
Effective as of 01-NOV-21

CHONG, MARIBETH, MD^F
Provider ID: 100092861003
5930 PRIESTLY DR
CARLSBAD, CA 92008
(760) 434-6060
Spanish, Tagalog
Effective as of 01-NOV-21

HALL, ANDREW, MD^{M†}
Provider ID: 100089811012
2910 JEFFERSON ST STE
100
CARLSBAD, CA 92008
(760) 729-7186
Effective as of 01-DEC-22

FAMILY PRACTICE

ALANIZ, MATEO, MD^{M†}
Provider ID: 100220769006
678 3RD AVE
CHULA VISTA, CA 91910
(619) 662-4100

Spanish
Effective as of 01-JAN-21

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

ALB, OVIDIU, MD^{M†}
Provider ID: 100034030005
480 4TH AVE STE 202
CHULA VISTA, CA 91910
(619) 427-3361
Romanian, Spanish,
Tagalog
Effective as of 01-OCT-12

ALB, OVIDIU, MD^{M†}
Provider ID: 100034030017
480 4TH AVE STE 202
CHULA VISTA, CA 91910
(619) 427-3361
Romanian, Spanish,
Tagalog
Effective as of 01-NOV-20

ALB, OVIDIU, MD^{M†}
Provider ID: 100034030019
480 4TH AVE STE 202
CHULA VISTA, CA 91910
(619) 427-3361
Romanian, Spanish,
Tagalog
Effective as of 01-APR-22

ALB, OVIDIU, MD^{M†}
Provider ID: 100034030016
480 4TH AVE STE 202
CHULA VISTA, CA 91910
(619) 427-3361
Romanian, Spanish,
Tagalog

Effective as of 01-JAN-21

ALB, OVIDIU, MD^{M†}
Provider ID: 100034030006
480 4TH AVE STE 202
CHULA VISTA, CA 91910
(619) 427-3361
Romanian, Spanish,
Tagalog
Effective as of 01-JAN-14

ALJAWADI, GEORGIA, DO^{F†}
Provider ID: 100133625021
480 4TH AVE STE 202
CHULA VISTA, CA 91910
(619) 427-3361
Filipino, Spanish, Tagalog
Effective as of 01-APR-22

ALJAWADI, GEORGIA, DO^{F†}
Provider ID: 100133625008
480 4TH AVE STE 202
CHULA VISTA, CA 91910
(619) 427-3361
Filipino, Spanish, Tagalog
Effective as of 01-JAN-14

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

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

ALJAWADI, GEORGIA, DO^{F††}
Provider ID: 100133625022

480 4TH AVE STE 202
CHULA VISTA, CA 91910
(619) 427-3361
Filipino, Spanish, Tagalog
Effective as of 01-SEP-22

ALVAREZ-ESTRADA, MIGUEL, MD^{Mt}

Provider ID: 100360099015
1637 3RD AVE
CHULA VISTA, CA 91911
(619) 662-4100
Spanish
Effective as of 01-MAY-22

ARCE GOMEZ, LAURA, MD^F

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

FARRIS, REUBEN, MD^{Mt}

Provider ID: 100105788004
340 4TH AVE STE 2
CHULA VISTA, CA 91910
(619) 422-8338
Spanish
Effective as of 01-OCT-12

GARCIA, KARLA, MD^{Ft}

Provider ID: 100269760002
678 3RD AVE
CHULA VISTA, CA 91910
(619) 662-4100
Spanish
Teleservice
Effective as of 01-MAR-16

GARCIA, KARLA, MD^{Ft}

Provider ID: 100269760005
678 3RD AVE
CHULA VISTA, CA 91910
(619) 662-4100

Spanish
Teleservice
Effective as of 01-APR-23

HERNANDEZ, RALPH, MD^{Mt}

Provider ID: 100080408020
880 3RD AVE STE A
CHULA VISTA, CA 91911
(619) 662-4100
Spanish
Effective as of 01-AUG-22

JIMENEZ, KRYSTAL, MD^{Ft}

Provider ID: 100359300004
678 3RD AVE
CHULA VISTA, CA 91910
(619) 662-4100
Effective as of 01-JAN-21

LOZANO, JUAN, MD^M

Provider ID: 100419136002
1637 THIRD AVE
STE B
CHULA VISTA, CA 91911
(619) 662-4100
Effective as of 01-DEC-23

MARTINEZ, ELADIO, MD^M

Provider ID: 100415320005
299 J ST
CHULA VISTA, CA 91910
(858) 779-2366
Spanish
Teleservice
Effective as of 01-DEC-23

MARTINEZ, ELADIO, MD^M

Provider ID: 100415320002
299 J ST
CHULA VISTA, CA 91910
(858) 779-2366
Spanish
Teleservice
Effective as of 01-OCT-23

MATTHEWS, MERRITT, MD^{Mt}

Provider ID: 100021162015
752 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
(619) 656-0206
Spanish, Tagalog
Effective as of 01-NOV-20

MATTHEWS, MERRITT, MD^{Mt}

Provider ID: 100021162019
752 MEDICAL CENTER CT
CHULA VISTA, CA 91911
(619) 656-0206
Spanish, Tagalog
Effective as of 01-FEB-21

MERRILL, SARAH, MD^{Ft}

Provider ID: 100214679020
678 3RD AVE
CHULA VISTA, CA 91910
(619) 662-4100
Spanish
Effective as of 01-JAN-21

MONDRAGON, GUSTAVO, MD^{Mt}

Provider ID: 100177550028
480 4TH AVE STE 500
CHULA VISTA, CA 91910
(619) 656-5252
Spanish
Effective as of 01-FEB-23

MONDRAGON, GUSTAVO, MD^{Mt}

Provider ID: 100177550027
480 4TH AVE STE 500
CHULA VISTA, CA 91910
(619) 656-5252
Spanish
Effective as of 01-FEB-23

MONDRAGON, GUSTAVO, MD^M

M

Provider ID: 100177550016

855 THIRD AVE
STE 2230
CHULA VISTA, CA 91911

(619) 656-5252

Spanish

Effective as of 01-FEB-24

MONDRAGON, GUSTAVO, MD

M

Provider ID: 100177550031

855 THIRD AVE
STE 2230
CHULA VISTA, CA 91911

(619) 656-5252

Spanish

Effective as of 01-OCT-23

MOYA, MARY, MD

F*

Provider ID: 100099596009

678 3RD AVE
CHULA VISTA, CA 91910

(619) 662-4100

Spanish

Effective as of 01-APR-23

NGUYEN, CARIE, MD

F†

Provider ID: 100099766010

678 3RD AVE
CHULA VISTA, CA 91910

(619) 662-4100

Effective as of 01-APR-23

NGUYEN, CARIE, MD

F†

Provider ID: 100099766005

678 3RD AVE
CHULA VISTA, CA 91910

(619) 662-4100

Effective as of 01-NOV-20

NOVENCIDO, JOSEPH, DO

M†

Provider ID: 100244053017

752 MEDICAL CENTER CT
STE 210

CHULA VISTA, CA 91911

(619) 527-7700

Spanish

Effective as of 01-SEP-20

ORTIZ ILIZALITURRI, ANA, MD

F††

Provider ID: 100394347004

678 3RD AVE
CHULA VISTA, CA 91910

(619) 662-4100

Spanish

Teleservice

Effective as of 01-OCT-22

PALOMINO, MARY, MD

F†

Provider ID: 100249271002

678 3RD AVE
CHULA VISTA, CA 91910

(619) 662-4100

Spanish

Effective as of 01-JUL-15

PATEL, PAAVAN, DO

M

Provider ID: 100413256007

752 MEDICAL CENTER CT
CHULA VISTA, CA 91911

(619) 527-7700

Effective as of 01-NOV-23

PATEL, PAAVAN, DO

M

Provider ID: 100413256011

752 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911

(619) 656-0206

Effective as of 01-DEC-23

PIEROS, JANELLE, DO

F†

Provider ID: 100220799004

678 3RD AVE
CHULA VISTA, CA 91910

(619) 662-4100

Spanish, Faroese

Effective as of 01-OCT-15

RIZKALLAH, JEAN, MD

M††

Provider ID: 100106136010

450 4TH AVE STE 408
CHULA VISTA, CA 91910

(619) 691-1990

French, Spanish

Effective as of 01-MAR-16

RIZKALLAH, JEAN, MD

M†

Provider ID: 100106136009

450 4TH AVE STE 408
CHULA VISTA, CA 91910

(619) 691-1990

French, Spanish

Effective as of 01-MAR-15

ROSADO, IVAN, MD

M†

Provider ID: 100365788004

1637 3RD AVE STE H
CHULA VISTA, CA 91911

(619) 662-4100

Effective as of 01-FEB-21

ROSADO, IVAN, MD

M†

Provider ID: 100365788003

1635 3RD AVE
CHULA VISTA, CA 91911

(619) 662-4100

Effective as of 01-JAN-21

STILLWELL, CARLA, MD

F†

Provider ID: 100147691019

480 4TH AVE STE 202
CHULA VISTA, CA 91910

(619) 427-3361

Polish, Portuguese, Spanish

Effective as of 01-APR-22

STILLWELL, CARLA, MD

F†

Provider ID: 100147691017

480 4TH AVE STE 202
CHULA VISTA, CA 91910

(619) 427-3361

Polish, Portuguese, Spanish

Effective as of 01-JAN-21

STILLWELL, CARLA, MD^{F†}

Provider ID: 100147691006

480 4TH AVE STE 202
CHULA VISTA, CA 91910

(619) 427-3361

Polish, Portuguese, Spanish

Effective as of 01-JAN-14

STILLWELL, CARLA, MD^{F†}

Provider ID: 100147691020

480 4TH AVE STE 202
CHULA VISTA, CA 91910

(619) 427-3361

Polish, Portuguese, Spanish

Effective as of 01-SEP-22

STILLWELL, CARLA, MD^{F†}

Provider ID: 100147691005

480 4TH AVE STE 202
CHULA VISTA, CA 91910

(619) 427-3361

Polish, Portuguese, Spanish

Effective as of 01-OCT-12

TALAVERA, GREGORY, MD^M

Provider ID: 100334847006

678 3RD AVE
CHULA VISTA, CA 91910

(619) 662-4100

Spanish

Teleservice

Effective as of 01-APR-23

TREJO, RAUL, MD^M

Provider ID: 100088864004

678 3RD AVE
CHULA VISTA, CA 91910

(619) 662-4100

Spanish

Effective as of 01-JAN-14

**VAZQUEZ-BOJORQUEZ,
ALEJANDRA, MD^F**

Provider ID: 100391945011

752 MEDICAL CENTER CT
STE 200

CHULA VISTA, CA 91911

(858) 554-1212

Spanish

Effective as of 01-DEC-22

VOURLITIS, MELISSA, DO^{F*}

Provider ID: 100090572020

3302 BONITA RD
CHULA VISTA, CA 91910

(858) 832-2500

Teleservice

Effective as of 01-NOV-23

WHITLEY, NICHOLAS, MD^{M†}

Provider ID: 100197848006

678 3RD AVE
CHULA VISTA, CA 91910

(619) 662-4100

Spanish

Effective as of 01-JAN-21

FQHC

**CHULA VISTA FAMILY HLTH
CTR,**

Provider ID: PG0025044035

251 LANDIS AVE
CHULA VISTA, CA 91910

(619) 515-2500

Effective as of 01-JAN-21

CHULA VISTA PEDIATRICS,

Provider ID: PG0092670003

855 3RD AVE STE 2200
CHULA VISTA, CA 91911

(619) 662-4100

Teleservice

Effective as of 01-JAN-21

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

Provider ID: PG0082946004

352 L ST

CHULA VISTA, CA 91911

(619) 515-2325

Effective as of 01-JAN-21

**SAN YSIDRO HEALTH CHULA
VISTA, †**

Provider ID: PG0047560016

678 3RD AVE
CHULA VISTA, CA 91910

(619) 662-4100

Teleservice

Effective as of 01-JAN-21

**SAN YSIDRO HEALTH SOUTH
BAY LATINO RESEARCH
CENTER,**

Provider ID: PG0120846002

780 BAY BLVD STE 200
CHULA VISTA, CA 91910

(619) 662-4100

Effective as of 01-APR-23

GENERAL PRACTICE

FARRIS, REUBEN, MD^{M†}

Provider ID: 100105788005

340 4TH AVE STE 2
CHULA VISTA, CA 91910

(619) 422-8338

Spanish

Effective as of 01-JAN-14

GUEFEN, URI, MD^{M†}

Provider ID: 100072802029

299 J ST
CHULA VISTA, CA 91910

(858) 779-2366

Spanish


Teleservice




Effective as of 01-DEC-23




GUEFEN, URI, MD^{M†}

Provider ID: 100072802018



299 J ST




CHULA VISTA, CA 91910
 (858) 779-2366
 Spanish
 Teleservice
 Effective as of 01-MAR-22

GUEFEN, URI, MD^{M†}
 Provider ID: 100072802015
 299 J ST
 CHULA VISTA, CA 91910
 (858) 779-2366
 Spanish
 Teleservice
 Effective as of 01-NOV-23




TOLEDO-NADER, CAROLL, MD^{M†}
 Provider ID: 100106153012
 678 3RD AVE
 CHULA VISTA, CA 91910
 (619) 662-4100
 Spanish
 Effective as of 01-SEP-19




INTERNAL MEDICINE



BALDERAS-MAGALLANES, RODOLFO, MD^M
 Provider ID: 100419155002
 678 THIRD AVE
 CHULA VISTA, CA 91910
 (619) 662-4100
 Teleservice
 Effective as of 01-DEC-23




BRACE, ELION, MD^{M†}
 Provider ID: 100159959035
 450 4TH AVE STE 408
 CHULA VISTA, CA 91910
 (619) 691-1990
 Italian, Spanish, Albanian
 Effective as of 01-OCT-23




BRACE, ELION, MD^{M†}
 Provider ID: 100159959020


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



CHEN, TSUH YIN, MD^F
 Provider ID: 100187934012
 678 3RD AVE
 CHULA VISTA, CA 91910
 (619) 662-4100
 Portuguese, Spanish
 Effective as of 01-APR-23




DE LA ROSA, JOSE, MD^M
 Provider ID: 100357668004
 880 3RD AVE STE A
 CHULA VISTA, CA 91911
 (619) 662-4100
 Teleservice
 Effective as of 01-FEB-23




DE LA ROSA, RENATO, MD^M
 Provider ID: 100110262022
 754 MEDICAL CENTER CT
 STE 103
 CHULA VISTA, CA 91911
 (619) 397-5001
 Spanish, Tagalog
 Effective as of 01-SEP-22




DE LA ROSA, RENATO, MD^M
 Provider ID: 100110262019
 754 MEDICAL CENTER CT
 STE 103
 CHULA VISTA, CA 91911
 (619) 397-5001
 Spanish, Tagalog
 Effective as of 01-JAN-21




DE LA ROSA, RENATO, MD^M
 Provider ID: 100110262018
 754 MEDICAL CENTER CT
 STE 103
 CHULA VISTA, CA 91911




 (619) 397-5001
 Spanish, Tagalog
 Effective as of 01-JAN-21

DE LA ROSA, RENATO, MD^M
 Provider ID: 100110262005
 754 MEDICAL CENTER CT
 STE 103
 CHULA VISTA, CA 91911
 (619) 397-5001
 Spanish, Tagalog
 Effective as of 01-FEB-18

HAMMETT, ERIN, DO^{F†}
 Provider ID: 100274639012
 678 3RD AVE
 CHULA VISTA, CA 91910
 (619) 662-4100
 Spanish
 Effective as of 01-MAR-21

KAISEY, MUSHRIK, MD^{M†}
 Provider ID: 100024815019
 340 4TH AVE STE 9
 CHULA VISTA, CA 91910
 (619) 426-9731
 Arabic, Spanish
 Effective as of 01-JAN-21

KAISEY, MUSHRIK, MD^{M†}
 Provider ID: 100024815007
 340 4TH AVE STE 9
 CHULA VISTA, CA 91910
 (619) 426-9731
 Arabic, Spanish
 Effective as of 01-OCT-12

KAISEY, MUSHRIK, MD^{M††}
 Provider ID: 100024815021
 340 4TH AVE STE 9
 CHULA VISTA, CA 91910
 (619) 426-9731
 Arabic, Spanish
 Effective as of 01-SEP-22

KAISEY, MUSHRIK, MD^{M†}

Provider ID: 100024815009

340 4TH AVE STE 9
CHULA VISTA, CA 91910

(619) 426-9731

Arabic, Spanish

Effective as of 01-JAN-14

MAY, LOUIS, MD^{M†}

Provider ID: 100325305003

1061 TIERRA DEL REY STE
303 304 305

CHULA VISTA, CA 91910

(619) 662-4100

Spanish

Teleservice

Effective as of 01-JUN-21

OLIVER, DEANNA, MD^{F†}

Provider ID: 100328564041

1323 3RD AVE
CHULA VISTA, CA 91911

(619) 409-6900

Spanish

Effective as of 01-NOV-23

OLIVER, DEANNA, MD^F

Provider ID: 100328564040

2436 FENTON ST STE
100-B

CHULA VISTA, CA 91914

(619) 264-1934

Spanish

Effective as of 01-NOV-23

OLIVER, DEANNA, MD^{F†}

Provider ID: 100328564034

1323 3RD AVE
CHULA VISTA, CA 91911

(619) 409-6900

Spanish

Effective as of 01-SEP-22

OLIVER, DEANNA, MD^{F†}

Provider ID: 100328564027

1323 3RD AVE
CHULA VISTA, CA 91911

(619) 409-6900

Spanish

Effective as of 01-SEP-21

PENA, JOSE, MD^{M†}

Provider ID: 100104432022

333 H ST STE 1065
CHULA VISTA, CA 91910

(619) 691-1766

Spanish

Effective as of 01-MAY-21

PENA, JOSE, MD^{M†}

Provider ID: 100104432023

333 H ST STE 1065
CHULA VISTA, CA 91910

(619) 691-1766

Spanish

Effective as of 01-MAY-21

PENA, JOSE, MD^{M†}

Provider ID: 100104432024

333 H ST STE 1065
CHULA VISTA, CA 91910

(619) 691-1766

Spanish

Effective as of 01-JUL-21

PENA, JOSE, MD^{M†}

Provider ID: 100104432025

333 H ST STE 1065
CHULA VISTA, CA 91910

(619) 691-1766

Spanish

Effective as of 01-FEB-23

UWEDJOJEVWE, LETICIA, MD^{F†}

F†

Provider ID: 100110303013

340 4TH AVE STE 10
CHULA VISTA, CA 91910

(619) 934-2215

Spanish

Effective as of 01-DEC-17

UWEDJOJEVWE, LETICIA, MD^{F†}

F†

Provider ID: 100110303030

340 4TH AVE STE 10
CHULA VISTA, CA 91910

(619) 934-2215

Spanish

Effective as of 01-JAN-21

UWEDJOJEVWE, LETICIA, MD^{F†}

F†

Provider ID: 100110303015

340 4TH AVE STE 10
CHULA VISTA, CA 91910

(619) 934-2215

Spanish

Effective as of 01-JAN-18

UWEDJOJEVWE, LETICIA, MD^{F†}

F†

Provider ID: 100110303031

340 4TH AVE STE 10
CHULA VISTA, CA 91910

(619) 934-2215

Spanish

Effective as of 01-NOV-23

PEDIATRICS

GARCIA, CARLOS, MD^{M†}

Provider ID: 100067783008

1392 E PALOMAR ST STE
501

CHULA VISTA, CA 91913

(619) 271-4059

Spanish

Effective as of 01-JAN-14

INTERNAL MEDICINE

ZAKI, MICHELLE, DO^F

Provider ID: 100360975007

3955 BEDFORD CANYON

RD
STE 103
CORONA, CA 92883
☎ (951) 293-4722
Teleservice
Effective as of 01-AUG-23

FAMILY PRACTICE

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

INTERNAL MEDICINE

PATHAK, RAJIV, MD^M
Provider ID: 100423996002
📍 32585 GOLDEN LANTERN
ST STE E
DANA POINT, CA 92629
☎ (949) 240-2555
Effective as of 01-MAR-24

GENERAL PRACTICE

KREMER, ARNOLD, DO^{M†}
Provider ID: 100023664009
📍 1349 CAMINO DEL MAR
STE B
DEL MAR, CA 92014
☎ (858) 925-8233
📠 French
Teleservice
Effective as of 01-JAN-21

FAMILY PRACTICE

ALMANSOUR, MUMTAZ, MD^{M†}
Provider ID: 100107873026
📍 165 S 1ST ST

EL CAJON, CA 92019
☎ (619) 312-0347
📠 Arabic, Spanish, Kurdish
Effective as of 01-JAN-21

ALMANSOUR, MUMTAZ, MD^{M†}
Provider ID: 100107873025
📍 330 S MAGNOLIA AVE STE
101
EL CAJON, CA 92020
☎ (619) 593-3007
📠 Arabic, Spanish, Kurdish
Effective as of 01-JAN-21

ALMANSOUR, MUMTAZ, MD^{M†}
Provider ID: 100107873024
📍 330 S MAGNOLIA AVE STE
101
EL CAJON, CA 92020
☎ (619) 593-3007
📠 Arabic, Spanish, Kurdish
Effective as of 01-JUL-22

BEYENE, YEMISRACH, MD^{F†}
Provider ID: 100376573004
📍 5442 SYCUAN RD
EL CAJON, CA 92019
☎ (619) 445-0707
Effective as of 01-SEP-22

GREEN, HANNAH, MD^F
Provider ID: 100403549002
📍 855 E MADISON AVE
EL CAJON, CA 92020
☎ (619) 440-2751
📠 Spanish
Effective as of 01-APR-23

JALISI, NEJAT, MD^{F†}
Provider ID: 100114413018
📍 1320 E MADISON AVE
EL CAJON, CA 92021
☎ (619) 456-9800
📠 Arabic, Farsi, Spanish
Effective as of 01-JAN-21

JALISI, NEJAT, MD^{F†}
Provider ID: 100114413020
📍 1320 E MADISON AVE
EL CAJON, CA 92021
☎ (619) 456-9800
📠 Arabic, Farsi, Spanish
Effective as of 01-SEP-22



KASAWA, JOHN, MD^{M†}
Provider ID: 100039117023
📍 875 EL CAJON BLVD
EL CAJON, CA 92020
☎ (619) 662-4100
📠 Arabic, Spanish
Teleservice
Effective as of 01-APR-23

KASAWA, JOHN, MD^{M†}
Provider ID: 100039117021
📍 875 EL CAJON BLVD
EL CAJON, CA 92020
☎ (619) 662-4100
📠 Arabic, Spanish
Teleservice
Effective as of 01-JAN-21



KUNIN-RIDA, TERI, MD^{F†}
Provider ID: 100064070015
📍 165 S 1ST ST
EL CAJON, CA 92019
☎ (619) 312-0347
📠 Armenian, Arabic, Spanish
Teleservice
Effective as of 01-OCT-21

MCHENRY, KATHRYN, DO^F
Provider ID: 100320650010
📍 855 E MADISON AVE
EL CAJON, CA 92020
☎ (619) 440-2751
📠 Spanish
Effective as of 01-JAN-24



MOULD, KEVIN, MD^{M†}

Provider ID: 100112431013
 855 E MADISON AVE
 EL CAJON, CA 92020
 (619) 440-2751
 Effective as of 01-JAN-24



MOULD, KEVIN, MD^{M†}

Provider ID: 100112431012
 855 E MADISON AVE
 EL CAJON, CA 92020
 (619) 440-2751
 Effective as of 01-AUG-20




PUTRUS, RAMIZ, MD^M

Provider ID: 100348831004
 183 S 1ST ST
 EL CAJON, CA 92019
 (619) 328-1335
 Effective as of 01-AUG-22




RONQUILLO, KAREN AN, DO^F

Provider ID: 100421622002
 855 E MADISON AVE
 EL CAJON, CA 92020
 (619) 440-2751
 Effective as of 01-FEB-24

ROUEL, LINDA, MD^{F†}




Provider ID: 100259719024
 860 JAMACHA RD STE 107
 EL CAJON, CA 92019
 (619) 456-9920
 Arabic, Mandarin, Syriac
 Effective as of 01-AUG-21

ROUEL, LINDA, MD^{F†}




Provider ID: 100259719007
 860 JAMACHA RD STE 107
 EL CAJON, CA 92019
 (619) 456-9920
 Arabic, Mandarin, Syriac
 Effective as of 01-FEB-18

ROUEL, LINDA, MD^{F†}




Provider ID: 100259719020

 860 JAMACHA RD STE 107
 EL CAJON, CA 92019
 (619) 456-9920
 Arabic, Mandarin, Syriac
 Effective as of 01-JAN-21



ROUEL, LINDA, MD^{F†}

Provider ID: 100259719021
 860 JAMACHA RD STE 107
 EL CAJON, CA 92019
 (619) 456-9920
 Arabic, Mandarin, Syriac
 Effective as of 01-JAN-21



ROUEL, LINDA, MD^{F†}

Provider ID: 100259719025
 860 JAMACHA RD STE 107
 EL CAJON, CA 92019
 (619) 456-9920
 Arabic, Mandarin, Syriac
 Effective as of 01-SEP-22

SALEM, RAMSEY, MD^{M†}

Provider ID: 100360207006
 875 EL CAJON BLVD
 EL CAJON, CA 92020
 (858) 939-5864
 Effective as of 01-AUG-21

SAZEGAR, PAYAM, MD^{M†}

Provider ID: 100187888014
 1032 BROADWAY
 EL CAJON, CA 92021
 (619) 795-5991
 Teleservice



Effective as of 01-JUL-21

SAZEGAR, PAYAM, MD^{M†}



Provider ID: 100187888012
 165 S 1ST ST
 EL CAJON, CA 92019
 (619) 312-0347
 Teleservice

Effective as of 01-JUL-21



STONES, RACHEL, MD^F

Provider ID: 100387928010
 165 S 1ST ST
 EL CAJON, CA 92019
 (619) 312-0347
 Teleservice
 Effective as of 01-MAY-22

STONES, RACHEL, MD^F



Provider ID: 100387928009
 1032 BROADWAY
 EL CAJON, CA 92021
 (619) 795-5991
 Teleservice
 Effective as of 01-MAY-22

VOURLITIS, MELISSA, DO^{F*}



Provider ID: 100090572018
 11588 VIA RANCHO SAN
 DIEGO
 EL CAJON, CA 92019
 (858) 832-2500
 Teleservice
 Effective as of 01-NOV-23

FQHC

CENTRO MEDICO EL CAJON,

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

**CHASE AVENUE FAMILY
HEALTH CTRS INC,**

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

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

Provider ID: PG0084245003

525 E MAIN ST
EL CAJON, CA 92020

(619) 515-2498

Effective as of 01-JAN-21

**LA MAESTRA CHC EL CAJON
BROADWAY, †**

Provider ID: PG0085229003

1032 BROADWAY
EL CAJON, CA 92021

(619) 795-5991

Effective as of 01-JAN-21

**LA MAESTRA FAMILY CLINIC
INC, †**

Provider ID: PG0053396002

165 S 1ST ST
EL CAJON, CA 92019

(619) 312-0347

Teleservice

Effective as of 01-JAN-21

**SAN YSIDRO HEALTH EL
CAJON,**

Provider ID: PG0111464002

875 EL CAJON BLVD
EL CAJON, CA 92020

(619) 662-4100

Teleservice

Effective as of 01-JAN-21

GENERAL PRACTICE

MOOSAVI, MOHAMMAD, MD^{M†}

Provider ID: 100339082002

343 E MAIN ST STE 102
EL CAJON, CA 92020

(619) 447-6001

Farsi

Effective as of 01-JUL-19

INTERNAL MEDICINE

AL-TAMEEMI, AHMED, MD^{M†}

Provider ID: 100338426004

133 W MAIN ST STE 100
EL CAJON, CA 92020

(619) 401-0404

Effective as of 01-NOV-20

AWDISHO, ALAN, DO^{M†}

Provider ID: 100381973002

875 EL CAJON BLVD
EL CAJON, CA 92020

(619) 662-4100

Teleservice

Effective as of 01-JAN-22

BENSON, JIMI, MD^{M†}

Provider ID: 100149523029

1351 BROADWAY
EL CAJON, CA 92021

(619) 383-6703

Spanish, Vietnamese

Effective as of 01-APR-21

BENSON, JIMI, MD^{M†}

Provider ID: 100149523023

1351 BROADWAY
EL CAJON, CA 92021

(619) 383-6703

Spanish, Vietnamese

Effective as of 01-JAN-21

BENSON, JIMI, MD^{M†}

Provider ID: 100149523026

1351 BROADWAY
EL CAJON, CA 92021

(619) 383-6703

Spanish, Vietnamese

Effective as of 01-JUN-21

BENSON, JIMI, MD^{M†}

Provider ID: 100149523028

1351 BROADWAY
EL CAJON, CA 92021

(619) 383-6703

Spanish, Vietnamese

Effective as of 01-MAR-21

BENSON, JIMI, MD^{M†}

Provider ID: 100149523031

1351 BROADWAY
EL CAJON, CA 92021

(619) 383-6703

Spanish, Vietnamese

Effective as of 01-OCT-23

EL GHONEIMY, AHMED, MD^{M†}

Provider ID: 100103500015

165 S 1ST ST
EL CAJON, CA 92019

(619) 312-0347

Arabic

Teleservice

Effective as of 01-AUG-22

**JAHANPANA, FERESHTEH,
MD^{F†}**

Provider ID: 100076454017

343 E MAIN ST STE 101
EL CAJON, CA 92020

(619) 447-6001

Arabic, Farsi, Spanish

Effective as of 01-AUG-20

**JAHANPANA, FERESHTEH,
MD^{F†}**

Provider ID: 100076454007

343 E MAIN ST STE 101
EL CAJON, CA 92020

(619) 447-6001

Arabic, Farsi, Spanish

Effective as of 01-JUL-19

**JAHANPANA, FERESHTEH,
MD^{F†}**

Provider ID: 100076454021

343 E MAIN ST STE 101
EL CAJON, CA 92020

(619) 447-6001

Arabic, Farsi, Spanish

Effective as of 01-SEP-22

MANSOUR, DAVID, DO^{M†}
Provider ID: 100390972007

855 E MADISON AVE
EL CAJON, CA 92020
(619) 440-2751
Arabic
Effective as of 01-NOV-22

MICHAEL, RAMI, MD^{M†}
Provider ID: 100341876009

875 EL CAJON BLVD
EL CAJON, CA 92020
(619) 662-4100
Arabic
Teleservice
Effective as of 01-DEC-22

NASSIR, BASSAM, MD^{M††}
Provider ID: 100159191015

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

NASSIR, BASSAM, MD^{M††}
Provider ID: 100159191011

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

ROUEL, WADI, MD^{M†}

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

ROUEL, WADI, MD^{M†}

Provider ID: 100246050009
860 JAMACHA RD STE 107

EL CAJON, CA 92019
(619) 456-9920
Arabic, Spanish, Syriac
Effective as of 01-JAN-21

ROUEL, WADI, MD^{M†}

Provider ID: 100246050016
860 JAMACHA RD STE 107
EL CAJON, CA 92019
(619) 456-9920
Arabic, Spanish, Syriac
Effective as of 01-SEP-22

ROUEL, WADI, MD^{M†}

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

SHEIKH-MOHAMED, HALA, MD^F

Provider ID: 100338872003
875 EL CAJON BLVD
EL CAJON, CA 92020
(619) 662-4100
Arabic, Hindi, Urdu
Teleservice
Effective as of 01-OCT-22

TCHAKMAKJIAN, LEVON, MD^{M†}

Provider ID: 100353414007
875 EL CAJON BLVD
EL CAJON, CA 92020
(619) 662-4100
Armenian, Hebrew
Effective as of 01-NOV-21

ZAYED, AHMAD, MD^M

Provider ID: 100373969005
133 W MAIN ST STE 100
EL CAJON, CA 92020
(619) 401-0404

Arabic, Chinese, Mandarin
Effective as of 01-NOV-23

FAMILY PRACTICE

CLOTFELTER, CHRISTINE, DO^{F†}

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

DUCK, CRAIG, MD^M

Provider ID: 100086514008
477 N EL CAMINO REAL
STE A306
ENCINITAS, CA 92024
(760) 942-0118
Effective as of 01-SEP-21

FARSAD, RAMIN, MD^M

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

KAKIMOTO, AMY, MD^{F†}

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

MERCER, SCOTT, MD^{M*}

Provider ID: 100030142008
320 SANTA FE DR STE 205
ENCINITAS, CA 92024
(760) 944-8484
Spanish

Effective as of 01-SEP-21

PAYNE, RICHARD, MD^{M†}

Provider ID: 100069305009

477 N EL CAMINO REAL
STE A306
ENCINITAS, CA 92024

(760) 942-0118

Spanish

Effective as of 01-SEP-21

SEXTON, PERRY, MD^{M††}

Provider ID: 100099693003

351 SANTA FE DR STE 101
ENCINITAS, CA 92024

(760) 274-1385

Spanish

Effective as of 01-FEB-11

WILLIE, KADEN, DO^M

Provider ID: 100350661007

1130 2ND ST
ENCINITAS, CA 92024

(760) 736-6767

Portuguese

Effective as of 01-SEP-23

FQHC

TRUECARE,

Provider ID: PG0092584007

1130 2ND ST
ENCINITAS, CA 92024

(760) 753-7842

Teleservice

Effective as of 01-JUL-22

GENERAL PRACTICE

FARSAD, RAMIN, MD^M

Provider ID: 100028293009

477 N EL CAMINO REAL
STE A100
ENCINITAS, CA 92024

(760) 943-9111

Farsi, Turkish, Fataleka
Effective as of 01-JAN-21

INTERNAL MEDICINE

STEPHENSON, ROBERT, MD^{M††}

Provider ID: 100031646009

320 SANTA FE DR STE 303
ENCINITAS, CA 92024

(760) 943-6730

Spanish

Effective as of 01-SEP-21

TAGDIRI, KEVEN, MD^{M*}

Provider ID: 100064987002

4401 MANCHESTER AVE
STE 103
ENCINITAS, CA 92024

(858) 756-3021

Farsi, Spanish

Effective as of 01-MAR-03

FAMILY PRACTICE

AVILA, MICHAEL, MD^{M††}

Provider ID: 100369494002

460 N ELM ST
ESCONDIDO, CA 92025

(833) 867-4642

Effective as of 01-JUN-21

COX, VICTORIA, MD^{F†}

Provider ID: 100374049005

704 E GRAND AVE
ESCONDIDO, CA 92025

(619) 662-4100

Teleservice

Effective as of 01-AUG-22

DE ROTH, GEORGINE, MD^F

Provider ID: 100409222006

362 W MISSION AVE STE
105
ESCONDIDO, CA 92025

(760) 741-1224

(760) 741-1224

French, Hungarian, Spanish
Effective as of 01-DEC-23

DE ROTH, GEORGINE, MD^F

Provider ID: 100409222004

362 W MISSION AVE STE
105
ESCONDIDO, CA 92025

(760) 741-1224

French, Hungarian, Spanish

Effective as of 01-AUG-23

DE ROTH, GEORGINE, MD^F

Provider ID: 100409222002

362 W MISSION AVE STE
105
ESCONDIDO, CA 92025

(760) 741-1224

French, Hungarian, Spanish

Effective as of 01-JUL-23

ESPARZA, SOPHIA, MD^F

Provider ID: 100402893002

488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025

(760) 466-9800

Spanish

Effective as of 01-MAR-23

KAUR, JATINDER, MD^F

Provider ID: 100315025010

460 N ELM ST
ESCONDIDO, CA 92025

(760) 520-8100

Hindi, Urdu

Effective as of 01-AUG-21

MCHENRY, KATHRYN, DO^{F†}

Provider ID: 100320650005

460 N ELM ST
ESCONDIDO, CA 92025

(760) 520-8100

Spanish

Effective as of 01-APR-21

MCHENRY, KATHRYN, DO^F

Provider ID: 100320650016

728 E VALLEY PKWY
ESCONDIDO, CA 92025

(760) 737-6900

Spanish

Effective as of 01-FEB-24

MCHENRY, KATHRYN, DO^{Ft}

Provider ID: 100320650009

460 N ELM ST
ESCONDIDO, CA 92025

(760) 520-8100

Spanish

Effective as of 01-JAN-24

PATEL, JITENBHAI, MD^M

Provider ID: 100339325007

728 E VALLEY PKWY
ESCONDIDO, CA 92025

(760) 737-6900

Effective as of 01-JAN-24

PATEL, JITENBHAI, MD^M

Provider ID: 100339325006

460 N ELM ST
ESCONDIDO, CA 92025

(760) 520-8100

Effective as of 01-JAN-24

RAO, USHA, MD^{Ft}

Provider ID: 100381993007

704 E GRAND AVE
ESCONDIDO, CA 92025

(619) 662-4100

Hindi, Spanish

Effective as of 01-AUG-22

**RASHCOVSKY SCHIFF, KARIN,
MD^F**

Provider ID: 100331220005

460 N ELM ST
ESCONDIDO, CA 92025

(760) 520-8100

French

Effective as of 01-AUG-20

**RASHCOVSKY SCHIFF, KARIN,
MD^F**

Provider ID: 100331220007

460 N ELM ST
ESCONDIDO, CA 92025

(760) 520-8100

French

Effective as of 01-JAN-24

SCHULTZ, JAMES, MD^M

Provider ID: 100030577030

728 E VALLEY PKWY
ESCONDIDO, CA 92025

(760) 737-6900

Farsi, Greek, Spanish

Effective as of 01-JAN-24

SCHULTZ, JAMES, MD^M

Provider ID: 100030577026

728 E VALLEY PKWY
ESCONDIDO, CA 92025

(760) 737-6900

Farsi, Greek, Spanish

Effective as of 01-MAR-23

SCHULTZ, JAMES, MD^{Mt}

Provider ID: 100030577016

460 N ELM ST
ESCONDIDO, CA 92025

(760) 520-8100

Farsi, Greek, Spanish

Effective as of 01-AUG-20

SCHULTZ, JAMES, MD^{Mt}

Provider ID: 100030577028

460 N ELM ST
ESCONDIDO, CA 92025

(760) 520-8100

Farsi, Greek, Spanish

Effective as of 01-JAN-24

SIVA, TENAYA, MD^M

Provider ID: 100418703004

704 E GRAND AVE
ESCONDIDO, CA 92025

(619) 662-4100

Teleservice

Effective as of 01-NOV-23

SNYDER, CHRISTOPHER, DO^{Mt}

Provider ID: 100024789048

704 E GRAND AVE
ESCONDIDO, CA 92025

(619) 662-4100

Spanish

Teleservice

Effective as of 01-FEB-22

VOURLITIS, MELISSA, DO^{Ft}

Provider ID: 100090572019

710 W 13TH AVE
ESCONDIDO, CA 92025

(858) 832-2500

Teleservice

Effective as of 01-NOV-23

FQHC

CENTRO MEDICO ESCONDIDO,

Provider ID: PG0083717004

1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

(760) 871-0606

Teleservice

Effective as of 01-JAN-21

**ESCONDIDO FAMILY HEALTH
CENTER,**

Provider ID: PG0125224002

128 N BROADWAY
ESCONDIDO, CA 92025



(619) 515-2474

Effective as of 01-NOV-23



NEIGHBORHOOD

HEALTHCARE ESCONDIDO,



Provider ID: PG0024990052

 460 N ELM ST
ESCONDIDO, CA 92025
 (760) 520-8100
Teleservice
Effective as of 01-JUL-22



**NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL,**

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



**NEIGHBORHOOD
HEALTHCARE PEDS AND
PRENATAL,**

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

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY,**



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

**PALOMAR FAMILY
COUNSELING SERVICES,**




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

SAN YSIDRO HEALTH




**ESCONDIDO FAMILY
MEDICINE,**




Provider ID: PG0094132003
 704 E GRAND AVE
ESCONDIDO, CA 92025
 (619) 662-4100
Effective as of 01-JUN-22

GENERAL PRACTICE



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

INTERNAL MEDICINE



CARRERA, JORGE, MD^{Mt}
Provider ID: 100075629010
 704 E GRAND AVE
ESCONDIDO, CA 92025
 (619) 662-4100
 Spanish
Teleservice
Effective as of 01-FEB-22




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




PEDIATRICS




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




FAMILY PRACTICE


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

DEEL, MARGARET, MD^{Ft}
Provider ID: 100027747014
 593 E ELDER ST STE B
FALLBROOK, CA 92028
 (760) 723-5900
 Spanish
Effective as of 01-NOV-20

DEEL, MARGARET, MD^{Ft}
Provider ID: 100027747015
 593 E ELDER ST STE B
FALLBROOK, CA 92028
 (760) 723-5900
 Spanish
Effective as of 01-SEP-22

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

DEEL, MARGARET, MD^{Ft}
Provider ID: 100027747004
 593 E ELDER ST STE B
FALLBROOK, CA 92028
 (760) 723-5900
 Spanish
Effective as of 01-OCT-14

MILLER, BRANDON, DO^{Mt}
Provider ID: 100148562018
 521 E ELDER ST STE 103

FALLBROOK, CA 92028
☎ (760) 728-8344
Effective as of 01-NOV-20

MILLER, BRANDON, DO^{M†}
Provider ID: 100148562015
📍 521 E ELDER ST STE 105
FALLBROOK, CA 92028
☎ (760) 728-8344
Effective as of 01-DEC-18

FQHC

**FALLBROOK FAMILY HLTH
CTR,**
Provider ID: PG0009519020
📍 1328 S MISSION RD
FALLBROOK, CA 92028
☎ (760) 451-4720
Teleservice
Effective as of 01-JUL-22

VISTA COMMUNITY CLINIC,
Provider ID: PG0072409011
📍 321 E ALVARADO ST
FALLBROOK, CA 92028
☎ (760) 723-6200
Teleservice
Effective as of 01-MAR-23

INTERNAL MEDICINE

CVIJANOVIC, GORAN, MD^{M†}
Provider ID: 100370457002
📍 1328 S MISSION RD
FALLBROOK, CA 92028
☎ (760) 451-4720
Effective as of 01-JUN-21

STRUTZ, PETER, MD^{M*}
Provider ID: 100092315007
📍 605 E ALVARADO ST STE
100
FALLBROOK, CA 92028
☎ (760) 728-8489

📄 Spanish
Effective as of 01-SEP-21

FAMILY PRACTICE

ARMANIOUS, NANCY, MD^{F†}
Provider ID: 100379442002
📍 26795 PORTOLA PKWY
FOOTHILL RANCH, CA
92610
☎ (949) 829-9403
Effective as of 01-NOV-21

DECOCK, JAMES, MD^{M††}
Provider ID: 100051324014
📍 26795 PORTOLA PKWY
FOOTHILL RANCH, CA
92610
☎ (949) 829-9403
Effective as of 01-APR-15

ESKANDARI, HAMID, MD^{M††}
Provider ID: 100110778009
📍 26730 TOWNE CENTRE DR
STE 102
FOOTHILL RANCH, CA
92610
☎ (949) 559-5153
📄 Farsi
Effective as of 01-JUN-18

ESKANDARI, HAMID, MD^{M††}
Provider ID: 100110778010
📍 26730 TOWNE CENTRE DR
STE 102
FOOTHILL RANCH, CA
92610
☎ (949) 559-5153
📄 Farsi
Effective as of 01-JUN-18

ESKANDARI, HAMID, MD^{M††}
Provider ID: 100110778017
📍 26730 TOWNE CENTRE DR
STE 102

FOOTHILL RANCH, CA
92610
☎ (949) 559-5153
📄 Farsi
Effective as of 01-OCT-22

ESKANDARI, HAMID, MD^{M†}
Provider ID: 100110778005
📍 26730 TOWNE CENTRE DR
STE 102
FOOTHILL RANCH, CA
92610
☎ (949) 559-5153
📄 Farsi
Effective as of 01-NOV-17

ESKANDARI, HAMID, MD^{M†}
Provider ID: 100110778016
📍 26730 TOWNE CENTRE DR
STE 102
FOOTHILL RANCH, CA
92610
☎ (949) 559-5153
📄 Farsi
Effective as of 01-FEB-21

INTERNAL MEDICINE

PATEL, BAKULKUMAR, MD^{M†}
Provider ID: 100034722006
📍 26740 TOWNE CENTRE DR
BLDG C
FOOTHILL RANCH, CA
92610
☎ (949) 588-9293
📄 Gujarati, Hindi, Spanish
Effective as of 01-JAN-18

PEYMAN, HELYA, DO^F
Provider ID: 100414352003
📍 26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610
☎ (949) 557-0750

Effective as of 01-SEP-23

VALADEZ, JESUS, MD^{M†}

Provider ID: 100098540068

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610

(949) 557-0750

Effective as of 01-JAN-21

FAMILY PRACTICE

ANDERSON, ALBERT, MD^{M†}

Provider ID: 100079441012

1000 E LATHAM AVE STE G
HEMET, CA 92543

(951) 391-0580

Spanish

Teleservice

Effective as of 01-AUG-22

ARIF, MUHAMMAD, MD^M

Provider ID: 100114105043

2390 E FLORIDA AVE STE 104
HEMET, CA 92544

(951) 414-4011

Punjabi, Spanish, Urdu

Effective as of 01-OCT-23

ARIF, MUHAMMAD, MD^M

Provider ID: 100114105042

2390 E FLORIDA AVE STE 104
HEMET, CA 92544

(951) 414-4011

Punjabi, Spanish, Urdu

Effective as of 01-OCT-23

ASHRAF, HADIA, MD^{F†}

Provider ID: 100094934002

903 E DEVONSHIRE AVE STE F
HEMET, CA 92543

(951) 929-1611

Farsi, Hindi, Persian

Effective as of 01-OCT-98

ASHRAF, HADIA, MD^{F†}

Provider ID: 100094934008

903 E DEVONSHIRE AVE STE F
HEMET, CA 92543

(951) 929-1611

Farsi, Hindi, Persian

Effective as of 01-OCT-20

CARSON, MIA, MD^F

Provider ID: 100384377002

949 CALHOUN PL STE G
HEMET, CA 92543

(951) 765-5594

Effective as of 01-MAR-22

CASSADAY, DONALD, MD^{M†}

Provider ID: 100048311004

2390 E FLORIDA AVE STE 101
HEMET, CA 92544

(951) 925-1449

Effective as of 01-NOV-17

CHAMBI-HERNANDEZ, RUTH, MD^F

Provider ID: 100113399019

1035 SAINT JOHN PL
HEMET, CA 92543

(951) 223-4833

Spanish

Effective as of 01-SEP-23

COMBS, MATTHEW, MD^{M†}

Provider ID: 100337168008

3853 W STETSON AVE STE 200
HEMET, CA 92545

(951) 225-6802

Effective as of 01-NOV-20

GANTA, SANYASI, MD^{M†}

Provider ID: 100113069005

225 LAURSEN ST
HEMET, CA 92543

(951) 925-6657

Hindi, Spanish, Telugu

Effective as of 01-JAN-17

GANTA, SANYASI, MD^{M†}

Provider ID: 100113069011

225 LAURSEN ST
HEMET, CA 92543

(951) 925-6657

Hindi, Spanish, Telugu

Effective as of 01-APR-21

GOHIL, RAJIT, MD^{M†}

Provider ID: 100391418004

2390 E FLORIDA AVE STE 104
HEMET, CA 92544

(951) 414-4011

Effective as of 01-OCT-22

GOHIL, RAJIT, MD^{M†}

Provider ID: 100391418005

2390 E FLORIDA AVE STE 104
HEMET, CA 92544

(951) 414-4011

Effective as of 01-OCT-22

HARRISON, AMY, MD^{F†}

Provider ID: 100047360074

2390 E FLORIDA AVE STE 104
HEMET, CA 92544


(951) 414-4011

Effective as of 01-OCT-22




HARRISON, AMY, MD^{F†}

Provider ID: 100047360075




2390 E FLORIDA AVE STE 104
HEMET, CA 92544

 (951) 414-4011
Effective as of 01-OCT-22




HARRISON, AMY, MD^F
Provider ID: 100410706005

 2390 E FLORIDA AVE STE 104
HEMET, CA 92544
 (951) 414-4011
 Spanish
Effective as of 01-AUG-23



HARRISON, AMY, MD^F
Provider ID: 100410706006

 2390 E FLORIDA AVE STE 104
HEMET, CA 92544
 (951) 414-4011
 Spanish
Effective as of 01-AUG-23



HEIN, PETER, MD^{M†}
Provider ID: 100169562038

 603 E LATHAM AVE
HEMET, CA 92543
 (951) 502-3500
 German, Russian, Spanish
Effective as of 01-NOV-22



HOWARD, NATHAN, MD^M
Provider ID: 100053015006

 850 E LATHAM AVE STE E
HEMET, CA 92543
 (951) 658-7205
Effective as of 01-JUL-23



HOWARD, NATHAN, MD^M
Provider ID: 100053015004

 850 E LATHAM AVE
HEMET, CA 92543
 (951) 658-7205
Effective as of 10-SEP-10




HUGHES, LARRY, MD^{M†}
Provider ID: 100049939002

 4020 W FLORIDA AVE STE H
HEMET, CA 92545
 (951) 925-9565
Effective as of 01-SEP-09




HUGHES, HEATHER, MD^{F*}
Provider ID: 100050011003

 4020 W FLORIDA AVE
HEMET, CA 92545
 (951) 925-9565
Effective as of 01-NOV-13



HUNT, TYRELLE, MD^F
Provider ID: 100417653002

 1701 E FLORIDA AVE
HEMET, CA 92544
 (951) 658-4486
 Spanish
Effective as of 01-NOV-23




MEHARDA, SANJIWANI, MD^F
Provider ID: 100327486019

 255 N GILBERT ST STE C2
HEMET, CA 92543
 (951) 694-8549
 Hindi, Punjabi, Urdu
Effective as of 01-DEC-23




OBRIEN, KATHARINE, DO^{F†}
Provider ID: 100319273003

 1600 E FLORIDA AVE STE 103
HEMET, CA 92544
 (951) 929-8121
Effective as of 01-DEC-17

YUN, JONATHAN, DO^{M†}
Provider ID: 100025475025



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

YUN, JONATHAN, DO^{M†}
Provider ID: 100025475023



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

GENERAL PRACTICE



EL-HENAWI, IGLAL, MD^F
Provider ID: 100107885007

 4020 W FLORIDA AVE
HEMET, CA 92545
 (951) 765-5000
Effective as of 01-AUG-20

EL-HENAWI, IGLAL, MD^F
Provider ID: 100107885003




 4020 W FLORIDA AVE
HEMET, CA 92545
 (951) 765-5000
Effective as of 01-JAN-14

EL-HENAWI, IGLAL, MD^F
Provider ID: 100107885005

 4020 W FLORIDA AVE
HEMET, CA 92545
 (951) 765-5000
Effective as of 01-SEP-15

INTERNAL MEDICINE

BARVE, PRANAV, MD^{M†}
Provider ID: 100318437028

 2390 E FLORIDA AVE STE 104
HEMET, CA 92544
 (951) 414-4011
 Hindi, Marathi
Effective as of 01-AUG-21

BARVE, PRANAV, MD^{M†}
Provider ID: 100318437029

 2390 E FLORIDA AVE STE

104
HEMET, CA 92544
☎ (951) 414-4011
📄 Hindi, Marathi
Effective as of 01-AUG-21

BASAK, RYAN, MD^{M†}
Provider ID: 100378970004
📄 2390 E FLORIDA AVE STE
104
HEMET, CA 92544
☎ (951) 414-4011
Effective as of 01-NOV-21

BATIN, FRANCES, MD^F
Provider ID: 100075999009
📄 1001 S STATE ST
HEMET, CA 92543
☎ (951) 925-2525
📄 Spanish
Effective as of 01-NOV-23

CHING, TSUNG, MD^{M†}
Provider ID: 100380049002
📄 1278 E LATHAM AVE
HEMET, CA 92543
☎ (951) 925-6625
📄 Mandarin
Effective as of 01-DEC-21

CHODAY, PRITHI, MD^F
Provider ID: 100419896004
📄 1030 E FLORIDA AVE
HEMET, CA 92543
☎ (833) 867-4642
📄 Telugu
Effective as of 01-DEC-23

CHODAY, PRITHI, MD^F
Provider ID: 100419896003
📄 422 N SAN JACINTO ST STE
A
HEMET, CA 92543
☎ (833) 867-4642
📄 Telugu

Effective as of 01-DEC-23
HUSSAIN, ABID, MD^{M†}
Provider ID: 100108449003
📄 255 N GILBERT ST BLDG B4
HEMET, CA 92543
☎ (951) 652-0060
📄 Punjabi, Spanish, Urdu
Effective as of 01-SEP-15

KONDAPALLY, YAMUNA, MD^{F†}
Provider ID: 100364194002
📄 1701 E FLORIDA AVE
HEMET, CA 92544
☎ (951) 658-4486
Effective as of 01-DEC-20

KONDAPALLY, YAMUNA, MD^{F†}
Provider ID: 100364194003
📄 1701 E FLORIDA AVE
HEMET, CA 92544
☎ (951) 658-4486
Effective as of 01-DEC-20

MAPLETON, SHARINA, DO^F
Provider ID: 100384944006
📄 1030 E FLORIDA AVE
HEMET, CA 92543
☎ (833) 867-4642
Effective as of 01-FEB-24

MATHIAS, HERMAN, MD^{M†}
Provider ID: 100037216007
📄 391 N SAN JACINTO ST
HEMET, CA 92543
☎ (951) 929-6003
Effective as of 01-AUG-95

PATEL, REENABEN, MD^F
Provider ID: 100380064003
📄 2390 E FLORIDA AVE STE
101
HEMET, CA 92544

☎ (951) 925-1449
Effective as of 01-JAN-22
RAJA, MANIKANDA, MD^{M†}
Provider ID: 100113362004
📄 1701 E FLORIDA AVE
HEMET, CA 92544
☎ (951) 658-4486
📄 Tamil, Telugu
Effective as of 01-AUG-02

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

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

SHALABY, MOHSEN, MD^{M†}
Provider ID: 100306246002
📄 1023 E FLORIDA AVE
HEMET, CA 92543
☎ (951) 599-8403
📄 Arabic
Effective as of 01-MAR-17

**TAECHARVONGPHAIROJ,
VEERAVAT, MD^M**
Provider ID: 100226243030
📄 850 E LATHAM AVE STE
205
HEMET, CA 92543
☎ (951) 658-7205
📄 Thai
Effective as of 01-MAR-24

**TAECHARVONGPHAIROJ,
VEERAVAT, MD^{M†}**

Provider ID: 100226243018

1525 W FLORIDA AVE
HEMET, CA 92543

(951) 929-6777

Thai

Effective as of 01-OCT-21

**TAECHARVONGPHAIROJ,
VEERAVAT, MD^{M†}**

Provider ID: 100226243007

903 E DEVONSHIRE AVE
HEMET, CA 92543

(951) 216-6100

Thai

Effective as of 01-AUG-20

**TAECHARVONGPHAIROJ,
VEERAVAT, MD^{M†}**

Provider ID: 100226243015

422 N SAN JACINTO ST STE
A
HEMET, CA 92543

(951) 665-1100

Thai

Effective as of 01-APR-21

**TAECHARVONGPHAIROJ,
VEERAVAT, MD^{M†}**

Provider ID: 100226243014

903 E DEVONSHIRE AVE
STE D
HEMET, CA 92543

(808) 578-3911

Thai

Effective as of 01-APR-21

FQHC

**IMPERIAL BEACH HEALTH
CENTER,**

Provider ID: PG0005455007

949 PALM AVE

IMPERIAL BEACH, CA 91932

(619) 429-3733

Teleservice

Effective as of 01-JUL-22

FAMILY PRACTICE

CHANG, ALBERT, MD^{M†}

Provider ID: 100086039015

15825 LAGUNA CANYON
RD STE 202

IRVINE, CA 92618

(949) 585-9870

Korean, Spanish

Effective as of 01-JAN-17

CHANG, ALBERT, MD^{M†}

Provider ID: 100086039013

15825 LAGUNA CANYON
RD STE 202

IRVINE, CA 92618

(949) 585-9870

Korean, Spanish

Effective as of 01-JAN-17

CHANG, ALBERT, MD^{M†}

Provider ID: 100086039014

15825 LAGUNA CANYON
RD STE 202

IRVINE, CA 92618

(949) 585-9870

Korean, Spanish

Effective as of 01-JAN-17

CHANG, ALBERT, MD^M

Provider ID: 100086039033

15825 LAGUNA CANYON
RD STE 104

IRVINE, CA 92618

(949) 585-9870

Korean, Spanish

Effective as of 01-OCT-23

HUANG, JANET, DO^F

Provider ID: 100007711005

18 ENDEAVOR STE 203

IRVINE, CA 92618

(949) 733-0168

Chinese, Mandarin,
Taiwanese

Effective as of 01-JUL-20

MACAULEY, TODD, DO^{M†}

Provider ID: 100337131058

8607 IRVINE CENTER DR
IRVINE, CA 92618

(949) 557-0600

Effective as of 01-JAN-21

NILI, ALAN, DO^M

Provider ID: 100093992002

18 ENDEAVOR STE 307
IRVINE, CA 92618

(949) 260-0106

Farsi, Spanish

Effective as of 01-JUL-12

NILI, ALAN, DO^M

Provider ID: 100093992004

18 ENDEAVOR STE 307
IRVINE, CA 92618

(949) 260-0106

Farsi, Spanish

Effective as of 01-JUL-12

SAAM, SHIDA, DO^{F†}

Provider ID: 100093095027

16300 SAND CANYON AVE
STE 602

IRVINE, CA 92618

(949) 783-1911

Farsi

Effective as of 01-JUN-19

SAAM, SHIDA, DO^{F†}

Provider ID: 100093095032

16300 SAND CANYON AVE
STE 602

IRVINE, CA 92618

(949) 783-1911

☐ Farsi
Effective as of 01-JUN-19

SAAM, SHIDA, DO^{F†}

Provider ID: 100093095026
☐ 16300 SAND CANYON AVE
STE 602
IRVINE, CA 92618
☎ (949) 783-1911

☐ Farsi
Effective as of 01-JUN-19

SAAM, SHIDA, DO^{F†}

Provider ID: 100093095030
☐ 16300 SAND CANYON AVE
STE 602
IRVINE, CA 92618
☎ (949) 783-1911

☐ Farsi
Effective as of 01-JUN-19

SAAM, SHIDA, DO^{F†}

Provider ID: 100093095029
☐ 16300 SAND CANYON AVE
STE 602
IRVINE, CA 92618
☎ (949) 783-1911

☐ Farsi
Effective as of 01-JUN-19

SHEIDAYI, PERRY, DO^{M†}

Provider ID: 100090804007
☐ 18 ENDEAVOR STE 201
IRVINE, CA 92618
☎ (949) 650-5771
☐ Farsi, Persian, Spanish
Effective as of 01-MAR-15

SHEIDAYI, PERRY, DO^{M†}

Provider ID: 100090804009
☐ 18 ENDEAVOR STE 201
IRVINE, CA 92618
☎ (949) 650-5771
☐ Farsi, Persian, Spanish
Effective as of 01-JAN-17

SHEIDAYI, PERRY, DO^{M†}

Provider ID: 100090804011
☐ 18 ENDEAVOR STE 201
IRVINE, CA 92618
☎ (949) 650-5771
☐ Farsi, Persian, Spanish
Effective as of 01-JAN-18

SHEIDAYI, PERRY, DO^{M†}

Provider ID: 100090804017
☐ 18 ENDEAVOR STE 201
IRVINE, CA 92618
☎ (949) 650-5771
☐ Farsi, Persian, Spanish
Effective as of 01-APR-22

SHEIDAYI, PERRY, DO^{M†}

Provider ID: 100090804016
☐ 18 ENDEAVOR STE 201
IRVINE, CA 92618
☎ (949) 650-5771
☐ Farsi, Persian, Spanish
Effective as of 01-SEP-20

SHEIDAYI, PERRY, DO^{M†}

Provider ID: 100090804015
☐ 18 ENDEAVOR STE 201
IRVINE, CA 92618
☎ (949) 650-5771
☐ Farsi, Persian, Spanish
Effective as of 01-JUL-19

TONG, ELAIN, DO^{F*}

Provider ID: 100328017002
☐ 18 ENDEAVOR STE 304
IRVINE, CA 92618
☎ (714) 556-8664
☐ Chinese, Mandarin
Effective as of 01-MAY-18

YACOOB, MARLENE, MD^F

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

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

YACOOB, MARLENE, MD^F

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

GENERAL PRACTICE

ZAHEDI, MARCO, MD^M

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

ZAHEDI, MARCO, MD^M

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

INTERNAL MEDICINE

COUNCELBAUM, NANCY, MD

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

HUANG, CHARLIE, DO^M

Provider ID: 100325520007
☐ 16300 SAND CANYON AVE

STE 311
IRVINE, CA 92618
☎ (949) 791-3101
📄 Mandarin, Taiwanese
Effective as of 01-JAN-21

KAMADA, SATOSHI, MD^M
Provider ID: 100048942006
📄 15775 LAGUNA CANYON
RD STE 280
IRVINE, CA 92618
☎ (949) 453-1201
📄 Japanese
Effective as of 01-JUL-12

KAMADA, SATOSHI, MD^M
Provider ID: 100048942004
📄 15775 LAGUNA CANYON
RD STE 280
IRVINE, CA 92618
☎ (949) 453-1201
📄 Japanese
Effective as of 01-JUL-12

MEHTA, SHILPA, MD^{F†}
Provider ID: 100332508009
📄 22 ODYSSEY STE 115
IRVINE, CA 92618
☎ (949) 916-9100
Teleservice
Effective as of 01-JUN-19

MEHTA, SHILPA, MD^{F†}
Provider ID: 100332508010
📄 22 ODYSSEY STE 115
IRVINE, CA 92618
☎ (949) 916-9100
Teleservice
Effective as of 01-JUN-19

MIKHAIL, EMAD, MD^M
Provider ID: 100072526014
📄 22 ODYSSEY STE 140
IRVINE, CA 92618
☎ (949) 653-5810

📄 Arabic, Farsi
Effective as of 01-JUL-16

MIKHAIL, EMAD, MD^M
Provider ID: 100072526012
📄 22 ODYSSEY STE 140
IRVINE, CA 92618
☎ (949) 653-5810
📄 Arabic, Farsi
Effective as of 01-JUL-16

NAZARY, AREZOU, MD^F
Provider ID: 100411174002
📄 16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618
☎ (949) 791-3101
Effective as of 01-AUG-23

POURBABAK, SAM, MD^{M*}
Provider ID: 100114265021
📄 22 ODYSSEY STE 115
IRVINE, CA 92618
☎ (949) 988-7550
📄 Farsi, French, Spanish
Teleservice
Effective as of 01-APR-24

POURBABAK, SAM, MD^{M*}
Provider ID: 100114265020
📄 22 ODYSSEY STE 115
IRVINE, CA 92618
☎ (949) 988-7550
📄 Farsi, French, Spanish
Teleservice
Effective as of 01-APR-24

RASHID, AHSAN, MD^{M†}
Provider ID: 100036910003
📄 113 WATERWORKS WAY
STE 250
IRVINE, CA 92618
☎ (949) 753-1522
📄 Spanish, Urdu
Effective as of 01-JAN-18

SAISHO, ALBERT, MD^{M*}
Provider ID: 100077651004
📄 15785 LAGUNA CANYON
RD STE 340
IRVINE, CA 92618
☎ (949) 262-0080
📄 Japanese
Effective as of 01-JUL-12



SAISHO, ALBERT, MD^{M*}
Provider ID: 100077651006
📄 15785 LAGUNA CANYON
RD STE 340
IRVINE, CA 92618
☎ (949) 262-0080
📄 Japanese
Effective as of 01-OCT-22

SERAG, RANDA, MD^{F††}
Provider ID: 100136797017
📄 16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618
☎ (949) 791-3101
Effective as of 01-JAN-21



SHUNE, HONG, MD^{F†}
Provider ID: 100196968014
📄 16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618
☎ (949) 791-3101
📄 Chinese, Mandarin
Effective as of 01-JAN-21



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

WANG, WEI, MD^M




Provider ID: 100345175004
 16300 SAND CANYON AVE
 STE 311
 IRVINE, CA 92618
 (949) 791-3101
 Effective as of 01-JAN-21




PEDIATRICS




BILLECI, BARTON, MD^{M++}
 Provider ID: 100022620004
 16300 SAND CANYON AVE
 STE 614
 IRVINE, CA 92618
 (949) 653-1173
 Effective as of 01-OCT-15




BILLECI, BARTON, MD^{M++}
 Provider ID: 100022620005
 16300 SAND CANYON AVE
 STE 614
 IRVINE, CA 92618
 (949) 653-1173
 Effective as of 01-JAN-18




FAMILY PRACTICE




AHMED, HEBA, DO^F
 Provider ID: 100405870007
 9850 GENESEE AVE STE
 320
 LA JOLLA, CA 92037
 (858) 554-1212
 Hindi, Urdu
 Teleservice
 Effective as of 01-DEC-23




AHMED, HEBA, DO^{F*}
 Provider ID: 100405870005
 9850 GENESEE AVE STE
 320
 LA JOLLA, CA 92037
 (858) 554-1212
 Hindi, Urdu
 Teleservice




Effective as of 01-NOV-23
AHMED, HEBA, DO^F
 Provider ID: 100405870002
 9850 GENESEE AVE STE
 320
 LA JOLLA, CA 92037
 (858) 554-1212
 Hindi, Urdu
 Teleservice
 Effective as of 01-MAY-23




AHMED, HEBA, DO^F
 Provider ID: 100405870003
 9850 GENESEE AVE STE
 320
 LA JOLLA, CA 92037
 (858) 554-1212
 Hindi, Urdu
 Teleservice
 Effective as of 01-JUN-23




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


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


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




RIVERA, MIDORI, MD^F
 Provider ID: 100111732028
 9850 GENESEE AVE STE
 320
 LA JOLLA, CA 92037
 (858) 554-1212
 Japanese, Spanish
 Effective as of 01-DEC-23




**VAZQUEZ-BOJORQUEZ,
ALEJANDRA, MD^F**
 Provider ID: 100391945014
 9850 GENESEE AVE STE
 320
 LA JOLLA, CA 92037
 (858) 554-1212
 Spanish
 Effective as of 01-APR-23

WU, ARMANDO, MD^M
 Provider ID: 100381137002
 9850 GENESEE AVE STE
 320
 LA JOLLA, CA 92037
 (858) 864-9800
 French, Italian, Spanish
 Teleservice
 Effective as of 01-DEC-21




WU, ARMANDO, MD^M
 Provider ID: 100381137010
 9850 GENESEE AVE STE
 320

LA JOLLA, CA 92037
 (858) 864-9800
 French, Italian, Spanish
 Teleservice
 Effective as of 01-OCT-23


WU, ARMANDO, MD^M
 Provider ID: 100381137007
 9850 GENESEE AVE STE
 320
 LA JOLLA, CA 92037
 (858) 864-9800
 French, Italian, Spanish
 Teleservice
 Effective as of 01-MAR-22



WU, ARMANDO, MD^M
 Provider ID: 100381137006
 9850 GENESEE AVE STE
 320
 LA JOLLA, CA 92037
 (858) 864-9800
 French, Italian, Spanish
 Teleservice
 Effective as of 01-MAR-22




GENERAL PRACTICE




WU, ARMANDO, MD^M
 Provider ID: 100381137005
 9850 GENESEE AVE STE
 320
 LA JOLLA, CA 92037
 (858) 864-9800
 French, Italian, Spanish
 Teleservice
 Effective as of 01-FEB-22



INTERNAL MEDICINE



AL-SALEH, YADANI, MD^{Ft}
 Provider ID: 100358544010
 9850 GENESEE AVE STE
 320
 LA JOLLA, CA 92037



 (858) 864-9800
 Spanish
 Effective as of 01-NOV-22

BADALYAN, SEDA, MD^{Ft}
 Provider ID: 100032508023
 9850 GENESEE AVE STE
 740
 LA JOLLA, CA 92037
 (858) 457-5555
 Armenian, Russian
 Effective as of 01-SEP-22



BADALYAN, SEDA, MD^{Ft}
 Provider ID: 100032508021
 9850 GENESEE AVE STE
 740
 LA JOLLA, CA 92037
 (858) 457-5555
 Armenian, Russian
 Effective as of 01-DEC-21

RANA, SHAUNAK, MD^{Mt}
 Provider ID: 100194770021
 9850 GENESEE AVE STE
 320
 LA JOLLA, CA 92037
 (858) 554-1212
 Effective as of 01-FEB-22




RANA, SHAUNAK, MD^{Mt}
 Provider ID: 100194770022
 7855 IVANHOE AVE STE 110
 LA JOLLA, CA 92037
 (858) 799-0933
 Effective as of 01-SEP-22



RANA, SHAUNAK, MD^{Mt}
 Provider ID: 100194770013
 7855 IVANHOE AVE STE 110
 LA JOLLA, CA 92037
 (858) 799-0933
 Effective as of 01-JAN-21

RANA, SHAUNAK, MD^{Mt}



Provider ID: 100194770019
 9850 GENESEE AVE STE
 320
 LA JOLLA, CA 92037
 (858) 554-1212
 Effective as of 01-NOV-21

FAMILY PRACTICE




KISKILA, NATHAN, MD^M
 Provider ID: 100138189015
 6136 LAKE MURRAY BLVD
 LA MESA, CA 91942
 (949) 760-9222
 Spanish
 Effective as of 01-JAN-24

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

FQHC

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

INTERNAL MEDICINE

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

NGUYEN, DAT, MD^M

Provider ID: 100047564021

5565 GROSSMONT
CENTER DR STE 229
LA MESA, CA 91942

(858) 349-3760

Spanish, Vietnamese

Effective as of 01-MAR-24

FAMILY PRACTICE

WAINWRIGHT, MITCHELL, MD^M

M

Provider ID: 100096772018

800 CORPORATE DR STE
100
LADERA RANCH, CA 92694

(949) 364-9112

Spanish

Effective as of 01-SEP-18

INTERNAL MEDICINE

ELSANADI, RAEF, MD^{M†}

Provider ID: 100040631004

333 CORPORATE DR STE
210
LADERA RANCH, CA 92694

(949) 364-3582

Arabic

Effective as of 01-SEP-19

FAMILY PRACTICE

PANITCH, JILL, MD^{F*}

Provider ID: 100059699012

370 OCEAN AVE
LAGUNA BEACH, CA 92651

(949) 557-0610

Effective as of 01-JAN-21

SZYMANSKI, JARED, DO^M

Provider ID: 100369042016

370 OCEAN AVE
LAGUNA BEACH, CA 92651

(949) 557-0610

Effective as of 01-AUG-21

INTERNAL MEDICINE

DEWING, JANNE, MD^F

Provider ID: 100105400007

31862 COAST HWY STE 200
LAGUNA BEACH, CA 92651

(949) 340-5454

Effective as of 01-AUG-18

FAMILY PRACTICE

CHANG, MICHAEL, DO^{M†}

Provider ID: 100294076006

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653

(949) 448-0656

Effective as of 01-AUG-18

CHANG, MICHAEL, DO^{M†}

Provider ID: 100294076007

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653

(949) 448-0656

Effective as of 01-AUG-18

FOSTER, MARK, MD^M

Provider ID: 100108418005

24411 HEALTH CENTER DR
STE 460
LAGUNA HILLS, CA 92653

(949) 373-7799

Effective as of 01-JAN-18

GEE, KELLY, DO^{F†}

Provider ID: 100358387006

23521 PASEO DE VALENCIA
STE 311
LAGUNA HILLS, CA 92653

(949) 305-2660

Effective as of 01-FEB-22

HICKS, TOMMY, MD^{M††}

Provider ID: 100093348004

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653

(949) 588-7262

Effective as of 01-JAN-18

HUYNH, JUDY, DO^{F†}

Provider ID: 100065290005

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653

(949) 768-4850

Effective as of 01-JAN-18

HUYNH, JUDY, DO^{F†}

Provider ID: 100065290003

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653

(949) 768-4850

Effective as of 01-APR-12

IERARDI, STEPHEN, MD^M

Provider ID: 100017573010

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

(949) 916-9100

Effective as of 01-APR-22

IERARDI, STEPHEN, MD^M

Provider ID: 100017573009

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

(949) 916-9100

Effective as of 01-APR-22

KHOSHREZA, HALEH, MD^{F†}

Provider ID: 100383918002

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653

(949) 448-0656

Farsi, German

Effective as of 01-MAR-22

LEISH, BRIAN, MD^M

Provider ID: 100103119055

24411 HEALTH CENTER DR
STE 460

LAGUNA HILLS, CA 92653

(949) 373-7799

Effective as of 01-JAN-18

MANDEL, RONALD, DO^{M†}

Provider ID: 100034539004

25411 CABOT RD STE 115

LAGUNA HILLS, CA 92653

(949) 362-2121

Spanish

Effective as of 01-JAN-18

MOHINDRA, SUCHITRA, MD^{F†}

Provider ID: 100025171005

26538 MOULTON PKWY
STE 38E

LAGUNA HILLS, CA 92653

(949) 448-0656

Hindi, Hindustani, Punjabi

Effective as of 01-AUG-18

MUNIB, SABEEN, MD^{F†}

Provider ID: 100168805025

23181 LA CADENA DR STE
101

LAGUNA HILLS, CA 92653

(949) 647-5234

Effective as of 01-FEB-20

MUNIB, SABEEN, MD^{F†}

Provider ID: 100168805028

23181 LA CADENA DR STE
101

LAGUNA HILLS, CA 92653

(949) 647-5234

Effective as of 01-OCT-20

MUNIB, SABEEN, MD^{F†}

Provider ID: 100168805030

23181 LA CADENA DR STE
101

LAGUNA HILLS, CA 92653

(949) 647-5234

Effective as of 01-MAR-21

RIVERO, JORGE, MD^M

Provider ID: 100059240008

23521 PASEO VALENCIA
108

LAGUNA HILLS, CA 92653

(949) 588-7262

Spanish

Effective as of 01-JAN-18

SY, JOAN, DO^F

Provider ID: 100090936014

24953 PASEO DE
VALENCIA STE 1A
LAGUNA HILLS, CA 92653

(949) 460-9200

Effective as of 01-JAN-18

SY, JOAN, DO^F

Provider ID: 100090936012

24953 PASEO DE
VALENCIA STE 1A
LAGUNA HILLS, CA 92653

(949) 460-9200

Effective as of 01-JAN-17

YACOOB, MARLENE, MD^F

Provider ID: 100010305019

23141 MOULTON PKWY STE
102

LAGUNA HILLS, CA 92653

(949) 916-9100

French, Spanish

Teleservice

Effective as of 01-JUL-19

YACOOB, MARLENE, MD^F

Provider ID: 100010305008

23141 MOULTON PKWY STE
102

LAGUNA HILLS, CA 92653

(949) 916-9100

French, Spanish

Teleservice

Effective as of 01-APR-18

GENERAL PRACTICE

COOKE, LAWRENCE, MD^{M*}

Provider ID: 100030436004

23521 PASEO DE VALENCIA
LAGUNA HILLS, CA 92653

(949) 215-1511

Spanish

Effective as of 01-NOV-19

HARMS, MONICA, MD^F

Provider ID: 100088859020

23141 MOULTON PKWY STE
102

LAGUNA HILLS, CA 92653

(949) 916-9100

Spanish

Effective as of 01-SEP-20

HARMS, MONICA, MD^F

Provider ID: 100088859016

23141 MOULTON PKWY STE
102

LAGUNA HILLS, CA 92653

(949) 916-9100

Spanish

Effective as of 01-JUN-19

NAPOLI, LYNN, MD^F

Provider ID: 100069369008

23141 MOULTON PKWY STE
102

LAGUNA HILLS, CA 92653

(949) 916-9100

Teleservice

Effective as of 01-JUL-18

NAPOLI, LYNN, MD^F

Provider ID: 100069369009

23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653
(949) 916-9100
Teleservice
Effective as of 01-AUG-18

INTERNAL MEDICINE

AFSHAR, YAMA, DO^M

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

ARTHUR, KRISTINE, MD^{Ft}

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

ASHTARI, MOZHGAN, MD^{Ft}

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

BANDUKWALA, RAHIL, DO^{Mt}

Provider ID: 100036312016
23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653
(949) 916-9100
Spanish
Effective as of 01-JUN-19

BANDUKWALA, RAHIL, DO^{Mt}

Provider ID: 100036312009
23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653
(949) 916-9100
Spanish
Effective as of 01-APR-18

BROWN, HOSEA, MD^{Mt}

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

BROWN, HOSEA, MD^{Mt}

Provider ID: 100017878007
25431 CABOT RD STE 118
LAGUNA HILLS, CA 92653
(949) 362-8877
Spanish
Effective as of 01-JAN-14

BROWN, HOSEA, MD^{Mt}

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

BROWN, HOSEA, MD^{Mt}

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

BROWN, HOSEA, MD^{Mt}

Provider ID: 100017878005
25431 CABOT RD STE 118
LAGUNA HILLS, CA 92653
(949) 362-8877

Spanish
Effective as of 01-DEC-11

CHANG, KU JUEY, MD^M

Provider ID: 100079645013
23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653
(949) 916-9100
Chinese
Effective as of 01-JUN-19

CHANG, KU JUEY, MD^M

Provider ID: 100079645006
23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653
(949) 916-9100
Chinese
Effective as of 01-NOV-16

CLARK, LORI, MD^{Ft}

Provider ID: 100054653006
23521 PASEO DE VALENCIA STE 108
LAGUNA HILLS, CA 92653
(949) 588-7262
Spanish
Effective as of 01-JAN-18



COVARRUBIAS, GRACIA, MD^{Ft}

Provider ID: 100109548017
24268 EL TORO RD
LAGUNA HILLS, CA 92637
(657) 241-8455
Spanish
Effective as of 01-SEP-21




COVARRUBIAS, GRACIA, MD^{Ft}

Provider ID: 100109548016
24268 EL TORO RD
LAGUNA HILLS, CA 92637
(657) 241-8455
Spanish
Effective as of 01-MAR-20




DABESTANI, ALI, MD^{M†}

Provider ID: 100009145010
 25401 CABOT RD STE 107
 LAGUNA HILLS, CA 92653
 (949) 770-4858
 Effective as of 01-JUL-14



DAIGNEAULT, ARTHUR, MD^M

Provider ID: 100099113005
 24221 CALLE DE LA LOUISA
 STE 200
 LAGUNA HILLS, CA 92653
 (949) 588-8700
 Spanish
 Effective as of 01-JAN-18



EDRIS, MARWAN, MD^M

Provider ID: 100083033005
 25283 CABOT RD STE 106
 LAGUNA HILLS, CA 92653
 (949) 364-9080
 Arabic, Hebrew
 Effective as of 01-JAN-18



EDRIS, SAMI, MD^M

Provider ID: 100421676002
 25283 CABOT RD STE 106
 LAGUNA HILLS, CA 92653
 (949) 364-9080
 Effective as of 01-JAN-24

FELDMAN, ROBERT, MD^{M*}



Provider ID: 100016238005
 23961 CALLE DE LA
 MAGDALENA STE 429
 LAGUNA HILLS, CA 92653
 (949) 452-1930
 Effective as of 01-MAR-19

FERNANDEZ, RAYMOND, MD^M



Provider ID: 100067842005
 24221 CALLE DE LA LOUISA
 STE 200
 LAGUNA HILLS, CA 92653
 (949) 420-5985

Effective as of 01-JAN-18




HENRY, BRIAN, MD^M

Provider ID: 100063427004
 24221 CALLE DE LA LOUISA
 STE 200
 LAGUNA HILLS, CA 92653
 (949) 588-8700
 Effective as of 01-JAN-18




HUSEBY, DAVID, MD^M

Provider ID: 100091780005
 24411 HEALTH CENTER DR
 STE 460
 LAGUNA HILLS, CA 92653
 (949) 373-7799
 Effective as of 01-JAN-18




JAVAHERI, MANIJEH, MD^{F}**

Provider ID: 100111565009
 23961 CALLE DE LA
 MAGDALENA STE 430
 LAGUNA HILLS, CA 92653
 (949) 770-8100
 Farsi, Turkish
 Effective as of 01-JAN-18




KAURA, MAYA, MD^F

Provider ID: 100011471005
 24953 PASEO DE
 VALENCIA STE 22A
 LAGUNA HILLS, CA 92653
 (949) 770-7333
 Hindi
 Effective as of 01-MAR-21



LEW, HOMER, DO^{M†}

Provider ID: 100088621006
 23521 PASEO DE VALENCIA
 STE 108
 LAGUNA HILLS, CA 92653
 (949) 588-7262
 Cantonese, Chinese
 Effective as of 01-JAN-18




LIN, CHI WHEI, MD^{M*}

Provider ID: 100090449006
 23521 PASEO DE VALENCIA
 STE 310
 LAGUNA HILLS, CA 92653
 (949) 716-4555
 Chinese, Mandarin, Spanish
 Effective as of 01-JAN-18




LO, ALAN, MD^{M*}

Provider ID: 100022892004
 25401 CABOT RD STE 101
 LAGUNA HILLS, CA 92653
 (949) 768-4850
 Effective as of 01-JAN-18




MANASSON, KATHERINE, MD^{F†}

Provider ID: 100113316016
 24422 AVENIDA DE LA
 CARLOTA STE 272
 LAGUNA HILLS, CA 92653
 (949) 446-6783
 Russian
 Effective as of 01-NOV-22

MANASSON, KATHERINE, MD^{F†}

Provider ID: 100113316014
 24422 AVENIDA DE LA
 CARLOTA STE 272
 LAGUNA HILLS, CA 92653
 (949) 446-6783
 Russian
 Effective as of 01-NOV-22

MANASSON, KATHERINE, MD^{F†}

Provider ID: 100113316013
 24422 AVENIDA DE LA
 CARLOTA STE 272
 LAGUNA HILLS, CA 92653
 (949) 446-6783
 Russian

Effective as of 01-NOV-22

MEHTA, SHILPA, MD^{F†}

Provider ID: 100332508008

23141 MOULTON PKWY STE 102

LAGUNA HILLS, CA 92653

(949) 916-9100

Teleservice

Effective as of 01-JUN-19

MEHTA, SHILPA, MD^{F†}

Provider ID: 100332508007

23141 MOULTON PKWY STE 102

LAGUNA HILLS, CA 92653

(949) 916-9100

Teleservice

Effective as of 01-JUN-19

PACE, SARAH, MD^{F†}

Provider ID: 100322536002

24321 AVENIDA DE LA CARLOTA

LAGUNA HILLS, CA 92653

(949) 204-3006

Spanish

Effective as of 01-AUG-22

POURBABAK, SAM, MD^M

Provider ID: 100114265015

23141 MOULTON PKWY STE 102

LAGUNA HILLS, CA 92653

(949) 855-2279

Farsi, French, Spanish

Teleservice

Effective as of 01-JUN-19

POURBABAK, SAM, MD^M

Provider ID: 100114265008

23141 MOULTON PKWY STE 102

LAGUNA HILLS, CA 92653

(949) 855-2279

Farsi, French, Spanish
Teleservice

Effective as of 01-APR-18

SADEGHI TARI, MAHYAR, MD^{F†}

Provider ID: 100107614005

24411 HEALTH CENTER DR STE 460

LAGUNA HILLS, CA 92653

(949) 334-8200

Farsi, Spanish, Swedish

Effective as of 01-JAN-18

SIU, CURTIS, MD^{M*}

Provider ID: 100082780005

24221 CALLE DE LA LOUISA STE 200

LAGUNA HILLS, CA 92653

(949) 420-5988

Chinese

Effective as of 01-JAN-18

STALLWORTH, ROXANNE, MD^{F††}

F††

Provider ID: 100185861010

24321 AVENIDA DE LA CARLOTA

LAGUNA HILLS, CA 92653

(949) 204-3006

Farsi, Spanish

Effective as of 01-AUG-22

STERNS, DANIEL, MD^M

Provider ID: 100081005004

24411 HEALTH CENTER DR STE 460

LAGUNA HILLS, CA 92653

(949) 373-7799

Spanish

Effective as of 01-JAN-18

STRODTBECK, PAUL, MD^M

Provider ID: 100033007005

24411 HEALTH CENTER DR STE 460

LAGUNA HILLS, CA 92653

(949) 373-7799

Effective as of 01-JAN-18

TRAN, CECILIA, MD^{F*}

Provider ID: 100105245004

24221 CALLE DE LA LOUISA STE 200

LAGUNA HILLS, CA 92653

(949) 420-5980

Vietnamese

Effective as of 01-JAN-18

ZAMANI, MAZIAR, MD^{M*}

Provider ID: 100086365005

24221 CALLE DE LA LOUISA STE 400

LAGUNA HILLS, CA 92653

(949) 770-2085

Effective as of 01-JAN-18

ZAREMBA, MARK, MD^{M†}

Provider ID: 100021573002

25401 CABOT RD STE 107

LAGUNA HILLS, CA 92653

(949) 273-8085

Effective as of 01-JAN-13

ZAREMBA, MARK, MD^{M†}

Provider ID: 100021573005

25401 CABOT RD STE 107

LAGUNA HILLS, CA 92653

(949) 273-8085

Effective as of 01-APR-18

FAMILY PRACTICE

BEDRAN, ASAD, DO^{M†}

Provider ID: 100347139005



27231 LA PAZ RD STE A



LAGUNA NIGUEL, CA 92677




(949) 643-9111




Effective as of 01-SEP-20




BELLO, JUSTINE, MD^{F†}

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




BREWER, SARAH, MD^{F†}
 Provider ID: 100281677007
 32341 GOLDEN LANTERN
 STE D
 LAGUNA NIGUEL, CA 92677
 (949) 363-9595
 Effective as of 01-FEB-21




FU, KAREN, MD^{F†}
 Provider ID: 100095684012
 32341 GOLDEN LANTERN
 STE D
 LAGUNA NIGUEL, CA 92677
 (949) 363-9595
 Mandarin, Spanish
 Effective as of 01-JUN-22




**HAGHIGHI MOTLAGH,
 BEHNAZ, MD^F**
 Provider ID: 100197006032
 27781 LA PAZ RD
 LAGUNA NIGUEL, CA 92677
 (949) 831-0300
 Dutch, Farsi
 Effective as of 01-OCT-22




**HAGHIGHI MOTLAGH,
 BEHNAZ, MD^F**
 Provider ID: 100197006031
 27781 LA PAZ RD
 LAGUNA NIGUEL, CA 92677
 (949) 831-0300
 Dutch, Farsi
 Effective as of 01-OCT-19



**HAGHIGHI MOTLAGH,
 BEHNAZ, MD^F**
 Provider ID: 100197006024



 27781 LA PAZ RD
 LAGUNA NIGUEL, CA 92677
 (949) 831-0300
 Dutch, Farsi
 Effective as of 01-OCT-19

**HAGHIGHI MOTLAGH,
 BEHNAZ, MD^F**
 Provider ID: 100197006019
 27781 LA PAZ RD
 LAGUNA NIGUEL, CA 92677
 (949) 831-0300
 Dutch, Farsi
 Effective as of 01-JUN-19

**HAGHIGHI MOTLAGH,
 BEHNAZ, MD^F**
 Provider ID: 100197006023
 27781 LA PAZ RD
 LAGUNA NIGUEL, CA 92677
 (949) 831-0300
 Dutch, Farsi
 Effective as of 01-SEP-19



**HAGHIGHI MOTLAGH,
 BEHNAZ, MD^F**
 Provider ID: 100197006028
 27781 LA PAZ RD
 LAGUNA NIGUEL, CA 92677
 (949) 831-0300
 Dutch, Farsi
 Effective as of 01-SEP-19



LEE, SUSAN, MD^{F†}
 Provider ID: 100068409006
 27231 LA PAZ RD STE A
 LAGUNA NIGUEL, CA 92677
 (949) 643-9111
 Effective as of 01-JUL-14



SALL, JEEVAN, MD^{M†}
 Provider ID: 100353204063
 27231 LA PAZ RD STE A
 LAGUNA NIGUEL, CA 92677
 (949) 643-9111




Effective as of 01-JUN-22

INTERNAL MEDICINE




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

KRAFCIK, SONJA, MD^{F*}
 Provider ID: 100056351004
 25500 RANCHO NIGUEL
 RD STE 150
 LAGUNA NIGUEL, CA 92677
 (949) 831-3686
 Effective as of 01-OCT-22

KRAFCIK, SONJA, MD^{F*}
 Provider ID: 100056351002
 25500 RANCHO NIGUEL
 RD STE 150
 LAGUNA NIGUEL, CA 92677
 (949) 831-3686
 Effective as of 01-MAR-13

PARISE, ERIN, MD^{F†}
 Provider ID: 100034192011
 30281 GOLDEN LANTERN
 LAGUNA NIGUEL, CA 92677
 (949) 495-7144
 Spanish
 Effective as of 01-JAN-18

PEDIATRICS

PATEL, JYOTINKUMAR, MD^{M†}
 Provider ID: 100035402010
 30281 GOLDEN LANTERN
 LAGUNA NIGUEL, CA 92677
 (949) 495-7144
 Gujarati, Hindi
 Effective as of 01-SEP-22

FAMILY PRACTICE

RIOS, DAVID, MD^{M†}

Provider ID: 100046040007

24331 EL TORO RD STE 330
LAGUNA WOODS, CA
92637

(949) 837-7521

Spanish

Effective as of 01-JAN-18

VAN VRANKEN, BRUCE, MD^M

Provider ID: 100074767005

24331 EL TORO RD STE 330
LAGUNA WOODS, CA
92637

(949) 837-7521

Effective as of 01-JAN-18

INTERNAL MEDICINE

ROKSHADFAR, SAGHI, MD^{F†}

Provider ID: 100113408008

24268 EL TORO RD
LAGUNA WOODS, CA
92637

(657) 241-8455

Farsi

Effective as of 01-JAN-21

ROKSHADFAR, SAGHI, MD^{F†}

Provider ID: 100113408009

24268 EL TORO RD
LAGUNA WOODS, CA
92637

(657) 241-8455

Farsi

Effective as of 01-JAN-21

SIEGFRIED, TRACY, MD^F

Provider ID: 100047456004

24331 EL TORO RD STE 330
LAGUNA WOODS, CA
92637

(949) 716-0833

Effective as of 01-JAN-18

FAMILY PRACTICE

JACKSON, ANITA, MD^{F†}

Provider ID: 100060861006

31736 MISSION TRL STE G
LAKE ELSINORE, CA 92530

(951) 674-1505

Tagalog

Effective as of 01-NOV-11

TORRES, REBECCA, MD^{F†}

Provider ID: 100187138016

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530

(951) 471-1800

Korean, Mandarin, Spanish

Effective as of 01-DEC-14

TORRES, REBECCA, MD^{F†}

Provider ID: 100187138015

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530

(951) 471-1800

Korean, Mandarin, Spanish

Effective as of 01-DEC-14

GENERAL PRACTICE

ASPREC, JOSEPH, MD^M

Provider ID: 100070994004

31571 CANYON ESTATES DR
STE 132
LAKE ELSINORE, CA 92532

(951) 674-7811

Spanish, Tagalog

Effective as of 01-JUL-22

OLIVEIRA, THOMAS, DO^{M†}

Provider ID: 100088827007

506 W GRAHAM AVE STE
107
LAKE ELSINORE, CA 92530

(951) 471-5116

Italian, Spanish

Effective as of 01-APR-21

INTERNAL MEDICINE

BAJWA, SAIF, MD^{M†}

Provider ID: 100113080002

16800 LAKESHORE DR STE
2
LAKE ELSINORE, CA 92530

(951) 674-2155

Spanish, Urdu

Effective as of 01-APR-17

SAADAT, FARID, MD^{M†}

Provider ID: 100013848002

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530

(951) 471-5711

Farsi, Persian

Effective as of 01-JUN-14

FAMILY PRACTICE

AHSAN, NUSRAT, MD^{F†}

Provider ID: 100113788007

22621 LAKE FOREST DR STE
D1
LAKE FOREST, CA 92630

(949) 242-6902

Hindi

Effective as of 01-MAY-17

ALI, MOHAMMED, MD^{M†}

Provider ID: 100114282064

23672 BIRTCHER DR STE A
LAKE FOREST, CA 92630

(949) 770-7301



Hindi, Telugu, Urdu

Effective as of 01-OCT-22




ALI, MOHAMMED, MD^{M†}

Provider ID: 100114282032




23672 BIRTCHER DR STE A
LAKE FOREST, CA 92630

 (949) 770-7301
 Hindi, Telugu, Urdu
Effective as of 01-OCT-17




ALI, MOHAMMED, MD^{M†}
Provider ID: 100114282030

 23672 BIRTCHER DR STE A
LAKE FOREST, CA 92630
 (949) 770-7301
 Hindi, Telugu, Urdu
Effective as of 01-JAN-18




ALI, MOHAMMED, MD^{M†}
Provider ID: 100114282029

 23672 BIRTCHER DR STE A
LAKE FOREST, CA 92630
 (949) 770-7301
 Hindi, Telugu, Urdu
Effective as of 01-JAN-17




ALI, MOHAMMED, MD^{M†}
Provider ID: 100114282026

 23672 BIRTCHER DR STE A
LAKE FOREST, CA 92630
 (949) 770-7301
 Hindi, Telugu, Urdu
Effective as of 01-JAN-16

ALI, MOHAMMED, MD^{M†}
Provider ID: 100114282022



 23672 BIRTCHER DR STE A
LAKE FOREST, CA 92630
 (949) 770-7301
 Hindi, Telugu, Urdu
Effective as of 01-JAN-14

ALI, MOHAMMED, MD^{M†}
Provider ID: 100114282027




 23672 BIRTCHER DR STE A
LAKE FOREST, CA 92630
 (949) 770-7301
 Hindi, Telugu, Urdu
Effective as of 01-DEC-16

KOUMAS, MARY, DO^{F*}

Provider ID: 100089870008




 24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
 (949) 770-1950
Effective as of 01-MAR-22

KOUMAS, JOHN, DO^{M††}




Provider ID: 100064961008
 24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
 (949) 770-1950
 Spanish
Effective as of 01-MAR-22

INTERNAL MEDICINE

GOVASHIRI, REZA, MD^{M†}




Provider ID: 100047181008
 22621 LAKE FOREST DR STE
D1
LAKE FOREST, CA 92630
 (949) 242-6902
 Farsi, Spanish
Effective as of 01-JUL-19

MUY, MADINETH, MD^{F††}



Provider ID: 100082949013
 22621 LAKE FOREST DR STE
D1
LAKE FOREST, CA 92630
 (949) 242-6902
 Khmer
Effective as of 01-OCT-18

FAMILY PRACTICE



MCHENRY, KATHRYN, DO^F

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

PHAM, CHRISTINE, DO^F

Provider ID: 100397531003
 10039 VINE ST
LAKESIDE, CA 92040
 (858) 218-3000
Effective as of 01-JAN-23



ZAMPELLO, LISA, MD^{F†}

Provider ID: 100340931005
 10039 VINE ST
LAKESIDE, CA 92040
 (858) 218-3000
Effective as of 01-NOV-22

FQHC




NEIGHBORHOOD

HEALTHCARE LAKESIDE, *




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

INTERNAL MEDICINE

MCFARLAND, NATHAN, MD^M

Provider ID: 100216268004
 10039 VINE ST
LAKESIDE, CA 92040
 (858) 218-3000
 Italian, Spanish
Effective as of 01-AUG-20

MCFARLAND, NATHAN, MD^M

Provider ID: 100216268007
 10039 VINE ST
LAKESIDE, CA 92040
 (858) 218-3000
 Italian, Spanish
Effective as of 01-JAN-24

FQHC

**LEMON GROVE FAMILY
HEALTH CENTER,**

Provider ID: PG0085568003

7592 BROADWAY
LEMON GROVE, CA 91945

(619) 515-2550

Effective as of 01-JAN-21

FAMILY PRACTICE

ARIF, MUHAMMAD, MD^M

Provider ID: 100114105045

29826 HAUN RD STE 200
MENIFEE, CA 92586

(951) 414-4020

Punjabi, Spanish, Urdu

Effective as of 01-OCT-23

ARIF, MUHAMMAD, MD^M

Provider ID: 100114105044

29826 HAUN RD STE 200
MENIFEE, CA 92586

(951) 414-4020

Punjabi, Spanish, Urdu

Effective as of 01-OCT-23

CAMARILLO, DANIEL, MD^{Mt}

Provider ID: 100110735009

30420 HAUN RD
MENIFEE, CA 92584

(951) 676-4193

Spanish

Effective as of 01-OCT-15

CAMARILLO, DANIEL, MD^{Mt}

Provider ID: 100110735017

30420 HAUN RD
MENIFEE, CA 92584

(951) 676-4193

Spanish

Effective as of 01-NOV-20

GOHIL, RAJIT, MD^M

Provider ID: 100391418013

29826 HAUN RD STE 200

MENIFEE, CA 92586

(951) 414-4020

Effective as of 01-JUL-23

GOHIL, RAJIT, MD^M

Provider ID: 100391418014

29826 HAUN RD STE 200
MENIFEE, CA 92586

(951) 414-4020

Effective as of 01-JUL-23

HARRISON, AMY, MD^F

Provider ID: 100410706004

29826 HAUN RD STE 200
MENIFEE, CA 92586

(951) 414-4020

Spanish

Effective as of 01-AUG-23

HARRISON, AMY, MD^F

Provider ID: 100410706003

29826 HAUN RD STE 200
MENIFEE, CA 92586

(951) 414-4020

Spanish

Effective as of 01-AUG-23

HARRISON, AMY, MD^{Ft}

Provider ID: 100047360076

28400 MCCALL BLVD STE
B10

MENIFEE, CA 92585

(951) 414-4020

Effective as of 01-OCT-22

HARRISON, AMY, MD^{Ft}

Provider ID: 100047360077

28400 MCCALL BLVD STE
B10

MENIFEE, CA 92585

(951) 414-4020

Effective as of 01-OCT-22

MADRID, RICHARD, MD^{Mt}

Provider ID: 100077741007

30420 HAUN RD

MENIFEE, CA 92584

(951) 676-4193

Teleservice

Effective as of 01-JAN-16

ZURITA, DANIELA, MD^{Ft}

Provider ID: 100396617007

26926 CHERRY HILLS
BLVD STE B

MENIFEE, CA 92586

(951) 216-2200

Spanish

Effective as of 01-DEC-22

ZURITA, DANIELA, MD^{Ft}

Provider ID: 100396617009

26926 CHERRY HILLS
BLVD STE C

MENIFEE, CA 92586

(951) 216-2200

Spanish

Effective as of 01-DEC-22

INTERNAL MEDICINE

ARANETA, TOMAS, MD^{Mt}

Provider ID: 100036305006

29826 HAUN RD STE 201
MENIFEE, CA 92586

(951) 301-1100

Spanish, Tagalog

Effective as of 01-OCT-22

BARVE, PRANAV, MD^M

Provider ID: 100318437033

29826 HAUN RD STE 200
MENIFEE, CA 92586

(951) 414-4020



Hindi, Marathi



Effective as of 01-JUL-23



BARVE, PRANAV, MD^M




Provider ID: 100318437034



29826 HAUN RD STE 200




MENIFEE, CA 92586
 (951) 414-4020
 Hindi, Marathi
 Effective as of 01-JUL-23


BASAK, RYAN, MD^M
 Provider ID: 100378970016
 29826 HAUN RD STE 200
 MENIFEE, CA 92586
 (951) 414-4020
 Effective as of 01-JUL-23


BASAK, RYAN, MD^M
 Provider ID: 100378970015
 29826 HAUN RD STE 200
 MENIFEE, CA 92586
 (951) 414-4020
 Effective as of 01-JUL-23



GONZALES, EDIVINA, MD^F
 Provider ID: 100039220006
 29798 HAUN RD STE 106
 MENIFEE, CA 92586
 (951) 301-3588
 Spanish, Tagalog
 Effective as of 01-JAN-11




GONZALES, PATRICK, MD^{M†}
 Provider ID: 100109580005
 29798 HAUN RD STE 106
 MENIFEE, CA 92586
 (951) 301-3588
 Effective as of 01-SEP-10

GONZALES, EDIVINA, MD^F
 Provider ID: 100039220005
 29798 HAUN RD STE 106
 MENIFEE, CA 92586
 (951) 301-3588
 Spanish, Tagalog
 Effective as of 01-OCT-10



GONZALES, PATRICK, MD^{M†}
 Provider ID: 100109580006
 29798 HAUN RD STE 106




MENIFEE, CA 92586
 (951) 301-3588
 Effective as of 01-JUN-17



KIM, IRENE, DO^F
 Provider ID: 100380710004
 27190 SUN CITY BLVD
 MENIFEE, CA 92586
 (951) 676-4193
 Effective as of 01-JAN-22

MARTINEZ, JORGE, MD^{M†}
 Provider ID: 100096235012
 29826 HAUN RD STE 201
 MENIFEE, CA 92586
 (951) 301-1100
 Spanish
 Effective as of 01-JUN-22




FAMILY PRACTICE




BALL-ZONDERVAN, MONICA, MD^{F†}
 Provider ID: 100294482047
 26732 CROWN VALLEY
 PKWY STE 170
 MISSION VIEJO, CA 92691
 (949) 364-7246
 Effective as of 01-SEP-19



BARE, IAN, MD^{M†}
 Provider ID: 100110113009
 30492 GATEWAY PL STE
 110
 MISSION VIEJO, CA 92694
 (949) 542-7700
 Spanish
 Effective as of 01-JUN-21



BARE, IAN, MD^{M††}
 Provider ID: 100110113017
 30492 GATEWAY PL STE
 110
 MISSION VIEJO, CA 92694
 (949) 542-7700



 Spanish
 Effective as of 01-JUN-21


BASICH, CANDACE, MD^{F††}
 Provider ID: 100073084010
 30707 GATEWAY PL STE A2
 MISSION VIEJO, CA 92694
 (657) 241-8435
 Spanish
 Effective as of 01-DEC-21


BASICH, CANDACE, MD^{F††}
 Provider ID: 100073084008
 30707 GATEWAY PL STE A2
 MISSION VIEJO, CA 92694
 (657) 241-8435
 Spanish
 Effective as of 01-SEP-18

BISUNA, BLANCA, MD^{F††}
 Provider ID: 100199166013
 26732 CROWN VALLEY
 PKWY STE 170
 MISSION VIEJO, CA 92691
 (949) 364-7246
 Effective as of 01-MAR-16

CHO, ANTHONY, MD^{M†}
 Provider ID: 100326978002
 30707 GATEWAY PL STE A2
 MISSION VIEJO, CA 92694
 (657) 241-8601
 Effective as of 01-APR-18



CUENCA, ARNOLD, DO^{M†}
 Provider ID: 100103510019
 23512 MADERO
 MISSION VIEJO, CA 92691
 (949) 583-1600
 Effective as of 01-JUL-18

CUENCA, ARNOLD, DO^{M††}
 Provider ID: 100103510027
 23512 MADERO
 MISSION VIEJO, CA 92691

 (949) 583-1600
Effective as of 01-JAN-23



DELNITZ, DANUTA, MD^F
Provider ID: 100109319011

 26691 PLAZA STE 140
MISSION VIEJO, CA 92691

 (949) 240-8555
 Polish, Spanish
Effective as of 01-APR-19



DELNITZ, DANUTA, MD^F
Provider ID: 100109319012

 26691 PLAZA STE 140
MISSION VIEJO, CA 92691

 (949) 240-8555
 Polish, Spanish
Effective as of 01-APR-19



FIGHTLIN, STEFANIE, DO^{F†}
Provider ID: 100086847010

 26991 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

 (949) 582-5430
 Spanish
Effective as of 01-JAN-18



FLORES, TERESA, MD^{F†}
Provider ID: 100207722054

 27725 SANTA MARGARITA
PKWY STE 101
MISSION VIEJO, CA 92691

 (949) 270-2100
 Spanish
Effective as of 01-DEC-19

FLORES, TERESA, MD^{F†}
Provider ID: 100207722053


 27725 SANTA MARGARITA
PKWY STE 101
MISSION VIEJO, CA 92691

 (949) 270-2100
 Spanish
Effective as of 01-DEC-19

GEBHARD, KARL, MD^M

Provider ID: 100071312010


 26922 OSO PKWY STE 380
MISSION VIEJO, CA 92691

 (949) 305-0110
Effective as of 01-JAN-18

GEBHARD, KARL, MD^M

Provider ID: 100071312004


 26922 OSO PKWY STE 380
MISSION VIEJO, CA 92691

 (949) 305-0110
Effective as of 01-MAR-16

GEBHARD, KARL, MD^M

Provider ID: 100071312013


 26922 OSO PKWY STE 380
MISSION VIEJO, CA 92691

 (949) 305-0110
Effective as of 01-JUN-19

GEBHARD, KARL, MD^M

Provider ID: 100071312012



 26922 OSO PKWY STE 380
MISSION VIEJO, CA 92691

 (949) 305-0110
Effective as of 01-JUN-19

GLOBUS, JEFFREY, MD^M

Provider ID: 100008104012



 26902 OSO PKWY STE 140
MISSION VIEJO, CA 92691

 (949) 916-8870
 Spanish
Effective as of 01-OCT-22

GLOBUS, JEFFREY, MD^M

Provider ID: 100008104009



 26902 OSO PKWY STE 140
MISSION VIEJO, CA 92691

 (949) 916-8870
 Spanish
Effective as of 01-JAN-17

GLOBUS, JEFFREY, MD^M

Provider ID: 100008104004


 26902 OSO PKWY STE 140
MISSION VIEJO, CA 92691

 (949) 916-8870
 Spanish
Effective as of 01-DEC-14

GONZALEZ, DAVID, MD^{M†}

Provider ID: 100096155006

 26732 CROWN VALLEY
PKWY STE 170
MISSION VIEJO, CA 92691

 (949) 364-7246
Effective as of 01-OCT-18

KUMAR, NISHCHAL, MD^{M†}


Provider ID: 100224908013



 23512 MADERO
MISSION VIEJO, CA 92691

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

KUMAR, NISHCHAL, MD^{M†}

Provider ID: 100224908011



 23512 MADERO
MISSION VIEJO, CA 92691

 (949) 583-1600
 Hindi, Punjabi, Spanish
Effective as of 01-NOV-19

LY, PHUONG, MD^{M†}


Provider ID: 100354280025


 26800 CROWN VALLEY
PKWY STE 150
MISSION VIEJO, CA 92691

 (949) 276-2111
 Vietnamese
Effective as of 01-AUG-22

PEDARSANI, MARJAN, DO^{F††}




Provider ID: 100113548005

 23512 MADERO
MISSION VIEJO, CA 92691



 (949) 583-1600

 Farsi
Effective as of 01-MAY-12




PEDARSANI, MARJAN, DO^{F†}

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




RUTTEN, SONIA, MD^F

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



SAMOORI, RAMA, DO^{F†}

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



SHOAPOUR, CAMELLIA, MD^F

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



THOMAS, CHERYL, MD^F

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



THOMAS, CHERYL, MD^F

Provider ID: 100043536021
 27725 SANTA MARGARITA
PKWY STE 101
MISSION VIEJO, CA 92691
 (949) 270-2100
Effective as of 01-AUG-21



THOMAS, CHERYL, MD^F

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



THOMAS, CHERYL, MD^F

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


THOMAS, CHERYL, MD^F



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

THOMAS, CHERYL, MD^F

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




**YAZDANSHENAS, MARYAM,
MD^{F†}**

Provider ID: 100224906005
 30492 GATEWAY PL STE
110

MISSION VIEJO, CA 92694
 (949) 542-7700
 Farsi
Effective as of 01-AUG-20




GENERAL PRACTICE

JANISZEWSKI, EVA, MD^F




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

INTERNAL MEDICINE




ALLAMEHZADEH, REZA, MD^{M††}

Provider ID: 100114378012
 25982 PALA STE 170
MISSION VIEJO, CA 92691
 (949) 581-2002
 Farsi, German, Persian
Effective as of 01-JAN-18




BADIE, MEHRNAZ, MD^{F††}

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




BENNER, ERIC, MD^{M†}

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




CHANG, HELEN, MD^{F††}

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



COVARRUBIAS, GRACIA, MD^{F††}

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




COVARRUBIAS, GRACIA, MD^{F††}

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


LU, LESLIE, MD^{M†}



Provider ID: 100332363002
 26800 CROWN VALLEY
 PKWY STE 305
 MISSION VIEJO, CA 92691
 (949) 364-6000
 Effective as of 01-SEP-18

MAYET, KHADIJA, MD^{F†}



Provider ID: 100062204006
 26800 CROWN VALLEY
 PKWY STE 315
 MISSION VIEJO, CA 92691
 (949) 364-6000
 Gujarati, Urdu
 Effective as of 01-FEB-16

NGUYEN, VY, MD^{F††}



Provider ID: 100105037005
 26800 CROWN VALLEY
 PKWY STE 325
 MISSION VIEJO, CA 92691

 (949) 364-6000
 Vietnamese
 Effective as of 01-NOV-12



NIETO, ELIZABETH, MD^{F†}

Provider ID: 100364838004
 26800 CROWN VALLEY
 PKWY STE 25
 MISSION VIEJO, CA 92691
 (949) 364-6000
 Effective as of 01-OCT-22



NIETO, ELIZABETH, MD^{F†}

Provider ID: 100364838002
 26800 CROWN VALLEY
 PKWY STE 315
 MISSION VIEJO, CA 92691
 (949) 364-6000
 Effective as of 01-AUG-22




NOORIAN, NADER, MD^{M††}

Provider ID: 100052175006
 26800 CROWN VALLEY
 PKWY STE 305
 MISSION VIEJO, CA 92691
 (949) 364-6000
 Effective as of 01-NOV-12




PRATT, DONALD, MD^{M††}

Provider ID: 100088649011
 26800 CROWN VALLEY
 PKWY STE 325
 MISSION VIEJO, CA 92691
 (949) 364-6000
 Effective as of 01-AUG-22




ROKSHADFAR, SAGHI, MD^{F†}

Provider ID: 100113408006
 23512 MADERO
 MISSION VIEJO, CA 92691
 (949) 583-1600
 Farsi
 Effective as of 01-MAY-12




ROKSHADFAR, SAGHI, MD^{F†}

Provider ID: 100113408005
 23512 MADERO
 MISSION VIEJO, CA 92691
 (949) 583-1600
 Farsi
 Effective as of 01-AUG-20




SELIGSOHN, BRUCE, MD^{M*}

Provider ID: 100021098007
 26302 LA PAZ RD STE 211
 MISSION VIEJO, CA 92691
 (949) 588-8775
 Spanish
 Effective as of 01-JAN-18




SERGEYEVA, YELENA, MD^F

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




SERGEYEVA, YELENA, MD^F

Provider ID: 100403248005
 27800 MEDICAL CENTER
 RD STE 110
 MISSION VIEJO, CA 92691
 (949) 364-3532
 Russian
 Teleservice
 Effective as of 01-DEC-23




SERGEYEVA, YELENA, MD^F

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



SERGEYEVA, YELENA, MD^F

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



STALLWORTH, ROXANNE, MD^{F†}

Provider ID: 100185861008
 26800 CROWN VALLEY
 PKWY STE 315
 MISSION VIEJO, CA 92691
 (949) 364-6000
 Farsi, Spanish
 Effective as of 01-AUG-19




STAUNTON, MICHELE, MD^{F†}

Provider ID: 100043245014
 26800 CROWN VALLEY
 PKWY STE 325
 MISSION VIEJO, CA 92691
 (949) 364-6000
 Effective as of 01-AUG-22




STAUNTON, MICHELE, MD^{F††}

Provider ID: 100043245010
 26800 CROWN VALLEY
 PKWY STE 330
 MISSION VIEJO, CA 92691
 (949) 364-6000
 Effective as of 01-NOV-14




SWADENER, NINA, MD^{F†}

Provider ID: 100219528002
 26800 CROWN VALLEY
 PKWY STE 305
 MISSION VIEJO, CA 92691
 (949) 364-6000
 Spanish
 Effective as of 01-NOV-14



TRUONG, ANDREW, MD^{M†}

Provider ID: 100344383002
 26800 CROWN VALLEY
 PKWY STE 305
 MISSION VIEJO, CA 92691
 (949) 364-6000
 Vietnamese
 Effective as of 01-JUL-19



TSAI, MON TA, MD^{M††}

Provider ID: 100060379006
 25982 PALA STE 250
 MISSION VIEJO, CA 92691
 (949) 588-0051
 Chinese, Mandarin,
 Taiwanese
 Effective as of 01-JAN-18

WADELL, CHAD, MD^{M†}




Provider ID: 100108309006
 26800 CROWN VALLEY
 PKWY STE 315
 MISSION VIEJO, CA 92691
 (949) 364-6000
 Effective as of 01-NOV-14

YAZDI, JANET, MD^{F††}




Provider ID: 100086097007
 26800 CROWN VALLEY
 PKWY STE 305
 MISSION VIEJO, CA 92691
 (949) 364-6000
 Effective as of 01-MAR-13

FAMILY PRACTICE




BREWER, ANH, DO^{F†}

Provider ID: 100260727002
 27722 CLINTON KEITH RD
 BLDG F
 MURRIETA, CA 92562
 (951) 878-9820
 Vietnamese
 Effective as of 01-FEB-16



BREWER, ANH, DO^{F†}

Provider ID: 100260727007
 27722 CLINTON KEITH RD
 BLDG F
 MURRIETA, CA 92562
 (951) 878-9820
 Vietnamese
 Effective as of 01-NOV-20




BRIGGS, BRIDGET, MD^F

Provider ID: 100069323004
 25470 MEDICAL CENTER
 DR STE 102
 MURRIETA, CA 92562
 (951) 698-6090
 Spanish
 Effective as of 01-SEP-10




MCKERAHAN, KELLY, DO^M

Provider ID: 100031842003
 25095 JEFFERSON AVE
 STE 202
 MURRIETA, CA 92562
 (951) 696-9566
 Effective as of 01-JUN-03

MEHARDA, SANJIWANI, MD^F

Provider ID: 100327486018
 24910 LAS BRISAS RD STE
 111
 MURRIETA, CA 92562
 (951) 694-8549
 Hindi, Punjabi, Urdu
 Effective as of 01-DEC-23

NGUYEN, BACH, MD^{M†}

Provider ID: 100107585007
 41680 IVY ST STE A
 MURRIETA, CA 92562
 (951) 677-2227
 Vietnamese
 Effective as of 01-NOV-23

NGUYEN, BACH, MD^{M†}

Provider ID: 100107585005

41680 IVY ST STE A
MURRIETA, CA 92562
(951) 677-2227
Vietnamese
Effective as of 01-OCT-22

PHILLIPS, LILY, MD^{F†}

Provider ID: 100113116007
27910 LAS BRISAS RD
STE 105
MURRIETA, CA 92562
(951) 231-1385
Chinese, Mandarin, Spanish
Effective as of 01-AUG-14

PHILLIPS, LILY, MD^{F†}

Provider ID: 100113116009
27910 LAS BRISAS RD
STE 106
MURRIETA, CA 92562
(951) 231-1385
Chinese, Mandarin, Spanish
Effective as of 01-AUG-14

SOTIS, JAMES, MD^{M†}

Provider ID: 100343557003
38860 SKY CANYON DR
BLDG A
MURRIETA, CA 92563
(951) 676-4193
Effective as of 01-AUG-19

WALTER, ROME, DO^M

Provider ID: 100198386003
41011 CALIFORNIA OAKS
RD STE 103
MURRIETA, CA 92562
(951) 225-6287
Effective as of 01-JUN-19

YUN, JONATHAN, DO^{M†}

Provider ID: 100025475022
24910 LAS BRISAS RD STE
111
MURRIETA, CA 92562

(951) 694-8549
Korean, Spanish
Effective as of 01-AUG-20

YUN, JONATHAN, DO^{M†}

Provider ID: 100025475024
24910 LAS BRISAS RD STE
111
MURRIETA, CA 92562
(951) 694-8549
Korean, Spanish
Effective as of 01-NOV-20

GENERAL PRACTICE

LULIC, DZENAN, MD^{M†}

Provider ID: 100283060006
40700 CALIFORNIA OAKS
RD STE 206
MURRIETA, CA 92562
(951) 412-0011
Spanish
Effective as of 01-MAR-19

INTERNAL MEDICINE

BLACK, JASON, MD^{M†}

Provider ID: 100073449005
24680 JEFFERSON AVE
STE A
MURRIETA, CA 92562
(951) 677-2252
Effective as of 01-JAN-16

GONZALES, EDIVINA, MD^F

Provider ID: 100039220008
39755 DATE ST STE 103
MURRIETA, CA 92563
(951) 304-3221
Spanish, Tagalog
Effective as of 01-SEP-10

GONZALES, PATRICK, MD^{M†}

Provider ID: 100109580007
39755 DATE ST STE 103

MURRIETA, CA 92563
(951) 304-3221
Effective as of 01-APR-19

GONZALES, PATRICK, MD^{M†}

Provider ID: 100109580008
39755 DATE ST STE 103
MURRIETA, CA 92563
(951) 304-3221
Effective as of 01-APR-19

GONZALES, EDIVINA, MD^F

Provider ID: 100039220007
39755 DATE ST STE 103
MURRIETA, CA 92563
(951) 304-3221
Spanish, Tagalog
Effective as of 01-JAN-11

MARTINEZ, JORGE, MD^{M†}

Provider ID: 100096235003
39755 MURRIETA HOT
SPRINGS RD STE E120
MURRIETA, CA 92563
(951) 461-1331
Spanish
Effective as of 01-DEC-12

MARTINEZ, JORGE, MD^{M†}

Provider ID: 100096235010
39755 MURRIETA HOT
SPRINGS RD STE E120
MURRIETA, CA 92563
(951) 461-1331
Spanish
Effective as of 01-FEB-21

REYNOLDS, RICHARD, MD^{M†}

Provider ID: 100043439030
25109 JEFFERSON AVE STE
100
MURRIETA, CA 92562
(951) 698-0440
Effective as of 01-OCT-22

PEDIATRICS

NGUYEN, TUAN, MD^{M†}

Provider ID: 100105070004

28078 BAXTER RD STE 320
MURRIETA, CA 92563

(951) 246-4546

Effective as of 01-APR-21

FAMILY PRACTICE

ALGHAMDI, ASMA, MD^{F†}

Provider ID: 100359014006

2400 E 8TH ST
NATIONAL CITY, CA 91950

(619) 662-4100

Effective as of 01-NOV-21

**ALVAREZ-ESTRADA, MIGUEL,
MD^M**

Provider ID: 100360099026

2835 HIGHLAND AVE
NATIONAL CITY, CA 91950

(844) 200-2426

Spanish

Effective as of 01-FEB-24

CAMPBELL, BRIANNA, MD^{F†}

Provider ID: 100360159004

2400 E 8TH ST
NATIONAL CITY, CA 91950

(619) 662-4100

Effective as of 01-JAN-21

CARLSON, ROBERT, MD^{M†}

Provider ID: 100002398003

36 N EUCLID AVE STE 105
NATIONAL CITY, CA 91950

(619) 255-2950

Spanish, Tagalog

Effective as of 01-SEP-22

CEVALLOS, JAMES, MD^{M††}

Provider ID: 100079582009

1136 D AVE

NATIONAL CITY, CA 91950

(619) 662-4100

Spanish

Effective as of 01-APR-23

CEVALLOS, JAMES, MD^{M†}

Provider ID: 100079582004

1136 D AVE
NATIONAL CITY, CA 91950

(619) 662-4100

Spanish

Effective as of 01-MAR-16

DILLON, MAYRA, MD^{F††}

Provider ID: 100163378003

1136 D AVE
NATIONAL CITY, CA 91950

(619) 662-4100

Spanish

Effective as of 01-JAN-14

KAKAIYA, ROSHNI, DO^F

Provider ID: 100395889005

2835 HIGHLAND AVE
NATIONAL CITY, CA 91950

(844) 200-2426

Spanish

Effective as of 01-FEB-24

KUNIN-RIDA, TERI, MD^{F†}

Provider ID: 100064070023

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

(619) 434-7308

Armenian, Arabic, Spanish

Teleservice

Effective as of 01-NOV-21

MATTHEWS, MERRITT, MD^{M†}

Provider ID: 100021162012

610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

(619) 527-7700

Spanish, Tagalog

Effective as of 01-NOV-20

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216026

340 E 8TH ST STE 330
NATIONAL CITY, CA 91950

(619) 662-4100

Spanish

Effective as of 01-MAY-23

MEDINA, ALEXANDER, MD^{M†}

Provider ID: 100325216016

330 E 8TH ST
NATIONAL CITY, CA 91950

(619) 662-4100

Spanish

Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216019

333 E 8TH ST
NATIONAL CITY, CA 91950

(619) 662-4100

Spanish

Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^{M†}

Provider ID: 100325216002

330 E 8TH ST
NATIONAL CITY, CA 91950

(619) 662-4100

Spanish

Effective as of 01-FEB-18

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216020

334 E 8TH ST
NATIONAL CITY, CA 91950

(619) 662-4100



Spanish

Effective as of 01-APR-23




MEDINA, ALEXANDER, MD^M

Provider ID: 100325216021




335 E 8TH ST
NATIONAL CITY, CA 91950

 (619) 662-4100
 Spanish
Effective as of 01-APR-23




MEDINA, ALEXANDER, MD^M
Provider ID: 100325216022

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




MEDINA, ALEXANDER, MD^M
Provider ID: 100325216023

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




MEDINA, ALEXANDER, MD^M
Provider ID: 100325216024

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


MEDINA, ALEXANDER, MD^M
Provider ID: 100325216025



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

MEDINA, ALEXANDER, MD^M
Provider ID: 100325216017




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

MEDINA, ALEXANDER, MD^M




Provider ID: 100325216018
 332 E 8TH ST
NATIONAL CITY, CA 91950

 (619) 662-4100
 Spanish
Effective as of 01-APR-23




NAVARRO, VANESSA, MD^{F†}
Provider ID: 100173914003

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



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

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




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

 610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 (619) 527-7700
 Spanish
Effective as of 01-SEP-20



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



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




ORTIZ ILIZALITURRI, ANA, MD^{F*}



Provider ID: 100394347012
 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 (619) 434-7308
 Spanish

Teleservice
Effective as of 01-OCT-23




PATEL, PAAVAN, DO^M
Provider ID: 100413256006
 610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 (619) 527-7700
Effective as of 01-NOV-23


PATEL, PAAVAN, DO^M
Provider ID: 100413256010
 610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 (619) 527-7700
Effective as of 01-DEC-23



ROBERTS, POMAI, MD^{F*†}
Provider ID: 100323487002
 1136 D AVE
NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
Effective as of 01-SEP-17



SAZEGAR, PAYAM, MD^{M†}
Provider ID: 100187888015
 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 (619) 434-7308




Teleservice
Effective as of 01-JUL-21




SNOOK, BRIAN, DO^{M*†}
Provider ID: 100211994002
 2400 E 8TH ST
NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
Effective as of 01-JUN-14

SNOOK, BRIAN, DO^{M*†}
Provider ID: 100211994006
 2400 E 8TH ST
NATIONAL CITY, CA 91950



 (619) 662-4100
 Spanish
Effective as of 01-JAN-21



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



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



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



FQHC



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



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

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




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




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




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

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




GENERAL PRACTICE




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

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




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

INTERNAL MEDICINE



BRAVERMAN, IRA, MD^{M†}
Provider ID: 100012010018
 610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
 (619) 267-8181
 Spanish, Tagalog
Effective as of 01-AUG-20

BRAVERMAN, IRA, MD^{M†}
Provider ID: 100012010021
 610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
 (619) 267-8181
 Spanish, Tagalog
Effective as of 01-APR-21




BRAVERMAN, IRA, MD^{M†}

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




CANTU-REYNA, GUILLERMO, MD^{Mt}

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




COMUNALE, RODERICK, MD^{Mt}

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

DELA PAZ, LENNIE, MD^{Mt}



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

EL GHONEIMY, AHMED, MD^{Mt}



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

HEKMAT, RAZI, MD^{Mt}



Provider ID: 100081732019

 610 EUCLID AVE STE 201
 NATIONAL CITY, CA 91950
 (619) 267-8181
 Effective as of 01-AUG-20



HEKMAT, RAZI, MD^{Mt}

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




HEKMAT, RAZI, MD^{Mt}

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




KURUVADI, NISHA, DO^F

Provider ID: 100412012005
 502 EUCLID AVE STE 203
 NATIONAL CITY, CA 91950
 (619) 267-0553
 Effective as of 01-OCT-23


MEDINA, NATALIE, MD^F



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

PRATHIPATI, LAKSHMI, MD^{Ft}




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

PRATHIPATI, LAKSHMI, MD^{Ft}




Provider ID: 100041945033
 502 EUCLID AVE STE 2013

NATIONAL CITY, CA 91950
 (619) 267-0553
 Spanish, Telugu, Tagalog
 Effective as of 01-AUG-22




TIANGCO, IRINEO, MD^{Mt}

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




TIANGCO, IRINEO, MD^{Mt}

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




TIANGCO, IRINEO, MD^{Mt}

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

TIANGCO, IRINEO, MD^{Mt}



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

TIANGCO, IRINEO, MD^{Mt}



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

FAMILY PRACTICE



GREENBERG, CATOU, MD^{F*}

Provider ID: 100072487003
 1441 AVOCADO AVE STE 503
 NEWPORT BEACH, CA 92660
 (949) 718-9020
 Effective as of 01-JUL-12




GREENBERG, CATOU, MD^{F*}

Provider ID: 100072487006
 1441 AVOCADO AVE STE 503
 NEWPORT BEACH, CA 92660
 (949) 718-9020
 Effective as of 01-JAN-14


GREENBERG, CATOU, MD^{F*}



Provider ID: 100072487007
 1441 AVOCADO AVE STE 503
 NEWPORT BEACH, CA 92660
 (949) 718-9020
 Effective as of 01-SEP-22

KIM, KAREN, DO^F




Provider ID: 100070645006
 1441 AVOCADO AVE STE 503
 NEWPORT BEACH, CA 92660
 (949) 718-9020
 Korean
 Effective as of 01-JAN-14

KIM, KAREN, DO^{F*}




Provider ID: 100070645003
 1441 AVOCADO AVE STE 503
 NEWPORT BEACH, CA 92660

 (949) 718-9020
 Korean
 Effective as of 01-JUL-12




KIM, KAREN, DO^F

Provider ID: 100070645007
 1441 AVOCADO AVE STE 503
 NEWPORT BEACH, CA 92660
 (949) 718-9020
 Korean
 Effective as of 01-SEP-22

MANGOBA, LUTHER, MD^{M†}




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

MANGOBA, LUTHER, MD^{M†}



Provider ID: 100107397012
 400 NEWPORT CENTER DR STE 303
 NEWPORT BEACH, CA 92660
 (949) 644-1300
 Spanish
 Effective as of 01-APR-22

INTERNAL MEDICINE

SPRINGSTUBB, ADITI, MD^{F†}




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

SYED, SAMEENA, DO^F




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

FAMILY PRACTICE




BANIADAM, BEHZAD, MD^M

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




DONNELL, MARTI, MD^{F*}

Provider ID: 100049875027
 517 N HORNE ST
 OCEANSIDE, CA 92054
 (844) 308-5003
 Spanish
 Effective as of 01-JAN-24

DONNELL, MARTI, MD^{F*}

Provider ID: 100049875026
 4700 N RIVER RD
 OCEANSIDE, CA 92057
 (844) 308-5003
 Spanish
 Effective as of 01-JAN-24

DONNELL, MARTI, MD^{F*}

Provider ID: 100049875025
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054
 (844) 308-5003
 Spanish
 Effective as of 01-JAN-24

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

Provider ID: 100358800017

517 N HORNE ST
OCEANSIDE, CA 92054
(760) 631-5000
Spanish
Effective as of 01-JAN-24

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

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

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

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

GONZALES, MICHELLE, MD^F

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

KURUKULASURIYA, DAYANTHITHI, DO^F

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

MARTINEZ, LESLY, MD^{F*}

Provider ID: 100397984038
818 PIER VIEW WAY

OCEANSIDE, CA 92054
(760) 631-5000
Spanish
Effective as of 01-JAN-24

MARTINEZ, LESLY, MD^{F*}

Provider ID: 100397984037
4700 N RIVER RD
OCEANSIDE, CA 92057
(760) 631-5000
Spanish
Effective as of 01-JAN-24

MARTINEZ, LESLY, MD^{F*}

Provider ID: 100397984036
517 N HORNE ST
OCEANSIDE, CA 92054
(766) 315-0000
Spanish
Effective as of 01-JAN-24

PANICKER, CIBU, MD^M

Provider ID: 100322969007
4700 N RIVER RD
OCEANSIDE, CA 92057
(760) 631-5000
Effective as of 01-JAN-24

SAFI, ROOZCHEHR, MD^{F†}

Provider ID: 100201387012
605 CROUCH ST
OCEANSIDE, CA 92054
(760) 736-6767
Farsi
Effective as of 01-APR-14

VIDAL, MONICA, DO^{F†}

Provider ID: 100327876044
4700 N RIVER RD
OCEANSIDE, CA 92057
(760) 631-5000
Spanish
Effective as of 01-JAN-24

VIDAL, MONICA, DO^{F†}

Provider ID: 100327876043

517 N HORNE ST
OCEANSIDE, CA 92054
(760) 631-5000
Spanish
Effective as of 01-JAN-24

VIDAL, MONICA, DO^{F†}

Provider ID: 100327876042
818 PIER VIEW WAY
OCEANSIDE, CA 92054
(844) 308-5003
Spanish
Effective as of 01-JAN-24

ZAMPELLO, LISA, MD^F

Provider ID: 100340931015
818 PIER VIEW WAY
OCEANSIDE, CA 92054
(760) 631-5000
Effective as of 01-JAN-24

ZAMPELLO, LISA, MD^F

Provider ID: 100340931012
818 PIER VIEW WAY
OCEANSIDE, CA 92054
(760) 631-5000
Effective as of 01-JUN-23

ZAMPELLO, LISA, MD^F

Provider ID: 100340931014
818 PIER VIEW WAY
OCEANSIDE, CA 92054
(760) 631-5000
Effective as of 01-DEC-23

ZAMPELLO, LISA, MD^F

Provider ID: 100340931008
818 PIER VIEW WAY
OCEANSIDE, CA 92054
(760) 631-5000
Effective as of 01-JAN-23

FQHC

VISTA COMMUNITY CLINIC, †

Provider ID: PG0072409007

4700 N RIVER RD
OCEANSIDE, CA 92057

(760) 631-5000

Teleservice

Effective as of 01-JUL-22

**VISTA COMMUNITY CLINIC
HORNE STREET,**

Provider ID: PG0084639007

517 N HORNE ST
OCEANSIDE, CA 92054

(760) 631-5000

Teleservice

Effective as of 01-JUL-22

**VISTA COMMUNITY CLINIC
PIER VIEW WAY,**

Provider ID: PG0084683007

818 PIER VIEW WAY
OCEANSIDE, CA 92054

(760) 631-5000

Teleservice

Effective as of 01-JUL-22

INTERNAL MEDICINE

CHONG, ILSONG, MD^M

Provider ID: 100334344006

605 CROUCH ST
OCEANSIDE, CA 92054

(760) 736-6767

Korean

Effective as of 01-FEB-23

CURRAN, PERRIN, MD^M

Provider ID: 100083095002

3601 VISTA WAY STE 201
OCEANSIDE, CA 92056

(760) 945-1894

Effective as of 01-FEB-05

HEIFETZ, SUSAN, MD^F

Provider ID: 100024397011

3601 VISTA WAY STE 201
OCEANSIDE, CA 92056

(760) 529-9514

Effective as of 01-SEP-21

LAWSON, CATHERINE, MD^F

Provider ID: 100080716004

3230 WARING CT STE J
OCEANSIDE, CA 92056

(760) 941-4498

Effective as of 01-DEC-10

LIZOTTE, PAUL, DO^{M†}

Provider ID: 100212648008

115 N EL CAMINO REAL STE
A

OCEANSIDE, CA 92058

(760) 330-5055

Spanish

Effective as of 01-MAR-21

MACMURRAY, MICHAEL, MD^M

Provider ID: 100067535007

818 PIER VIEW WAY
OCEANSIDE, CA 92054

(760) 631-5000

Spanish

Effective as of 01-MAR-20

MACMURRAY, MICHAEL, MD^M

Provider ID: 100067535003

818 PIER VIEW WAY
OCEANSIDE, CA 92054

(760) 631-5000

Spanish

Effective as of 01-OCT-05

MACMURRAY, MICHAEL, MD^M

Provider ID: 100067535012

818 PIER VIEW WAY
OCEANSIDE, CA 92054

(760) 631-5000

Spanish

Effective as of 01-JAN-24

ZIMMERMANN, ANDRES, MD^M

Provider ID: 100015622004

3601 VISTA WAY STE 201
OCEANSIDE, CA 92056

(760) 639-1714

Spanish

Effective as of 01-SEP-21

FAMILY PRACTICE

MCHENRY, KATHRYN, DO^F

Provider ID: 100320650015

16650 HIGHWAY 76
PAUMA VALLEY, CA 92061

(760) 742-9919

Spanish

Effective as of 01-FEB-24

FQHC

**NEIGHBORHOOD
HEALTHCARE PAUMA
VALLEY,**

Provider ID: PG0024990047

16650 HIGHWAY 76
PAUMA VALLEY, CA 92061

(760) 742-9919

Teleservice

Effective as of 01-JUL-22

GENERAL PRACTICE

LAFONTANT, JEAN, MD^{M†}

Provider ID: 100218405011

524 W 4TH ST STE B
PERRIS, CA 92570

(951) 355-0030

French, Spanish

Effective as of 01-APR-21

INTERNAL MEDICINE

SANUCCI, SHAUN, DO^F

Provider ID: 100352649063

524 W 4TH ST STE B
PERRIS, CA 92570
(951) 355-0030
Effective as of 01-NOV-23

SANUCCI, SHAUN, DO^F
Provider ID: 100352649064

524 W 4TH ST STE B
PERRIS, CA 92570
(951) 355-0030
Effective as of 01-FEB-24

FAMILY PRACTICE

KAUR, JATINDER, MD^F
Provider ID: 100315025013

13010 POWAY RD
POWAY, CA 92064
(858) 218-3000
Hindi, Urdu
Effective as of 01-MAY-23

KAUR, JATINDER, MD^F
Provider ID: 100315025014

13010 POWAY RD
POWAY, CA 92064
(858) 218-3000
Hindi, Urdu
Effective as of 01-JAN-24

TANKSLEY, SIMON, MD^M
Provider ID: 100353447004

15611 POMERADO RD FL 3
POWAY, CA 92064
(858) 675-3210
Spanish
Effective as of 01-JAN-24

FQHC

**NEIGHBORHOOD
HEALTHCARE GOLD FAMILY
HEALTH CENTER,**
Provider ID: PG0092632004
13010 POWAY RD

POWAY, CA 92064
(858) 218-3000
Effective as of 01-JUL-22

INTERNAL MEDICINE

CAPARSO, AMANDA, DO^{F+t}
Provider ID: 100202026020

13010 POWAY RD
POWAY, CA 92064
(760) 737-6935
Effective as of 01-OCT-22

RIVERA, MARCELO, MD^{M+t}
Provider ID: 100036662015

13525 MIDLAND RD STE F
POWAY, CA 92064
(858) 486-9100
Spanish, Tagalog
Effective as of 01-JAN-21

RIVERA, MARCELO, MD^{M+t}
Provider ID: 100036662019

13525 MIDLAND RD STE F
POWAY, CA 92064
(858) 486-9100
Spanish, Tagalog
Effective as of 01-SEP-23

RIVERA, MARCELO, MD^M
Provider ID: 100036662022

15644 POMERADO RD STE
100
POWAY, CA 92064
(858) 485-5111
Spanish, Tagalog
Effective as of 01-DEC-23

RIVERA, MARCELO, MD^M
Provider ID: 100036662021

15644 POMERADO RD STE
100
POWAY, CA 92064
(858) 485-5111
Spanish, Tagalog

Effective as of 01-SEP-23

RIVERA, MARCELO, MD^M
Provider ID: 100036662020

15644 POMERADO RD STE
100
POWAY, CA 92064
(858) 485-5111
Spanish, Tagalog
Effective as of 01-SEP-23

WINE, DAVID, MD^M
Provider ID: 100035139012

15611 POMERADO RD STE
400
POWAY, CA 92064
(858) 675-3100
Effective as of 01-FEB-24

PEDIATRICS

YUNG, DORIS, MD^{F+t}
Provider ID: 100036513005

220 ROTANZI ST
RAMONA, CA 92065
(760) 736-6767
Chinese, Mandarin, Spanish
Effective as of 01-DEC-18

FAMILY PRACTICE

BILAN, NATALIA, MD^F
Provider ID: 100112756005

29809 SANTA MARGARITA
PKWY STE 300
RANCHO SANTA
MARGARITA, CA 92688
(949) 709-5100
Russian
Effective as of 01-JAN-18

CIANCIOLA, MARK, MD^{M+t}
Provider ID: 100057057005

29472 AVENIDA DE LAS
BANDERA

RANCHO SANTA
MARGARITA, CA 92688
☎ (949) 459-9968
Effective as of 01-MAY-12

GHAZI, FARANAK, MD^{F†}
Provider ID: 100332514003
📍 29873 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688
☎ (949) 709-0988
Effective as of 01-AUG-18

KARIMABADI, MARJAN, MD^{F†}
Provider ID: 100196435002
📍 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688
☎ (949) 459-9968
📄 Farsi
Effective as of 01-OCT-13

GENERAL PRACTICE

RAMIREZ, HECTOR, MD^M
Provider ID: 100077601004
📍 29833 SANTA MARGARITA
PKWY STE 200
RANCHO SANTA
MARGARITA, CA 92688
☎ (949) 858-8652
📄 Spanish
Effective as of 01-JAN-18

INTERNAL MEDICINE

GORE, GWENDOLYN, MD^{F†}
Provider ID: 100020754005
📍 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688
☎ (949) 459-9968

Effective as of 01-MAY-12
KAMAREI, SHAPARAK, MD^{F†}
Provider ID: 100132319012
📍 29873 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688
☎ (949) 709-0988
📄 Farsi
Effective as of 01-JAN-18

TRAN, LILIAN, MD^{F†}
Provider ID: 100105534008
📍 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688
☎ (949) 459-9968
📄 Vietnamese
Effective as of 01-MAR-15

FAMILY PRACTICE

DESILVA, PETER, MD^M
Provider ID: 100046594003
📍 29809 SANTA MARGARITA
PKWY STE 300
RCHO STA MARG, CA
92688
☎ (949) 709-5100
Effective as of 01-JAN-18

ALI, MOHAMMED, MD^{M†}
Provider ID: 100114282052
📍 665 CAMINO DE LOS
MARES STE 203
SAN CLEMENTE, CA 92673
☎ (949) 493-9344
📄 Hindi, Telugu, Urdu
Effective as of 01-DEC-18

ALI, MOHAMMED, MD^{M†}
Provider ID: 100114282063
📍 665 CAMINO DE LOS

MARES STE 203
SAN CLEMENTE, CA 92673
☎ (949) 493-9344
📄 Hindi, Telugu, Urdu
Effective as of 01-JAN-22

ALI, MOHAMMED, MD^{M†}
Provider ID: 100114282021
📍 665 CAMINO DE LOS
MARES STE 203
SAN CLEMENTE, CA 92673
☎ (949) 493-9344
📄 Hindi, Telugu, Urdu
Effective as of 01-JAN-16

ALI, MOHAMMED, MD^{M†}
Provider ID: 100114282028
📍 665 CAMINO DE LOS
MARES STE 203
SAN CLEMENTE, CA 92673
☎ (949) 493-9344
📄 Hindi, Telugu, Urdu
Effective as of 01-JAN-17

ALI, MOHAMMED, MD^{M†}
Provider ID: 100114282008
📍 665 CAMINO DE LOS
MARES STE 203
SAN CLEMENTE, CA 92673
☎ (949) 493-9344
📄 Hindi, Telugu, Urdu
Effective as of 01-OCT-15

DAVALOS, RICARDO, MD^M
Provider ID: 100077642004
📍 150 AVENIDA CABRILLO
STE A
SAN CLEMENTE, CA 92672
☎ (949) 369-6993
📄 Spanish
Effective as of 01-JAN-18

RAMSEY, KAYLA, DO^F
Provider ID: 100365540002
📍 1031 AVENIDA PICO STE

203
SAN CLEMENTE, CA 92673
☎ (949) 557-0820
Effective as of 01-JAN-21

ROBERSON, ANDREA, DO^{Ft}

Provider ID: 100091717003
📍 105 AVENIDA DE LA ESTRELLA STE 1A
SAN CLEMENTE, CA 92672
☎ (949) 586-8000
Effective as of 01-JAN-18

SAFAVI, MAHSA, MD^{Ft}

Provider ID: 100350049007
📍 724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
☎ (949) 493-6113
📱 Farsi, Persian
Effective as of 01-JAN-23

SHOKOUHI, SARA, MD^{Ft}

Provider ID: 100111432006
📍 665 CAMINO DE LOS MARES STE 207
SAN CLEMENTE, CA 92673
☎ (949) 661-4411
📱 Farsi, Persian
Effective as of 01-JAN-18

YU, CHRISTINE, DO^F

Provider ID: 100420091002
📍 638 CAMINO DE LOS MARES STE D4
SAN CLEMENTE, CA 92673
☎ (949) 542-8865
📱 Chinese, Mandarin
Effective as of 01-DEC-23

INTERNAL MEDICINE

CHANG, LAWRENCE, MD^M

Provider ID: 100045275002
📍 665 CAMINO LOS MARES 301

SAN CLEMENTE, CA 92673
☎ (949) 240-9664
📱 Chinese, Mandarin, Spanish
Effective as of 01-JAN-18

GARNER, KAREN, MD^{Ft}

Provider ID: 100100519023
📍 831 VIA SUERTE STE 102
SAN CLEMENTE, CA 92673
☎ (949) 364-5600
Effective as of 01-NOV-17

MITREVSKI, PREDRAG, MD^{Mt}

Provider ID: 100071204007
📍 675 CAMINO DE LOS MARES STE 200
SAN CLEMENTE, CA 92673
☎ (949) 542-8865
Effective as of 01-JAN-15

REXINGER, KENNETH, MD^{Mt}

Provider ID: 100058286009
📍 831 VIA SUERTE STE 102
SAN CLEMENTE, CA 92673
☎ (949) 364-5600
Effective as of 01-JAN-15

UNDERWOOD JOLLY, AMY, MD^{Ft}

Provider ID: 100086849011
📍 831 VIA SUERTE STE 102
SAN CLEMENTE, CA 92673
☎ (949) 364-5600
Effective as of 01-JAN-22

WOOD, YELENA, MD^{Ft}

Provider ID: 100018427006
📍 724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
☎ (949) 493-6113
Effective as of 01-JAN-18

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL,

MD^{Mt}

Provider ID: 100360099016
📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
☎ (619) 662-4100
📱 Spanish
Effective as of 01-MAY-22

ALVAREZ-ESTRADA, MIGUEL, MD^{Mt}

Provider ID: 100360099012
📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
☎ (619) 662-4100
📱 Spanish
Effective as of 01-JAN-21

BOYD, JAMES, MD^M

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

CUTLER, MICHAEL, MD^M

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

CUTLER, MICHAEL, MD^M

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

CUTLER, MICHAEL, MD^M

Provider ID: 100225708021

3802 NATIONAL AVE
SAN DIEGO, CA 92113

(619) 264-2591

Russian, Spanish

Effective as of 01-JAN-24

DABO, TARAM, MD^{M†}

Provider ID: 100075261004

1919 GRAND AVE STE 1E
SAN DIEGO, CA 92109

(858) 270-5454

Chinese, French, Mandarin

Effective as of 01-JAN-14

DABO, TARAM, MD^{M†}

Provider ID: 100075261003

1919 GRAND AVE STE 1E
SAN DIEGO, CA 92109

(858) 270-5454

Chinese, French, Mandarin

Effective as of 01-MAR-11

DAVIS, DEIRDRE, MD^{F†}

Provider ID: 100375869002

950 S EUCLID AVE
SAN DIEGO, CA 92114

(619) 662-4100

Spanish

Teleservice

Effective as of 01-AUG-21

DE ROTH, GEORGINE, MD^F

Provider ID: 100409222005

3750 CONVOY ST STE 118
SAN DIEGO, CA 92111

(760) 741-1224

French, Hungarian, Spanish

Effective as of 01-AUG-23

DENYSIAK, JACQUELINE, MD^{F†}

Provider ID: 100363725002

3969 4TH AVE STE 203
SAN DIEGO, CA 92103

(619) 294-6500

Teleservice

Effective as of 01-DEC-20

DENYSIAK, JACQUELINE, MD^{F†}

Provider ID: 100363725005

3969 4TH AVE STE 203
SAN DIEGO, CA 92103

(619) 294-6500

Teleservice

Effective as of 01-JAN-21

DENYSIAK, JACQUELINE, MD^{F†}

Provider ID: 100363725007

3969 4TH AVE STE 203
SAN DIEGO, CA 92103

(619) 294-6500

Teleservice

Effective as of 01-NOV-21

DIEP, BRIAN, MD^{M†}

Provider ID: 100324529011

7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111

(858) 277-5463

Vietnamese

Teleservice

Effective as of 01-JUN-22

DIEP, BRIAN, MD^{M†}

Provider ID: 100324529013

4551 EL CAJON BLVD
SAN DIEGO, CA 92115

(619) 280-7185

Vietnamese

Teleservice

Effective as of 01-OCT-22

DRZYMALSKI, MONIKA, DO^F

Provider ID: 100390753010

3180 UNIVERSITY AVE STE
120
SAN DIEGO, CA 92104

(858) 529-7229

Teleservice

Effective as of 01-SEP-23

DRZYMALSKI, MONIKA, DO^F

Provider ID: 100390753005

3180 UNIVERSITY AVE STE
120

SAN DIEGO, CA 92104

(858) 529-7229

Teleservice

Effective as of 01-NOV-23

DRZYMALSKI, MONIKA, DO^F

Provider ID: 100390753004

3180 UNIVERSITY AVE STE
120

SAN DIEGO, CA 92104

(858) 529-7229

Teleservice

Effective as of 01-OCT-22

DRZYMALSKI, MONIKA, DO^F

Provider ID: 100390753009

3180 UNIVERSITY AVE STE
120

SAN DIEGO, CA 92104

(858) 529-7229

Teleservice

Effective as of 01-MAR-23

DRZYMALSKI, MONIKA, DO^F

Provider ID: 100390753002

3180 UNIVERSITY AVE STE
120

SAN DIEGO, CA 92104

(858) 529-7229

Teleservice

Effective as of 01-AUG-22

DUDAREWICZ, TERESA, MD^{F†}

Provider ID: 100068264013

9909 MIRA MESA BLVD
STE 110

SAN DIEGO, CA 92131

(858) 788-7208

☐ French, Polish, Russian
Teleservice
Effective as of 01-NOV-23

DUDAREWICZ, TERESA, MD^{Ft}

Provider ID: 100068264017
📍 9909 MIRA MESA BLVD
STE 110
SAN DIEGO, CA 92131
☎ (858) 788-7208

☐ French, Polish, Russian
Teleservice
Effective as of 01-OCT-22

DUDAREWICZ, TERESA, MD^{Ft}

Provider ID: 100068264016
📍 9909 MIRA MESA BLVD
STE 110
SAN DIEGO, CA 92131
☎ (858) 788-7208

☐ French, Polish, Russian
Teleservice
Effective as of 01-OCT-22

FAMBRO, CYNTHIA, MD^{Ft}

Provider ID: 100350838004
📍 950 S EUCLID AVE
SAN DIEGO, CA 92114
☎ (619) 662-4100

☐ Spanish
Effective as of 01-JAN-21

GIL, GABRIEL, MD^{M†}

Provider ID: 100094547025
📍 909 CARDIFF ST
SAN DIEGO, CA 92114
☎ (619) 465-3121

☐ Spanish
Effective as of 01-JAN-21

GIL, GABRIEL, MD^{M†}

Provider ID: 100094547010
📍 903 CARDIFF ST
SAN DIEGO, CA 92114
☎ (619) 465-3121

☐ Spanish
Effective as of 01-JAN-18

GIL, GABRIEL, MD^{M†}

Provider ID: 100094547011
📍 903 CARDIFF ST
SAN DIEGO, CA 92114
☎ (619) 465-3121

☐ Spanish
Effective as of 01-JAN-18

GIL, GABRIEL, MD^{M†}

Provider ID: 100094547026
📍 903 CARDIFF ST
SAN DIEGO, CA 92114
☎ (619) 465-3121

☐ Spanish
Effective as of 01-NOV-20

GUTIERREZ, LORAIN, MD^{Ft}

Provider ID: 100334279007
📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
☎ (619) 255-9155

Teleservice
Effective as of 01-AUG-21

HAMIDI, MAHSHID, MD^{Ft}

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

☐ Farsi, French, Spanish
Effective as of 01-JAN-21

HAMIDI, MAHSHID, MD^{Ft}

Provider ID: 100110351016
📍 5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117
☎ (858) 565-6394

☐ Farsi, French, Spanish
Effective as of 01-FEB-22

HAMIDI, MAHSHID, MD^{Ft}

Provider ID: 100110351005

📍 5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117

☎ (858) 565-6394
☐ Farsi, French, Spanish
Effective as of 01-APR-18

HAMIDI, MAHSHID, MD^{Ft}

Provider ID: 100110351013
📍 5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117
☎ (858) 565-6394

☐ Farsi, French, Spanish
Effective as of 01-AUG-20

HAMIDI, MAHSHID, MD^{Ft}

Provider ID: 100110351017
📍 5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117
☎ (858) 565-6394

☐ Farsi, French, Spanish
Effective as of 01-APR-23

HEIMLER, GRAHAM, MD^M

Provider ID: 100395560005
📍 9333 GENESEE AVE
SAN DIEGO, CA 92121
☎ (800) 926-8273

Effective as of 01-JUL-23

HENRY, REBECCA, MD^F

Provider ID: 100418054002
📍 6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120
☎ (858) 554-1212

Effective as of 01-NOV-23

HOUGHTON, ROBERT, MD^{M†}

Provider ID: 100034977002
📍 1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
☎ (619) 233-4044

☐ German, Spanish
Effective as of 01-FEB-07

JENKIN, FREDERICK, DO^{M†}

Provider ID: 100038612009

3562 GOVERNOR DR STE 1
SAN DIEGO, CA 92122

(858) 774-5157

Effective as of 01-MAY-21

JOHN, TANNER, MD^M

Provider ID: 100415495003

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

(619) 662-4100

Teleservice

Effective as of 01-OCT-23

KAUFHOLD, ANNE, MD^{F†}

Provider ID: 100086435019

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

(619) 662-4100

Arabic, Spanish

Effective as of 01-JAN-21

KIDDER, BRENDAN, MD^{M†}

Provider ID: 100334556005

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

(619) 662-4100

Spanish

Effective as of 01-MAY-22

KUNIN-RIDA, TERI, MD^{F†}

Provider ID: 100064070025

1032 BROADWAY
SAN DIEGO, CA 92101

(619) 795-5991

Armenian, Arabic, Spanish
Teleservice

Effective as of 01-NOV-21

KUNIN-RIDA, TERI, MD^{F†}

Provider ID: 100064070020

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

(619) 255-9155

Armenian, Arabic, Spanish

Teleservice

Effective as of 01-NOV-21

KUNIN-RIDA, TERI, MD^{F†}

Provider ID: 100064070026

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

(619) 269-1269

Armenian, Arabic, Spanish
Teleservice

Effective as of 01-NOV-21

LEBANO, RICHARD, MD^M

Provider ID: 100340129005

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

(844) 200-2426

Spanish

Effective as of 01-OCT-23

LIU, CHIA-LIN, DO^M

Provider ID: 100102354004

2185 GARNET AVE
SAN DIEGO, CA 92109

(858) 270-9270

Chinese, Mandarin, Spanish

Effective as of 01-APR-23

LIU, CHIA-LIN, DO^M

Provider ID: 100102354002

2185 GARNET AVE
SAN DIEGO, CA 92109

(858) 270-9270

Chinese, Mandarin, Spanish

Effective as of 01-DEC-03

LUAN, GORDON, MD^{M†}

Provider ID: 100012685018

4320 GENESEE AVE STE
103

SAN DIEGO, CA 92117

(858) 598-6789

Chinese, Mandarin

Effective as of 01-NOV-23

LUAN, GORDON, MD^{M†}

Provider ID: 100012685016

4320 GENESEE AVE STE
103

SAN DIEGO, CA 92117

(858) 598-6789

Chinese, Mandarin

Effective as of 01-JUN-22

MARQUEZ, LUIS, MD^{M†}

Provider ID: 100078829006

4060 4TH AVE STE 540
SAN DIEGO, CA 92103

(619) 236-8796

Italian, Spanish

Effective as of 01-NOV-21

MATSON, GARY, DO^{M†}

Provider ID: 100051901002

4501 MISSION BAY DR STE
3E

SAN DIEGO, CA 92109

(858) 270-4343

French, Spanish

Effective as of 01-FEB-07

MORALES, ALEJANDRA, MD^{F†}

Provider ID: 100363732006

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

(619) 662-4100

Effective as of 01-MAY-22

MORALES, ALEJANDRA, MD^{F†}

Provider ID: 100363732003

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

(619) 662-4100

Effective as of 01-JAN-21

NGUYEN, LINHKIEU, MD^{F†}

Provider ID: 100073181012

3575 EUCLID AVE STE 100
SAN DIEGO, CA 92105
(619) 284-1400
Chinese, Spanish, Tagalog
Effective as of 01-JAN-21

NGUYEN, LINHKIEU, MD^{F†}

Provider ID: 100073181014

6905 LINDA VISTA RD
SAN DIEGO, CA 92111
(619) 284-1400
Chinese, Spanish, Tagalog
Effective as of 01-FEB-22

NGUYEN, HUONG, MD^{F†}

Provider ID: 100104992004

4444 EL CAJON BLVD STE
6
SAN DIEGO, CA 92115
(619) 285-1522
Cantonese, Cambodian,
Mandarin

Effective as of 01-JAN-14

NGUYEN, HUONG, MD^{F†}

Provider ID: 100104992018

4444 EL CAJON BLVD STE
6
SAN DIEGO, CA 92115
(619) 285-1522
Cantonese, Cambodian,
Mandarin

Effective as of 01-OCT-23

ORTIZ, KENNETH, MD^{M†}

Provider ID: 100335275027

316 25TH ST
SAN DIEGO, CA 92102
(619) 662-4100

Teleservice

Effective as of 01-OCT-22

ORTIZ ILIZALITURRI, ANA, MD^{F*}

F*

Provider ID: 100394347011

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
(619) 280-4213
Spanish
Teleservice
Effective as of 01-OCT-23

RITTER, STEVEN, DO^{M†}

Provider ID: 100332302002

950 S EUCLID AVE
SAN DIEGO, CA 92114
(619) 662-4100
Effective as of 01-AUG-18

RODRIGUEZ, SEAN, MD^M

Provider ID: 100197884009

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
(619) 662-4100
Spanish

Effective as of 01-MAR-21

SALEH, ANDREW, MD^{M†}

Provider ID: 100293587004

1370 ROSECRANS ST STE A
SAN DIEGO, CA 92106
(619) 223-2668
Arabic, Spanish

Effective as of 01-DEC-23

SAZEGAR, PAYAM, MD^{M†}

Provider ID: 100187888011

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
(619) 255-9155

Teleservice

Effective as of 01-JUL-21

SAZEGAR, PAYAM, MD^{M†}

Provider ID: 100187888013

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
(619) 269-1269

Teleservice

Effective as of 01-JUL-21

SCOTT, LAGINA, MD^F

Provider ID: 100363586003

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
(619) 662-4100

Teleservice

Effective as of 01-MAR-21

SHAMANI, AZAM, MD^{F†}

Provider ID: 100132296023

5555 RESERVOIR DR STE
312
SAN DIEGO, CA 92120
(619) 639-7285

Farsi, Spanish, Faroese

Effective as of 01-SEP-22

SHAMANI, AZAM, MD^{F†}

Provider ID: 100132296022

5555 RESERVOIR DR STE
312
SAN DIEGO, CA 92120
(619) 639-7285

Farsi, Spanish, Faroese

Effective as of 01-SEP-21

SHAMANI, AZAM, MD^{F†}

Provider ID: 100132296021

5555 RESERVOIR DR STE
312
SAN DIEGO, CA 92120
(619) 639-7285

Farsi, Spanish, Faroese

Effective as of 01-JAN-21

SHAMANI, AZAM, MD^{F†}

Provider ID: 100132296015

5555 RESERVOIR DR STE
312
SAN DIEGO, CA 92120
(619) 639-7285

Farsi, Spanish, Faroese

Effective as of 01-APR-18

SINGER, JACOB, MD^M

Provider ID: 100340992007

4320 GENESEE AVE
SAN DIEGO, CA 92117

(858) 598-6789

Effective as of 01-OCT-23

SINGER, JACOB, MD^M

Provider ID: 100340992008

4320 GENESEE AVE
SAN DIEGO, CA 92117

(858) 598-6789

Effective as of 01-DEC-23

SIVA, TENAYA, MD^M

Provider ID: 100418703003

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

(619) 662-4100

Teleservice

Effective as of 01-NOV-23

SNYDER, CHRISTOPHER, DO^{Mt}

Provider ID: 100024789053

4690 EL CAJON BLVD
SAN DIEGO, CA 92115

(619) 662-4100

Spanish

Teleservice

Effective as of 01-MAR-22

STONES, RACHEL, MD^F

Provider ID: 100387928007

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

(619) 255-9155

Teleservice

Effective as of 01-MAY-22

STONES, RACHEL, MD^F

Provider ID: 100387928008

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

(619) 269-1269

Teleservice

Effective as of 01-MAY-22

SZMIDT, MARIA, MD^F

Provider ID: 100108398011

12395 EL CAMINO REAL
STE 100

SAN DIEGO, CA 92130

(858) 259-5655

Polish, Russian, Spanish

Effective as of 01-JAN-21

SZMIDT, MARIA, MD^F

Provider ID: 100108398007

12395 EL CAMINO REAL
STE 100

SAN DIEGO, CA 92130

(858) 259-5655

Polish, Russian, Spanish

Effective as of 01-SEP-15

TEGUH, COLLIN, DO^{Mt}

Provider ID: 100089123007

2045 ADAMS AVE
SAN DIEGO, CA 92116

(619) 281-8988

German, Indonesian,
Malayalam

Teleservice

Effective as of 01-AUG-20

VAZQUEZ-BOJORQUEZ,

ALEJANDRA, MD^F

Provider ID: 100391945010

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

(858) 554-1212

Spanish

Effective as of 01-NOV-22

VO, PHU LUONG, DO^F

Provider ID: 100415527003

4690 EL CAJON BLVD
SAN DIEGO, CA 92115

(619) 662-4100

Spanish, Vietnamese

Teleservice

Effective as of 01-NOV-23

VOURLITIS, MELISSA, DO^{F*}

Provider ID: 100090572016

9800 GLEN CENTER DR
SAN DIEGO, CA 92131

(858) 832-2500

Teleservice

Effective as of 01-NOV-23

WONG, CALVIN, MD^{Mt}

Provider ID: 100095226007

444 W C ST STE 185
SAN DIEGO, CA 92101

(619) 232-6262

Chinese, Spanish

Effective as of 01-JUN-11

YUEN, SELENE, MD^{Ft}

Provider ID: 100246155013

4320 GENESEE AVE STE
103

SAN DIEGO, CA 92117

(858) 598-6789

Chinese

Teleservice

Effective as of 01-APR-22

YUEN, SELENE, MD^{Ft}

Provider ID: 100246155015

4320 GENESEE AVE STE
103

SAN DIEGO, CA 92117

(858) 598-6789

Chinese


Teleservice

Effective as of 01-JUN-22

ZINK, IRENE, MD^{Ft*}

Provider ID: 100324255002

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 (619) 662-4100


 German


Teleservice

Effective as of 01-AUG-17

ZINK, IRENE, MD^{F†}

Provider ID: 100324255006

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 (619) 662-4100

 German

Teleservice


Effective as of 01-APR-23

FQHC

**DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC,**

Provider ID: PG0025044041

 4725 MARKET ST
SAN DIEGO, CA 92102


 (619) 515-2560

Effective as of 01-JAN-21

**DOWNTOWN FAMILY CTR AT
CONNECTIONS, †**

Provider ID: PG0084437004

 1250 6TH AVE STE 100
SAN DIEGO, CA 92101


 (619) 515-2430

Effective as of 01-JAN-21

**FAMILY HEALTH CTR IBARRA,
†**

Provider ID: PG0084517004

 4874 POLK AVE
SAN DIEGO, CA 92105

 (619) 515-2426


Effective as of 01-JAN-21

**FAMILY HEALTH CTR OF SD-
ELM ST, †**

Provider ID: PG0083911003

 140 ELM ST

SAN DIEGO, CA 92101


 (619) 515-2520

Effective as of 01-JAN-21

**FAMILY HEALTH CTR SAN
DIEGO-OAK PARK,**

Provider ID: PG0084522003

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105


 (619) 515-2454

Effective as of 01-JAN-21

**FAMILY HEALTH CTR SAN
DIEGO-OAK PARK,**

Provider ID: PG0084522006

 2114 NATIONAL AVE
SAN DIEGO, CA 92113


 (619) 515-2406

Effective as of 01-JAN-21

**FAMILY HLTH CTR OF SD SAN
DIEGO COMMERCIAL,**

Provider ID: PG0083950003

 2325 COMMERCIAL ST STE
1400
SAN DIEGO, CA 92113


 (619) 515-2422

Effective as of 01-JAN-21

**FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE,**

Provider ID: PG0085338003

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101


 (619) 515-2525

Effective as of 01-JAN-21

**FAMILY HLTH CTR SAN
DIEGO-BEACH AREA,**

Provider ID: PG0083156003

 3705 MISSION BLVD
SAN DIEGO, CA 92109


 (619) 515-2444

Effective as of 01-JAN-21

**FAMILY HLTH CTR SD
HILLCREST, †**

Provider ID: PG0084516014

 4094 4TH AVE
SAN DIEGO, CA 92103


 (619) 515-2545

Effective as of 01-JAN-21

**KING CHAVEZ HEALTH
CENTER, †**

Provider ID: PG0047560014

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 (619) 662-4100


Teleservice

Effective as of 01-JAN-21

**LA MAESTRA FAMILY CLINIC
INC, †**

Provider ID: PG0053396003

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 (619) 280-4213


Teleservice

Effective as of 01-JAN-21

**LINDA VISTA HEALTH CARE
CTR,**

Provider ID: PG0024858005

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 (858) 279-0925


Teleservice

Effective as of 01-JUL-22

**LOGAN HEIGHTS FAMILY
HEALTH CENTER,**

Provider ID: PG0025044044

 2204 NATIONAL AVE
SAN DIEGO, CA 92113

 (619) 515-2355

Effective as of 01-JAN-21

LOGAN HEIGHTS FAMILY

HEALTH CENTER,

Provider ID: PG0025044036

1809 NATIONAL AVE
SAN DIEGO, CA 92113

(619) 515-2300

Effective as of 01-JAN-21

MID-CITY COMMUNITY CLINIC,

†

Provider ID: PG0049261010

4290 POLK AVE
SAN DIEGO, CA 92105

(619) 563-0250

Teleservice

Effective as of 01-JUL-22

MID-CITY COMMUNITY CLINIC,

Provider ID: PG0049261008

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

(619) 280-2058

Effective as of 01-JUL-22

**NESTOR COMMUNITY HEALTH
CENTER,**

Provider ID: PG0031643004

1016 OUTER RD
SAN DIEGO, CA 92154

(619) 429-3733

Teleservice

Effective as of 01-JUL-22

**NORTH PARK FAMILY HEALTH
CENTERS,**

Provider ID: PG0084186003

3514 30TH ST
SAN DIEGO, CA 92104

(619) 515-2424

Effective as of 01-JAN-21

**NORTH PARK FAMILY HEALTH
CENTERS,**

Provider ID: PG0025044037

3544 30TH ST
SAN DIEGO, CA 92104

(619) 515-2424

Effective as of 01-JAN-21

**OPERATION SAMAHAN - MIRA
MESA,**

Provider ID: PG0083606006

9855 ERMA RD STE 105
SAN DIEGO, CA 92131

(844) 200-2426

Effective as of 01-JAN-21

**OPERATION SAMAHAN - MIRA
MESA, †**

Provider ID: PG0083606005

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126

(844) 200-2426

Effective as of 01-JAN-21

**OPERATION SAMAHAN
RANCHO PENASQUITOS,**

Provider ID: PG0083903005

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

(844) 200-2426

Effective as of 01-JAN-21

**SAN DIEGO AMERICAN INDIAN
HEALTH CENTER,**

Provider ID: PG0025869017

2630 1ST AVE
SAN DIEGO, CA 92103

(619) 234-2158

Teleservice

Effective as of 01-JUL-22

SAN DIEGO FAMILY CARE,

Provider ID: PG0092672004

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

(858) 810-8700

Teleservice

Effective as of 01-JUL-22

**SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE,**

Provider ID: PG0094135003

316 25TH ST
SAN DIEGO, CA 92102

(619) 238-5551

Effective as of 01-JAN-21

**SAN YSIDRO HEALTH CHC -
OCEAN VIEW, †**

Provider ID: PG0047560013

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

(619) 662-4100

Teleservice

Effective as of 01-JAN-21

**SAN YSIDRO HEALTH
COMMUNITY HEIGHTS FAMILY
MED,**

Provider ID: PG0094138003

4690 EL CAJON BLVD
SAN DIEGO, CA 92115

(619) 662-4100

Teleservice

Effective as of 01-JAN-21

**SHERMAN HEIGHTS FAMILY
HLTH CTRS INC,**

Provider ID: PG0082766003

2391 ISLAND AVE
SAN DIEGO, CA 92102


(619) 515-2435

Effective as of 01-JAN-21

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

Provider ID: PG0086361006



1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 (619) 233-8500
Teleservice
Effective as of 01-JUL-22

GENERAL PRACTICE

BORRERO, MARCOS, MD^{Mt}

Provider ID: 100104392005

 3490 PALM AVE
SAN DIEGO, CA 92154
 (619) 423-5616
 Spanish
Teleservice

Effective as of 01-MAY-18

BORRERO, MARCOS, MD^{Mt}

Provider ID: 100104392018

 3490 PALM AVE
SAN DIEGO, CA 92154
 (619) 423-5616
 Spanish
Teleservice

Effective as of 01-DEC-21

BORRERO, MARCOS, MD^{Mt}

Provider ID: 100104392015

 3490 PALM AVE
SAN DIEGO, CA 92154
 (619) 423-5616
 Spanish
Teleservice

Effective as of 01-JAN-21

BORRERO, MARCOS, MD^{Mt}




Provider ID: 100104392016

 3490 PALM AVE
SAN DIEGO, CA 92154
 (619) 423-5616
 Spanish
Teleservice

Effective as of 01-NOV-20

BORRERO, MARCOS, MD^{Mt†}

Provider ID: 100104392019

 3490 PALM AVE
SAN DIEGO, CA 92154
 (619) 423-5616
 Spanish
Teleservice
Effective as of 01-JUN-23

DENYSIAK, JACQUELINE, MD^{Ft}

Provider ID: 100363725006

 3969 4TH AVE STE 203
SAN DIEGO, CA 92103
 (619) 294-6500
Teleservice

Effective as of 01-JAN-21

GERBATSCH-BORNEMISZA, ILDIKO, MD^{Ft}

Provider ID: 100325246016

 3490 PALM AVE
SAN DIEGO, CA 92154
 (619) 423-5616
Teleservice

Effective as of 01-JUL-23

GUEFEN, URI, MD^M




Provider ID: 100072802030

 555 W C ST STE 102
SAN DIEGO, CA 92101
 (858) 554-1212
 Spanish

Effective as of 01-DEC-23


KIDOKORO, YASUKO, MD^{Ft}



Provider ID: 100075657015

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

KIDOKORO, YASUKO, MD^{Ft}




Provider ID: 100075657018

 5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117

 (858) 277-9669
 Japanese
Effective as of 01-MAY-22




KIDOKORO, YASUKO, MD^{Ft}

Provider ID: 100075657010

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




MIRKARIMI, MORTEZA, MD^{Mt}

Provider ID: 100084653010

 3863 CLAIREMONT DR
SAN DIEGO, CA 92117
 (858) 483-5570
 Farsi, Spanish, Faroese
Effective as of 01-JAN-21




MIRKARIMI, MORTEZA, MD^{Mt}

Provider ID: 100084653003

 3863 CLAIREMONT DR
SAN DIEGO, CA 92117
 (858) 483-5570
 Farsi, Spanish, Faroese
Effective as of 01-DEC-12




MIRKARIMI, MORTEZA, MD^{Mt}

Provider ID: 100084653009

 3863 CLAIREMONT DR
SAN DIEGO, CA 92117
 (858) 483-5570
 Farsi, Spanish, Faroese
Effective as of 01-AUG-20

NGUYEN, HUONG, MD^{Ft}

Provider ID: 100104992007

 4444 EL CAJON BLVD STE
6
SAN DIEGO, CA 92115
 (619) 285-1522
 Cantonese, Cambodian,
Mandarin
Effective as of 01-MAR-18

NGUYEN, HUONG, MD^{Ft}

Provider ID: 100104992014
 4444 EL CAJON BLVD STE 6
 SAN DIEGO, CA 92115
 (619) 285-1522
 Cantonese, Cambodian, Mandarin
 Effective as of 01-AUG-20

INTERNAL MEDICINE

AL-SALEH, YADANI, MD^{Ft}

Provider ID: 100358544019
 3737 MORAGA AVE STE B103
 SAN DIEGO, CA 92117
 (858) 799-0855
 Spanish
 Effective as of 01-SEP-23

AL-SALEH, YADANI, MD^{Ft}

Provider ID: 100358544020
 3737 MORAGA AVE STE B103
 SAN DIEGO, CA 92117
 (858) 799-0855
 Spanish
 Effective as of 01-FEB-24

AL-SALEH, YADANI, MD^{Ft}

Provider ID: 100358544012
 3737 MORAGA AVE STE B103
 SAN DIEGO, CA 92117
 (858) 799-0855
 Spanish
 Effective as of 01-DEC-22

BUTLER, LISA, MD^{Ft}

Provider ID: 100068570008
 3260 3RD AVE
 SAN DIEGO, CA 92103
 (619) 297-3737
 Hindi, Italian, Spanish

Effective as of 01-JUN-20

CARAMBAS, CLARITA, MD^{Ft}

Provider ID: 100070756004
 9190 MIRA MESA BLVD
 SAN DIEGO, CA 92126
 (858) 689-1814
 Tagalog
 Effective as of 01-SEP-22

DE CARVALHO, CARLOS, MD^{Mt}

Provider ID: 100077227047
 2939 BEYER BLVD
 SAN DIEGO, CA 92154
 (619) 423-0343
 Portuguese, Spanish, Tagalog
 Teleservice
 Effective as of 01-JAN-21

DE CARVALHO, CARLOS, MD^{Mt}

Provider ID: 100077227054
 2939 BEYER BLVD
 SAN DIEGO, CA 92154
 (619) 423-0343
 Portuguese, Spanish, Tagalog
 Teleservice
 Effective as of 01-SEP-22

DE CARVALHO, CARLOS, MD^{Mt}

Provider ID: 100077227048
 2939 BEYER BLVD
 SAN DIEGO, CA 92154
 (619) 423-0343
 Portuguese, Spanish, Tagalog
 Teleservice
 Effective as of 01-SEP-20

EL GHONEIMY, AHMED, MD^{Mt}

Provider ID: 100103500012
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 (619) 255-9155

Arabic
 Teleservice
 Effective as of 01-AUG-22

EL GHONEIMY, AHMED, MD^{Mt}

Provider ID: 100103500013
 4171 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 (619) 269-1269
 Arabic
 Teleservice
 Effective as of 01-AUG-22

FAKHRO, SAMEEH, MD^{Mt}

Provider ID: 100379921006
 3490 PALM AVE
 SAN DIEGO, CA 92154
 (619) 423-5616
 Effective as of 01-APR-22

FAKHRO, SAMEEH, MD^{Mt}

Provider ID: 100379921002
 3490 PALM AVE
 SAN DIEGO, CA 92154
 (619) 423-5616
 Effective as of 01-NOV-21

FAKHRO, SAMEEH, MD^{Mt}



Provider ID: 100379921011
 3490 PALM AVE
 SAN DIEGO, CA 92154
 (619) 423-5616
 Effective as of 01-JUN-23



FAKHRO, SAMEEH, MD^{Mt}




Provider ID: 100379921004
 3490 PALM AVE
 SAN DIEGO, CA 92154
 (619) 423-5616
 Effective as of 01-DEC-21




FRANK, STEWART, MD^{Mt}




Provider ID: 100018840004
 4060 4TH AVE STE 605
 SAN DIEGO, CA 92103




 (619) 298-1318
 Spanish
Effective as of 01-FEB-07




GAVRILYUK, IGOR, MD^{M†}
Provider ID: 100107169005
 4060 4TH AVE STE 100
SAN DIEGO, CA 92103
 (619) 718-9444
 Russian, Ukrainian
Effective as of 01-SEP-09




GREEN, BILLIE, MD^{F††}
Provider ID: 100023101004
 1101 FELSPAR ST
SAN DIEGO, CA 92109
 (858) 483-1720
 French
Effective as of 01-AUG-05




GREEN, BILLIE, MD^{F††}
Provider ID: 100023101005
 1101 FELSPAR ST
SAN DIEGO, CA 92109
 (858) 483-1720
 French
Effective as of 01-SEP-09




GUHAROY, ASIM, MD^{M†}
Provider ID: 100107045016
 4540 KEARNY VILLA RD
STE 106
SAN DIEGO, CA 92123
 (858) 430-6656
 Bengali, Hindi, Malayalam
Effective as of 01-OCT-23



GUHAROY, ASIM, MD^{M†}
Provider ID: 100107045009
 4540 KEARNY VILLA RD
STE 106
SAN DIEGO, CA 92123
 (858) 430-6656
 Bengali, Hindi, Malayalam
Effective as of 01-SEP-20

GUHAROY, ASIM, MD^{M†}
Provider ID: 100107045012
 4540 KEARNY VILLA RD
STE 106
SAN DIEGO, CA 92123
 (858) 430-6656
 Bengali, Hindi, Malayalam
Effective as of 01-MAR-23



GUHAROY, ASIM, MD^{M†}
Provider ID: 100107045003
 4540 KEARNY VILLA RD
STE 106
SAN DIEGO, CA 92123
 (858) 430-6656
 Bengali, Hindi, Malayalam
Effective as of 01-APR-16




GUHAROY, ASIM, MD^{M†}
Provider ID: 100107045011
 4540 KEARNY VILLA RD
STE 106
SAN DIEGO, CA 92123
 (858) 430-6656
 Bengali, Hindi, Malayalam
Effective as of 01-JAN-21




GUHAROY, ASIM, MD^M
Provider ID: 100107045014
 4075 54TH ST
SAN DIEGO, CA 92105
 (858) 598-5654
 Bengali, Hindi, Malayalam
Effective as of 01-APR-23



HENDRICKS, MARK, MD^{M†}
Provider ID: 100055830004
 2525 CAMINO DEL RIO S
STE 165
SAN DIEGO, CA 92108
 (619) 543-9655
Effective as of 01-AUG-22



HENRY, ANEEL, MD^M
Provider ID: 100418814002



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

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

KHEHAR, BHUPINDER, MD^{M†}
Provider ID: 100110360008
 3260 3RD AVE
SAN DIEGO, CA 92103
 (619) 297-3737
 Hindi, Punjabi, Swahili
Effective as of 01-JAN-21

KINGSBURY, A GRANT, MD^{M†}
Provider ID: 100063083007
 4060 4TH AVE STE 102
SAN DIEGO, CA 92103
 (619) 298-2900
Effective as of 01-NOV-22

KURUVADI, NISHA, DO^{F*}
Provider ID: 100412012004
 4276 54TH PL STE B
SAN DIEGO, CA 92115
 (619) 267-0553
Effective as of 01-OCT-23

MOSSON, MARK, MD^{M†}
Provider ID: 100176768003
 4060 4TH AVE STE 505
SAN DIEGO, CA 92103
 (619) 298-1318
Effective as of 01-AUG-13

NAJAR, FAUZI, MD^{M*}
Provider ID: 100390568005

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

NAJAR, FAUZI, MD^M
Provider ID: 100390568003

3490 PALM AVE
SAN DIEGO, CA 92154
(619) 423-5616
Arabic
Effective as of 01-DEC-22

NAJAR, FAUZI, MD^M
Provider ID: 100390568007

3490 PALM AVE
SAN DIEGO, CA 92154
(619) 423-5616
Arabic
Effective as of 01-OCT-23

NAJAR, FAUZI, MD^M
Provider ID: 100390568002

3490 PALM AVE
SAN DIEGO, CA 92154
(619) 423-5616
Arabic
Effective as of 01-AUG-22

NGUYEN, NGOCBICH, MD^F
Provider ID: 100084488006

3969 4TH AVE STE 207
SAN DIEGO, CA 92103
(619) 543-0042
Vietnamese
Effective as of 01-FEB-17

OLIVER, DEANNA, MD^{Ft}
Provider ID: 100328564035

995 GATEWAY CENTER
WAY
SAN DIEGO, CA 92102
(619) 264-1935
Spanish

Effective as of 01-SEP-22

QUINONEZ, JOSE, MD^M
Provider ID: 100085905004

250 MARKET ST
SAN DIEGO, CA 92101
(619) 239-9675
Spanish
Effective as of 01-FEB-07

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

Provider ID: 100051318005
4537 COLLEGE AVE
SAN DIEGO, CA 92115
(619) 265-0504
Spanish, Telugu
Effective as of 01-NOV-18

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

Provider ID: 100051318002
4537 COLLEGE AVE
SAN DIEGO, CA 92115
(619) 265-0504
Spanish, Telugu
Effective as of 01-FEB-07

RIADH, MAYSAM, MD^F
Provider ID: 100413125002

3260 3RD AVE
SAN DIEGO, CA 92103
(619) 297-3737
Arabic
Effective as of 01-SEP-23

SHAJAN, JOSHAN, MD^M
Provider ID: 100422554002

3863 CLAIREMONT DR
SAN DIEGO, CA 92117
(858) 483-5570
Spanish
Effective as of 01-FEB-24

SHI, RONG, MD^{Ft}

Provider ID: 100133432007

3260 3RD AVE
SAN DIEGO, CA 92103
(619) 297-3737
Mandarin
Effective as of 01-AUG-15

SZMIDT, MARIA, MD^F
Provider ID: 100108398006

12395 EL CAMINO REAL
STE 100
SAN DIEGO, CA 92130
(858) 259-5655
Polish, Russian, Spanish
Effective as of 01-JUL-04

TESSIER, ADLA, MD^F
Provider ID: 100077390010

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
(619) 255-9155
Effective as of 01-JUN-23

WAGNER, PAUL, MD^M
Provider ID: 100088692006

4060 4TH AVE STE 100
SAN DIEGO, CA 92103
(619) 718-9444
Spanish
Effective as of 01-JAN-08

WATTS, ELI, MD^{Mt}
Provider ID: 100384223003

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
(619) 662-4100
Effective as of 01-MAR-22

WILLGING, STEFAN, MD^{Mt}
Provider ID: 100106507003

4060 4TH AVE STE 505
SAN DIEGO, CA 92103
(619) 298-1318
German
Effective as of 01-FEB-07

WILLIAMS, HOWARD, MD^{M†}

Provider ID: 100070298003

4060 4TH AVE STE 505
SAN DIEGO, CA 92103

(619) 298-1318

Spanish

Effective as of 01-FEB-07

WOODALL, GARY, MD^{M†}

Provider ID: 100096806003

2970 5TH AVE STE 140
SAN DIEGO, CA 92103

(619) 260-3456

Effective as of 01-FEB-07

PEDIATRICS

NGUYEN, HUONG, MD^{F†}

Provider ID: 100104992017

4444 EL CAJON BLVD STE
6

SAN DIEGO, CA 92115

(619) 285-1522

Cantonese, Cambodian,
Mandarin

Effective as of 01-APR-21

FAMILY PRACTICE

ASHIZAWA, JAMES, MD^{M†}

Provider ID: 100056553008

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

(949) 661-9600

Japanese, Spanish

Effective as of 01-JUL-15

GONZALEZ, DAVID, MD^{M†}

Provider ID: 100200908009

31001 RANCHO VIEJO RD
STE 200

SAN JUAN CAPISTRANO,

CA 92675

(949) 661-9600

Spanish

Effective as of 01-JUL-15

HONG, ANDREW, MD^{M†}

Provider ID: 100043550008

31001 RANCHO VIEJO RD
STE 200

SAN JUAN CAPISTRANO,
CA 92675

(949) 661-9600

Effective as of 01-OCT-15

NAFICY, K, MD^{M†}

Provider ID: 100104435018

30448 RANCHO VIEJO RD
STE 150

SAN JUAN CAPISTRANO,
CA 92675

(949) 489-0773

Farsi, French, Spanish

Teleservice

Effective as of 01-JUL-21

NAFICY, K, MD^{M†}

Provider ID: 100104435017

30448 RANCHO VIEJO RD
STE 150

SAN JUAN CAPISTRANO,
CA 92675

(949) 489-0773

Farsi, French, Spanish

Teleservice

Effective as of 01-MAY-21

NAFICY, K, MD^{M†}

Provider ID: 100104435016

30448 RANCHO VIEJO RD
STE 150

SAN JUAN CAPISTRANO,
CA 92675

(949) 489-0773

Farsi, French, Spanish

Teleservice

Effective as of 01-MAY-21

PANDY, LIZANDER, DO^{M†}

Provider ID: 100113474013

31001 RANCHO VIEJO RD
STE 200

SAN JUAN CAPISTRANO,
CA 92675

(949) 661-9600

Spanish

Effective as of 01-OCT-21

PANDY, LIZANDER, DO^{M†}

Provider ID: 100113474012

31001 RANCHO VIEJO RD
STE 200

SAN JUAN CAPISTRANO,
CA 92675

(949) 661-9600

Spanish

Effective as of 01-OCT-21

SERNA, SANDY, MD^{F†}

Provider ID: 100393508002

31001 RANCHO VIEJO RD
STE 200

SAN JUAN CAPISTRANO,
CA 92675

(949) 661-9600

Spanish

Effective as of 01-SEP-22

TRINH, MIMI, MD^{F†}

Provider ID: 100105591008

31001 RANCHO VIEJO RD
STE 200

SAN JUAN CAPISTRANO,
CA 92675

(949) 661-9600

Vietnamese

Effective as of 01-JUL-15

ZHENG, VINCENT, DO^{M†}

Provider ID: 100393531003

31001 RANCHO VIEJO RD

STE 200
SAN JUAN CAPISTRANO,
CA 92675
☎ (949) 661-9600
Effective as of 01-SEP-22

ZHENG, VINCENT, DO^{M†}

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

INTERNAL MEDICINE

FORTMANN, DANIEL, MD^{M*}

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

NGUYEN, THUYTRANG, MD^{F†}

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

FAMILY PRACTICE

HALIM, NEIL, MD^M

Provider ID: 100153551007
📍 1030 LA BONITA DR STE
316
SAN MARCOS, CA 92078
☎ (760) 744-9626
📄 Arabic, Spanish

Effective as of 01-FEB-13

WILLIE, KADEN, DO^M

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

FQHC

TRUECARE,

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

TRUECARE,

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

INTERNAL MEDICINE

PONIACHIK, SAMUEL, MD^{M†}

Provider ID: 100099164012
📍 150 VALPRED A RD
SAN MARCOS, CA 92069
☎ (760) 736-6767
📄 Spanish
Effective as of 01-OCT-14

WITCZAK, IZABELA, MD^{F†}

Provider ID: 100036527006
📍 150 VALPRED A RD
SAN MARCOS, CA 92069
☎ (760) 736-6767
📄 Polish
Effective as of 01-FEB-19

FAMILY PRACTICE

ALGHAMDI, ASMA, MD^{F†}

Provider ID: 100359014012
📍 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
☎ (619) 662-4100
Effective as of 01-AUG-22

ALGHAMDI, ASMA, MD^{F†}

Provider ID: 100359014004
📍 3364 BEYER BLVD
SAN YSIDRO, CA 92173
☎ (619) 662-4100
Effective as of 01-JAN-21

**ALVAREZ-ESTRADA, MIGUEL,
MD^{M†}**

Provider ID: 100360099010
📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
☎ (619) 662-4100
📄 Spanish
Effective as of 01-JAN-21

**ALVAREZ-ESTRADA, MIGUEL,
MD^{M†}**

Provider ID: 100360099011
📍 4050 BEYER BLVD
SAN YSIDRO, CA 92173
☎ (619) 662-4100
📄 Spanish
Effective as of 01-JAN-21

ARRIETA, NOEMI, DO^F

Provider ID: 100214881011
📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
☎ (619) 662-4100
📄 Spanish
Teleservice
Effective as of 01-APR-23

**CARRIEDO CENICEROS,
MARIA, MD^{F†}**

Provider ID: 100066452012

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Effective as of 01-JAN-21

CUTLER, MICHAEL, MD^M

Provider ID: 100225708022

4630 BORDER VILLAGE RD
STE H

SAN YSIDRO, CA 92173

(619) 264-2591

Russian, Spanish

Effective as of 01-JAN-24

DILLON, MAYRA, MD^{F+t}

Provider ID: 100163378008

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Effective as of 01-NOV-20

HERNANDEZ, RALPH, MD^{Mt}

Provider ID: 100080408013

3364 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Effective as of 01-JAN-21

HERNANDEZ, RALPH, MD^{Mt}

Provider ID: 100080408021

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Effective as of 01-AUG-22

LEE, JOSEPH, MD^{Mt}

Provider ID: 100368709004

3364 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Teleservice

Effective as of 01-AUG-21

LEPEZ, DAVID, MD^{Mt}

Provider ID: 100255267002

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Effective as of 01-NOV-15

LEPEZ, DAVID, MD^{Mt}

Provider ID: 100255267005

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Effective as of 01-APR-23

MOYA, MARY, MD^{F*}

Provider ID: 100099596010

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Effective as of 01-APR-23

NAVARRO, VANESSA, MD^{Ft}

Provider ID: 100173914012

3364 BEYER BLVD STE 103
SAN YSIDRO, CA 92173

(619) 662-4100

Filipino, Spanish, Tagalog

Effective as of 01-JAN-21

NAVARRO, VANESSA, MD^{Ft}

Provider ID: 100173914015

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

(619) 662-4100

Filipino, Spanish, Tagalog

Effective as of 01-AUG-22

ORTEGA, LUIS, MD^{Mt}

Provider ID: 100394387002

4004 BEYER BLVD

SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Teleservice

Effective as of 01-OCT-22

ORTIZ ILIZALITURRI, ANA, MD^{F+t}

F+t

Provider ID: 100394347003

4050 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Teleservice

Effective as of 01-OCT-22

RAJAIPOUR, NEGIN, MD^{Ft}

Provider ID: 100300998007

3364 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Farsi

Effective as of 01-JAN-21

SNYDER, CHRISTOPHER, DO^{Mt}

Provider ID: 100024789042

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Effective as of 01-JAN-21

STALEY, MICHAELA, MD^{Ft}

Provider ID: 100359422003

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100


Effective as of 01-JAN-21

TALAVERA, GREGORY, MD^M

Provider ID: 100334847007



4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100



 Spanish
Teleservice
Effective as of 01-APR-23

FQHC



SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR, †

Provider ID: PG0047542012
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
Teleservice
Effective as of 01-JAN-21

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER, †




Provider ID: PG0047448004
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
Teleservice
Effective as of 01-JAN-21

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS,




Provider ID: PG0047560015
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
Teleservice
Effective as of 01-JAN-21

INTERNAL MEDICINE




CHEGINI, SEPIDEH, MD^F

Provider ID: 100042216003
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 German, Persian
Effective as of 01-FEB-24



PROMER, KATHERINE, MD^{F†}

Provider ID: 100357070007
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-MAY-22




RAMIREZ SANCHEZ, CLAUDIA, MD^{F†}

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




SALERNO, MARIANA, MD^{F†}

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

SY, RAMON, MD^{M†}

Provider ID: 100062889003
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish, Tagalog
Effective as of 01-AUG-22



SY, RAMON, MD^{M†}

Provider ID: 100062889014
 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish, Tagalog
Effective as of 01-AUG-22

FAMILY PRACTICE



ADEMA, DONALD, DO^M

Provider ID: 100086591006



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

INTERNAL MEDICINE

CORBIN, DAVID, MD^{M†}



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

GUERRA, JACQUELINE, MD^{F†}

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



FAMILY PRACTICE

VOURLITIS, MELISSA, DO^{F*}

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

INTERNAL MEDICINE

WISNIEWSKI, MORRIS, MD^M

Provider ID: 100018082007
 380 STEVENS AVE STE 310
SOLANA BEACH, CA 92075
 (858) 554-1212
Effective as of 01-MAR-23

WISNIEWSKI, MORRIS, MD^M

Provider ID: 100018082011

380 STEVENS AVE STE 310
SOLANA BEACH, CA 92075
(858) 554-1212
Effective as of 01-AUG-23

FAMILY PRACTICE

AFFLALO, SUZANNE, MD^F

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

FQHC

**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC,**

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

FAMILY PRACTICE

BEHNAWA, SUSAN, MD^{F†}

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

BEHNAWA, SUSAN, MD^{F†}

Provider ID: 100343610010
27190 SUN CITY BLVD
SUN CITY, CA 92586
(951) 676-4193
Teleservice
Effective as of 01-NOV-20

GANTA, SANYASI, MD^{M†}

Provider ID: 100113069009

26960 CHERRY HILLS
BLVD STE A
SUN CITY, CA 92586
(951) 672-2856
Hindi, Spanish, Telugu
Teleservice
Effective as of 01-NOV-17

GANTA, SANYASI, MD^{M†}

Provider ID: 100113069006
26960 CHERRY HILLS
BLVD STE A
SUN CITY, CA 92586
(951) 672-2856
Hindi, Spanish, Telugu
Teleservice
Effective as of 01-AUG-16

GANTA, SANYASI, MD^{M†}

Provider ID: 100113069012
26960 CHERRY HILLS
BLVD STE A
SUN CITY, CA 92586
(951) 672-2856
Hindi, Spanish, Telugu
Teleservice
Effective as of 01-APR-21

SCHOONMAKER, JOHN, DO^{M†}

Provider ID: 100064979020
29826 HAUN RD STE 300
SUN CITY, CA 92586
(951) 679-7022
Spanish
Effective as of 01-SEP-22

INTERNAL MEDICINE

NGUYEN, DAVID, MD^M

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

NGUYEN, THANG, MD^{M†}

Provider ID: 100068936002
27830 BRADLEY RD
SUN CITY, CA 92586
(951) 679-2358
Vietnamese
Effective as of 01-SEP-09

STANFORD, DAVID, MD^{M†}

Provider ID: 100030388002
29798 HAUN RD STE 308
SUN CITY, CA 92586
(951) 301-7611
Effective as of 01-SEP-09

FAMILY PRACTICE

AKLADEOS, NERMEEN, MD^F

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

**AYON MARTINEZ, CARLOS,
MD^M**

Provider ID: 100152029007
41715 WINCHESTER RD
TEMECULA, CA 92590
(951) 694-9449
Spanish
Effective as of 01-AUG-20

**AYON MARTINEZ, CARLOS,
MD^M**

Provider ID: 100152029006
41840 ENTERPRISE CIR N
TEMECULA, CA 92590
(619) 440-2751
Spanish
Effective as of 01-AUG-20

BAILEY, CRISTINA, MD^{F†}

Provider ID: 100060834004

28780 SINGLE OAK DR STE
160

TEMECULA, CA 92590

(951) 676-4193

Spanish

Effective as of 01-JUN-04

BAILEY, CRISTINA, MD^{F†}

Provider ID: 100060834010

28780 SINGLE OAK DR STE
160

TEMECULA, CA 92590

(951) 676-4193

Spanish

Effective as of 01-NOV-20

BERNARDO, STACEY, DO^F

Provider ID: 100377889003

28780 SINGLE OAK DR STE
160

TEMECULA, CA 92590

(951) 676-4193

Teleservice

Effective as of 01-DEC-21

BLOSSER, JOSHUA, DO^M

Provider ID: 100422006002

31720 TEMECULA PKWY
STE 200

TEMECULA, CA 92592

(833) 684-4642

Effective as of 01-JAN-24

BRIGGS, BRIDGET, MD^F

Provider ID: 100069323005

31170 TEMECULA PKWY
STE 100

TEMECULA, CA 92592

(951) 698-6090

Spanish

Effective as of 01-JAN-16

CAMARILLO, DANIEL, MD^{M†}

Provider ID: 100110735016

28780 SINGLE OAK DR STE
160

TEMECULA, CA 92590

(951) 676-4193

Spanish

Effective as of 01-NOV-20

CAMARILLO, DANIEL, MD^{M†}

Provider ID: 100110735008

28780 SINGLE OAK DR STE
160

TEMECULA, CA 92590

(951) 676-4193

Spanish

Effective as of 01-MAR-12

COBIAN, VANESSA, MD^F

Provider ID: 100350271003

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

(951) 225-6400

Effective as of 01-MAR-22

COMBS, WALTER, MD^{M†}

Provider ID: 100085605005

28780 SINGLE OAK DR STE
160

TEMECULA, CA 92590

(951) 252-8650

Spanish

Effective as of 01-JUN-04

COMBS, MATTHEW, MD^{M†}

Provider ID: 100337168003

28780 SINGLE OAK DR STE
160

TEMECULA, CA 92590

(951) 676-4193

Effective as of 01-DEC-18

COMBS, WALTER, MD^{M†}

Provider ID: 100085605012

28780 SINGLE OAK DR STE

160

TEMECULA, CA 92590

(951) 252-8650

Spanish

Effective as of 01-NOV-20

DORR, KASIE, DO^F

Provider ID: 100422004002

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

(951) 225-6400

Effective as of 01-JAN-24

ELKAYAM, ISAK, MD^M

Provider ID: 100400487003

31720 TEMECULA PKWY
STE 200

TEMECULA, CA 92592

(760) 520-8100

Hebrew, Spanish

Effective as of 01-NOV-23

HIZON, GERARDO, MD^{M†}

Provider ID: 100098571012

27699 JEFFERSON AVE STE
101

TEMECULA, CA 92590

(951) 790-0107

Effective as of 01-JAN-23

HIZON, GERARDO, MD^{M†}

Provider ID: 100098571011

27699 JEFFERSON AVE STE
101

TEMECULA, CA 92590

(951) 790-0107

Effective as of 01-JAN-23

IM, TAE WOONG, MD^{M†}

Provider ID: 100039015004

28780 SINGLE OAK DR STE
160

TEMECULA, CA 92590

(951) 676-4193

Korean

Effective as of 01-JUN-04

JACKSON, ANITA, MD^{F†}

Provider ID: 100060861005

44274 GEORGE CUSHMAN
CT STE 212
TEMECULA, CA 92592

(951) 694-4688

Tagalog

Effective as of 01-NOV-11

KURAIISHI, AQDAS, MD^{M†}

Provider ID: 100089154013

31720 TEMECULA PKWY
STE 203
TEMECULA, CA 92592

(951) 302-4700

Effective as of 01-FEB-21

MADRID, RICHARD, MD^{M†}

Provider ID: 100077741014

28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590

(951) 676-4193

Effective as of 01-NOV-20

MADRID, RICHARD, MD^{M†}

Provider ID: 100077741005

28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590

(951) 676-4193

Effective as of 01-OCT-05

MAJEED, WASAN, MD^F

Provider ID: 100398263003

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

(951) 225-6400

Arabic

Effective as of 01-MAR-23

MCDONALD, ROBERT, MD^{M†}

Provider ID: 100093825003

31493 RANCHO PUEBLO
RD STE 107
TEMECULA, CA 92592

(951) 303-3337

Effective as of 01-OCT-09

MCDONALD, MARY, MD^F

Provider ID: 100051408003

31493 RANCHO PUEBLO
RD STE 107
TEMECULA, CA 92592

(951) 303-3337

Effective as of 01-OCT-09

MILLER, BRANDON, DO^{M†}

Provider ID: 100148562008

31720 TEMECULA PKWY
TEMECULA, CA 92592

(951) 676-4193

Effective as of 01-OCT-11

MILLER, BRANDON, DO^{M†}

Provider ID: 100148562007

28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590

(951) 676-4193

Effective as of 01-OCT-11

NWOSU, MICHAEL, MD^M

Provider ID: 100367685005

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

(951) 225-6400

Effective as of 01-AUG-22

PHILLIPS, LILY, MD^{F†}

Provider ID: 100113116012

31565 RANCHO PUEBLO
RD STE 102B
TEMECULA, CA 92592

(951) 231-1385

Chinese, Mandarin, Spanish

Effective as of 01-SEP-18

POSTE, ALETHEA, MD^F

Provider ID: 100418802002

28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590

(951) 676-4193

Teleservice

Effective as of 01-JAN-24

RAHMAN, MAISARA, MD^{F†}

Provider ID: 100083398012

31150 TEMECULA PKWY
STE 200
TEMECULA, CA 92592

(951) 676-4193

Arabic

Effective as of 01-AUG-16

RAHMAN, MAISARA, MD^{F†}

Provider ID: 100083398023

31720 TEMECULA PKWY
TEMECULA, CA 92592

(951) 676-4193

Arabic

Effective as of 01-NOV-20

SCHULTZ, JAMES, MD^{M†}

Provider ID: 100030577018

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

(951) 225-6400

Farsi, Greek, Spanish

Effective as of 01-AUG-20

SIMMONS, PAMELA, MD^{F†}

Provider ID: 100057995006

28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590

(951) 676-4193

Effective as of 01-JUL-17

VINCENT, WILLIAM, MD^{M†}

Provider ID: 100320230007

31720 TEMECULA PKWY

STE 100
TEMECULA, CA 92592
☎ (951) 225-6838
Effective as of 01-MAY-21

WISE, DOUGLAS, DO^{M†}

Provider ID: 100023557005
📍 40285 WINCHESTER RD
STE 103
TEMECULA, CA 92591
☎ (951) 296-5844
Effective as of 01-NOV-22

ZEBARJADI, Omid, DO^M

Provider ID: 100379100008
📍 27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590
☎ (951) 503-8730
📠 Farsi, Spanish
Teleservice
Effective as of 01-AUG-23

ZEBRACK, DAVID, DO^{M†}

Provider ID: 100064903010
📍 40285 WINCHESTER RD
STE 103
TEMECULA, CA 92591
☎ (951) 296-5844
📠 Spanish
Effective as of 01-NOV-22

ZEBRACK, DAVID, DO^{M†}

Provider ID: 100064903006
📍 40285 WINCHESTER RD
STE 103
TEMECULA, CA 92591
☎ (951) 296-5844
📠 Spanish
Effective as of 01-SEP-04

ZURITA, DANIELA, MD^{F†}

Provider ID: 100396617008
📍 41840 ENTERPRISE CIR N
TEMECULA, CA 92590

☎ (951) 216-2200
📠 Spanish
Effective as of 01-DEC-22

INTERNAL MEDICINE

BASCH, MICHAEL, MD^{M†}

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

BLOSSER, NICHELE, DO^F

Provider ID: 100411369003
📍 28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590
☎ (951) 676-4193
Effective as of 01-NOV-23

GISI, SYLVIA, MD^F

Provider ID: 100100126002
📍 31493 RANCHO PUEBLO
RD STE 206
TEMECULA, CA 92592
☎ (951) 303-6158
📠 Spanish
Effective as of 01-AUG-19

GOMER, JEREMY, MD^{M†}

Provider ID: 100379005002
📍 27403 YNEZ RD STE 108
TEMECULA, CA 92591
☎ (951) 750-7888
Effective as of 01-NOV-21

KIM, IRENE, DO^F

Provider ID: 100380710003
📍 28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590
☎ (951) 676-4193

Effective as of 01-JAN-22

MAPLETON, SHARINA, DO^F

Provider ID: 100384944005
📍 41840 ENTERPRISE CIR N
TEMECULA, CA 92590
☎ (951) 225-6400
Effective as of 01-FEB-24

SALAS, ERNESTO, MD^{M†}

Provider ID: 100093444002
📍 27699 JEFFERSON AVE STE
311
TEMECULA, CA 92590
☎ (951) 693-1159
📠 Spanish, Tagalog
Effective as of 01-NOV-00

HERMAN, SAM, MD^M

Provider ID: 100414181005
📍 31951 DOVE CANYON DR
TRABUCO CANYON, CA
92679
☎ (949) 557-0890
Effective as of 01-SEP-23

FAMILY PRACTICE

SCHULTZ, JAMES, MD^M

Provider ID: 100030577024
📍 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
☎ (760) 742-9919
📠 Farsi, Greek, Spanish
Effective as of 01-MAR-23

SCHULTZ, JAMES, MD^M

Provider ID: 100030577029
📍 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
☎ (760) 742-9919
📠 Farsi, Greek, Spanish
Effective as of 01-JAN-24

FQHC

NEIGHBORHOOD

HEALTHCARE,

Provider ID: PG0024990061

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

(760) 742-9919

Teleservice

Effective as of 01-FEB-24

FAMILY PRACTICE

CASTREJON, JOSEPH, MD^{M*}

Provider ID: 100097250007

2023 W VISTA WAY STE K
VISTA, CA 92083

(760) 806-1406

Spanish

Effective as of 01-SEP-21

CLARK, MA BELEN, MD^{F†}

Provider ID: 100015309003

1954 VIA CTR STE B
VISTA, CA 92081

(760) 529-9700

Tagalog

Effective as of 01-DEC-15

DONNELL, MARTI, MD^{F*}

Provider ID: 100049875024

134 GRAPEVINE RD
VISTA, CA 92083

(844) 308-5003

Spanish

Effective as of 01-JAN-24

DONNELL, MARTI, MD^{F*}

Provider ID: 100049875023

1000 VALE TERRACE DR
VISTA, CA 92084

(760) 631-5000

Spanish

Effective as of 01-JAN-24

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

Provider ID: 100358800014

1000 VALE TERRACE DR
VISTA, CA 92084

(760) 631-5000

Spanish

Effective as of 01-JAN-24

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

Provider ID: 100358800015

134 GRAPEVINE RD
VISTA, CA 92083

(760) 631-5000

Spanish

Effective as of 01-JAN-24

FERBER, JEFFREY, MD^{M††}

Provider ID: 100092669014

1926 VIA CTR
VISTA, CA 92081

(760) 940-7000

Effective as of 01-SEP-21

HIKES, RYAN, MD^M

Provider ID: 100391207006

1000 VALE TERRACE DR
VISTA, CA 92084

(760) 631-5000

Effective as of 01-AUG-23

HIKES, RYAN, MD^M

Provider ID: 100391207008

1000 VALE TERRACE DR
VISTA, CA 92084

(760) 631-5000

Effective as of 01-JAN-24

HIKES, RYAN, MD^M

Provider ID: 100391207004

1000 VALE TERRACE DR
VISTA, CA 92084

(760) 631-5000

Effective as of 01-NOV-22

HURD, MELISSA, MD^{F†}

Provider ID: 100054491003

161 THUNDER DR STE 103
VISTA, CA 92083

(760) 758-1988

Effective as of 01-JUL-13

LEONARD, LISA, MD^{F†}

Provider ID: 100278907004

1000 VALE TERRACE DR
VISTA, CA 92084

(760) 631-5000

French, Spanish

Effective as of 01-OCT-21

MARTINEZ, LESLY, MD^{F*}

Provider ID: 100397984039

1000 VALE TERRACE DR
VISTA, CA 92084

(760) 631-5000

Spanish

Effective as of 01-JAN-24

MARTINEZ, LESLY, MD^{F*}

Provider ID: 100397984035

134 GRAPEVINE RD
VISTA, CA 92083

(760) 631-5000

Spanish

Effective as of 01-JAN-24

NOVAK, LOREN, DO^{M†}

Provider ID: 100093766013

1926 VIA CENTRE DRIVE
SUITE A
VISTA, CA 92081

(760) 940-7000

Effective as of 01-SEP-21

ONG, DONALD, MD^{M†}

Provider ID: 100033027006



1000 VALE TERRACE DR
VISTA, CA 92084

(760) 631-5000




Filipino, Spanish, Tagalog

Effective as of 01-JAN-24




PANICKER, CIBU, MD^M

Provider ID: 100322969008
 1000 VALE TERRACE DR
 VISTA, CA 92084
 (760) 631-5000
 Effective as of 01-NOV-20




POP, SIMONA, MD^{F†}

Provider ID: 100021772013
 145 THUNDER DR
 VISTA, CA 92083
 (760) 941-9002
 Romanian
 Effective as of 01-NOV-23




RIVERA, MIDORI, MD^F

Provider ID: 100111732027
 204 S SANTA FE AVE
 VISTA, CA 92084
 (858) 554-1212
 Japanese, Spanish
 Effective as of 01-DEC-23



RIVERA, MIDORI, MD^F


Provider ID: 100111732024
 204 S SANTA FE AVE
 VISTA, CA 92084
 (858) 554-1212
 Japanese, Spanish
 Effective as of 01-OCT-23

TRAN, DAO, DO^M




Provider ID: 100325638014
 134 GRAPEVINE RD
 VISTA, CA 92083
 (760) 631-5000
 Vietnamese
 Effective as of 01-JAN-24

TRAN, DAO, DO^M




Provider ID: 100325638002
 134 GRAPEVINE RD
 VISTA, CA 92083
 (760) 631-5000

 Vietnamese
 Effective as of 01-JUL-19




TRAN, DAO, DO^M

Provider ID: 100325638010
 134 GRAPEVINE RD
 VISTA, CA 92083
 (760) 631-5000
 Vietnamese
 Effective as of 01-MAR-20




TRAN, DAO, DO^M

Provider ID: 100325638009
 1000 VALE TERRACE DR
 VISTA, CA 92084
 (760) 631-5000
 Vietnamese
 Effective as of 01-MAR-20

VIDAL, MONICA, DO^{F†}



Provider ID: 100327876045
 1000 VALE TERRACE DR
 VISTA, CA 92084
 (760) 631-5000
 Spanish
 Effective as of 01-JAN-24

VIDAL, MONICA, DO^{F†}

Provider ID: 100327876041
 134 GRAPEVINE RD
 VISTA, CA 92083
 (844) 308-5003
 Spanish
 Effective as of 01-JAN-24



FQHC

VCC DURIAN, †

Provider ID: PG0083886011
 105 DURIAN ST STE A
 VISTA, CA 92083
 (844) 308-5003
 Effective as of 01-JUL-22




VISTA COMMUNITY CLINIC

GRAPEVINE,




Provider ID: PG0085050004
 134 GRAPEVINE RD
 VISTA, CA 92083
 (760) 631-5000
 Teleservice
 Effective as of 01-JUL-22

GENERAL PRACTICE




OLIVA, CARLOS, MD^{M†}

Provider ID: 100102198003
 969 S SANTA FE AVE STE A
 VISTA, CA 92083
 (760) 941-7050
 Spanish
 Effective as of 01-DEC-17




OLIVA, CARLOS, MD^{M†}

Provider ID: 100102198008
 969 S SANTA FE AVE STE A
 VISTA, CA 92083
 (760) 941-7050
 Spanish
 Effective as of 01-SEP-22


ONG, DONALD, MD^{M†}


Provider ID: 100033027003
 1000 VALE TERRACE DR
 VISTA, CA 92084
 (760) 631-5000
 Filipino, Spanish, Tagalog
 Effective as of 01-DEC-10

ONG, DONALD, MD^{M†}




Provider ID: 100033027005
 1000 VALE TERRACE DR
 VISTA, CA 92084
 (760) 631-5000
 Filipino, Spanish, Tagalog
 Effective as of 01-MAR-20




SMITH, GREGORY, MD^{M*}




Provider ID: 100062596003
 161 THUNDER DR STE 207



VISTA, CA 92083
 (760) 598-8410
 Effective as of 01-DEC-06




INTERNAL MEDICINE

BOQUIN, ENRIQUE, MD^M
 Provider ID: 100062570003
 1000 VALE TERRACE DR
 VISTA, CA 92084
 (760) 631-5000
 Spanish
 Effective as of 01-DEC-07



BOQUIN, ENRIQUE, MD^M
 Provider ID: 100062570008
 1000 VALE TERRACE DR
 VISTA, CA 92084
 (760) 631-5000
 Spanish
 Effective as of 01-JAN-24



BOQUIN, ENRIQUE, MD^M
 Provider ID: 100062570005
 1000 VALE TERRACE DR
 VISTA, CA 92084
 (760) 631-5000
 Spanish
 Effective as of 01-NOV-20




BRAR, KARANBIR, MD^{Mt}
 Provider ID: 100305037016
 1926 VIA CTR STE A
 VISTA, CA 92081
 (760) 940-7000
 Effective as of 01-SEP-21




CHEN, MAX, MD^M
 Provider ID: 100140307006
 105 DURIAN ST STE B
 VISTA, CA 92083
 (760) 631-5000
 Burmese, Chinese,
 Mandarin
 Effective as of 01-JAN-24




CHEN, MAX, MD^M
 Provider ID: 100140307003
 105 DURIAN ST STE B
 VISTA, CA 92083
 (760) 631-5000
 Burmese, Chinese,
 Mandarin
 Effective as of 01-APR-23



CLANCY, TARA, DO^{Ft}
 Provider ID: 100265397003
 2375 S MELROSE DR
 VISTA, CA 92081
 (760) 305-1900
 Effective as of 01-JUL-16



CLANCY, JOHN, DO^{Mt}
 Provider ID: 100215810013
 2375 S MELROSE DR
 VISTA, CA 92081
 (760) 305-1900
 Effective as of 01-SEP-21



DAO, MARC, MD^M
 Provider ID: 100307890010
 1000 VALE TERRACE DR
 VISTA, CA 92084
 (760) 631-5000
 French, Vietnamese
 Effective as of 01-FEB-23




DAO, MARC, MD^M
 Provider ID: 100307890016
 1000 VALE TERRACE DR
 VISTA, CA 92084
 (760) 631-5000
 French, Vietnamese
 Effective as of 01-JAN-24



DAO, MARC, MD^M
 Provider ID: 100307890014
 1000 VALE TERRACE DR
 VISTA, CA 92084
 (760) 631-5000
 French, Vietnamese



Effective as of 01-JUN-23
HALPERIN, JASON, MD^M
 Provider ID: 100400241004
 134 GRAPEVINE RD
 VISTA, CA 92083
 (760) 631-5000
 Effective as of 01-JAN-24

KOBAYASHI, GARY, MD^{Mt}
 Provider ID: 100090343008
 145 THUNDER DR STE 1
 VISTA, CA 92083
 (760) 941-9002
 Effective as of 01-SEP-21

LI, XIANGLI, MD^{Ft}
 Provider ID: 100239749009
 1926 VIA CTR STE A
 VISTA, CA 92081
 (760) 940-7000
 Effective as of 01-SEP-21

MOASIS, KAREEM, MD^M
 Provider ID: 100379398004
 145 THUNDER DR
 VISTA, CA 92083
 (760) 941-9002
 Arabic
 Effective as of 01-JAN-24

NGUYEN, ETHAN, MD^M
 Provider ID: 100362686005
 145 THUNDER DR
 VISTA, CA 92083
 (760) 941-9002
 Effective as of 01-AUG-22

RHIANNON, JULIA, MD^F
 Provider ID: 100382647008
 105 DURIAN ST STE B
 VISTA, CA 92083
 (760) 631-5000
 Effective as of 01-SEP-22

RHIANNON, JULIA, MD^F

Provider ID: 100382647007

📍 105 DURIAN ST STE A
VISTA, CA 92083

☎ (760) 631-5000

Effective as of 01-SEP-22

RHIANNON, JULIA, MD^F

Provider ID: 100382647010

📍 105 DURIAN ST STE B
VISTA, CA 92083

☎ (760) 631-5000

Effective as of 01-JAN-24

RHIANNON, JULIA, MD^F

Provider ID: 100382647009

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ (760) 631-5000

Effective as of 01-JAN-24

RHIANNON, JULIA, MD^F

Provider ID: 100382647002

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ (760) 631-5000

Effective as of 01-JAN-22

RHIANNON, JULIA, MD^F

Provider ID: 100382647006

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ (760) 631-5000

Effective as of 01-SEP-22

RUTMAN, MICHAEL, DO^{M†}

Provider ID: 100024612005

📍 2355 S MELROSE DR
VISTA, CA 92081

☎ (760) 598-0088

Effective as of 01-OCT-00

RUTMAN, MICHAEL, DO^{M†}

Provider ID: 100024612023

📍 2355 S MELROSE DR

VISTA, CA 92081

☎ (760) 598-0088

Effective as of 01-JAN-21

SHALI, REYZAN, MD^{F†}

Provider ID: 100113968008

📍 1926 VIA CTR STE A
VISTA, CA 92081

☎ (760) 940-7000

📄 Arabic, Hebrew

Effective as of 01-SEP-21

FAMILY PRACTICE

BONNICI, MARCELLA, MD^{F*}

Provider ID: 100072106002

📍 36320 INLAND VALLEY DR
STE 201

WILDOMAR, CA 92595

☎ (951) 816-3233

Effective as of 01-OCT-16

INTERNAL MEDICINE

PATEL, REENABEN, MD^F

Provider ID: 100380064004

📍 36243 INLAND VALLEY DR
STE 160

WILDOMAR, CA 92595

☎ (951) 698-8821

Effective as of 01-JAN-22

**CERTIFIED NURSE
PRACTITIONER**

WONG, KRISTLE, NP

Provider ID: N/A

26671 ALISO CREEK RD STE 202
ALISO VIEJO, CA 92656
Effective as of 01-NOV-23

DERMATOLOGY

LANDER, JEFFREY, MD†

Provider ID: N/A

24541 PACIFIC PARK DR STE 103
ALISO VIEJO, CA 92656
Effective as of 01-DEC-22

LANDER, JEFFREY, MD†

Provider ID: N/A

24541 PACIFIC PARK DR STE 103
ALISO VIEJO, CA 92656
Effective as of 01-OCT-23

DEVELOPMENTAL

BEHAVIORAL PEDIATRICS

FELDMAN, GARY, MD†

Provider ID: N/A

11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-JAN-23

ENDOCRINOLOGY

METABOLISM DIABETES

NADEAU, DANIEL, MD

Provider ID: N/A

26671 ALISO CREEK RD STE 205
ALISO VIEJO, CA 92656
Effective as of 01-JUN-23

NADEAU, DANIEL, MD

Provider ID: N/A

26671 ALISO CREEK RD STE 205
ALISO VIEJO, CA 92656
Effective as of 01-JUN-23

ROBERTSON, ASHA, MD

Provider ID: N/A

26671 ALISO CREEK RD STE 205
ALISO VIEJO, CA 92656
Effective as of 01-JUN-23

ROBERTSON, ASHA, MD

Provider ID: N/A

26671 ALISO CREEK RD STE 205
ALISO VIEJO, CA 92656
Effective as of 01-JUN-23

**HEMATOLOGY /
ONCOLOGY**

IYER, LAXMI, MD†

Provider ID: N/A

2 JOURNEY STE 201
ALISO VIEJO, CA 92656
Effective as of 01-NOV-21

IYER, LAXMI, MD†

Provider ID: N/A

2 JOURNEY STE 201
ALISO VIEJO, CA 92656
Effective as of 01-NOV-21

IYER, LAXMI, MD†

Provider ID: N/A

2 JOURNEY STE 201
ALISO VIEJO, CA 92656
Effective as of 01-NOV-21

IYER, LAXMI, MD†

Provider ID: N/A

2 JOURNEY STE 201
ALISO VIEJO, CA 92656
Effective as of 01-NOV-21

IYER, LAXMI, MD†

Provider ID: N/A

2 JOURNEY STE 201
ALISO VIEJO, CA 92656
Effective as of 01-NOV-21

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

2 JOURNEY STE 201
ALISO VIEJO, CA 92656*
Effective as of 01-NOV-21

INFECTIOUS DISEASE

BAILEY, CHARLES, MD†

Provider ID: N/A

26671 ALISO CREEK RD STE 301
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

BAILEY, CHARLES, MD†

Provider ID: N/A

26671 ALISO CREEK RD STE 301
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

NEUROLOGY

BIXBY, MINDY, DO

Provider ID: N/A

26671 ALISO CREEK RD STE 203
ALISO VIEJO, CA 92656
Teleservice
Effective as of 01-JAN-23

BIXBY, MINDY, DO

Provider ID: N/A

26671 ALISO CREEK RD STE

203
ALISO VIEJO, CA 92656
Teleservice
Effective as of 01-JAN-23

BIXBY, MINDY, DO

Provider ID: N/A
26671 ALISO CREEK RD STE 203
ALISO VIEJO, CA 92656
Teleservice
Effective as of 01-FEB-23

BIXBY, MINDY, DO

Provider ID: N/A
26671 ALISO CREEK RD STE 203
ALISO VIEJO, CA 92656
Teleservice
Effective as of 01-FEB-23

BIXBY, MINDY, DO

Provider ID: N/A
26671 ALISO CREEK RD STE 203
ALISO VIEJO, CA 92656
Teleservice
Effective as of 01-FEB-23

BIXBY, MINDY, DO

Provider ID: N/A
26671 ALISO CREEK RD STE 203
ALISO VIEJO, CA 92656
Teleservice
Effective as of 01-FEB-23

BIXBY, MINDY, DO

Provider ID: N/A
26671 ALISO CREEK RD STE 203
ALISO VIEJO, CA 92656
Teleservice
Effective as of 01-FEB-23

LUDEMA, THOMAS, MD†
Provider ID: N/A
15 MAREBLU STE 250
ALISO VIEJO, CA 92656
Effective as of 01-OCT-18

LUDEMA, THOMAS, MD†
Provider ID: N/A
15 MAREBLU STE 250
ALISO VIEJO, CA 92656
Effective as of 01-OCT-18

MARTINEZ, KENNETH, MD
Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

MARTINEZ, KENNETH, MD
Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JAN-17

MARTINEZ, KENNETH, MD
Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-NOV-14

MARTINEZ, KENNETH, MD
Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD
Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD
Provider ID: N/A
5 JOURNEY STE 210

ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

SALEHI, HAMID, MD†

Provider ID: N/A
26895 ALISO CREEK RD STE B302
ALISO VIEJO, CA 92656
Effective as of 01-JAN-18

OPTOMETRIST

NGUYEN, LETHUY, OD†

Provider ID: N/A
27001 MOULTON PKWY STE A100
ALISO VIEJO, CA 92656
Effective as of 01-JAN-18

PEDIATRICS

FELDMAN, GARY, MD†

Provider ID: N/A
11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-FEB-23

FELDMAN, GARY, MD†

Provider ID: N/A
11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-NOV-18

YANNI, ELIZABETH, MD†

Provider ID: N/A
26671 ALISO CREEK RD STE 200
ALISO VIEJO, CA 92656*
Effective as of 01-JAN-21

PHYSICIANS ASSISTANT

GREEN, TRAVIS, PA

Provider ID: N/A
26671 ALISO CREEK RD STE

101
ALISO VIEJO, CA 92656*
Effective as of 01-MAY-23

PODIATRIST

ENG, STEVE, DPM†

Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JUL-21

ENG, STEVE, DPM†

Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JUL-21

ENG, STEVE, DPM†

Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JUL-21

ENG, STEVE, DPM†

Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JUL-21

ENG, STEVE, DPM†

Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

ENG, STEVE, DPM†

Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

HEHE, KYLE, DPM

Provider ID: N/A
15 MAREBLU STE 240

ALISO VIEJO, CA 92656
Effective as of 01-AUG-23

HEHE, KYLE, DPM

Provider ID: N/A
15 MAREBLU STE 240
ALISO VIEJO, CA 92656
Effective as of 01-AUG-23

PSYCHIATRY

MARTINEZ, KENNETH, MD

Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JAN-17

MARTINEZ, KENNETH, MD

Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

MARTINEZ, KENNETH, MD

Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656

Effective as of 01-NOV-14

MARTINEZ, KENNETH, MD

Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JAN-17

MARTINEZ, KENNETH, MD

Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

MARTINEZ, KENNETH, MD

Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-NOV-14

PULMONARY DISEASES

GALKO, BARBARA, MD

Provider ID: N/A
11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-NOV-23

SHAHINIAN, GEORGE, MD

Provider ID: N/A

11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-NOV-23

SHAHINIAN, GEORGE, MD

Provider ID: N/A

11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-JUL-23

SHAHINIAN, GEORGE, MD

Provider ID: N/A

11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-NOV-23

SURGERY GENERAL

RUSSO, MICHAEL, MD†

Provider ID: N/A

11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-MAY-21

RUSSO, MICHAEL, MD†

Provider ID: N/A

11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-MAY-21

RUSSO, MICHAEL, MD†

Provider ID: N/A

11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-APR-21

SURGERY

NEUROLOGICAL

MEHTA, VIKRAM, MD

Provider ID: N/A

26671 ALISO CREEK RD STE

203
ALISO VIEJO, CA 92656
Effective as of 01-DEC-23

MEHTA, VIKRAM, MD

Provider ID: N/A

26671 ALISO CREEK RD STE
203
ALISO VIEJO, CA 92656
Effective as of 01-DEC-23

**CERTIFIED NURSE
PRACTITIONER**

SANDERS, JESSICA, NP†

Provider ID: N/A

1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Teleservice
Effective as of 01-NOV-22

CHIROPRACTOR

ABDULRAHIM, AHMED, DC†

Provider ID: N/A

1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Teleservice
Effective as of 01-JUL-22

KELCHNER, MATTHEW, DC†

Provider ID: N/A

1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Effective as of 01-JAN-21

KELCHNER, MATTHEW, DC†

Provider ID: N/A

1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Effective as of 01-JUL-22

PHILLIPS, KATHERINE, DC

Provider ID: N/A

1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Effective as of 01-FEB-24

FAMILY PRACTICE

**VAN HOLLEBEKE, RACHEL,
MD**

Provider ID: N/A

1620 ALPINE BLVD
ALPINE, CA 91901
Effective as of 01-JUN-23

WYLIE, BLAKE, DO†

Provider ID: N/A

1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Teleservice
Effective as of 01-AUG-22

**LICENSED CLINICAL
SOCIAL WORKER**

KHALEEL, AMMAR, LCSW

Provider ID: N/A

1620 ALPINE BLVD
ALPINE, CA 91901
Effective as of 01-NOV-22

OPHTHALMOLOGY

BINDER, NICHOLAS, MD†

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-JAN-21

BINDER, NICHOLAS, MD†

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-SEP-22

CHANG, TOM, MD†

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-SEP-22

PATEL, SARJAN, MD†

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-SEP-22

PATEL, GITANE, MD†

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-SEP-22

PATEL, GITANE, MD†

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-JAN-21

PATEL, GITANE, MD†

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-AUG-20

PATEL, GITANE, MD†

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-MAR-18

PRABHU, SUJATA, MD†

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-SEP-22

WAINESS, REID, MD†

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-JAN-21

OPTOMETRIST

AOTO, KIM, OD†

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-JAN-21

DYER, SHARON, OD†

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-SEP-22

MARR, RYAN, OD

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-DEC-22

PSYCHOLOGIST

FRITZ, JENNIFER, PhD†

Provider ID: N/A

1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Effective as of 01-DEC-22

FRITZ, JENNIFER, PhD†

Provider ID: N/A

1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Effective as of 01-DEC-22

SMITH, STEPHANIE, PhD†

Provider ID: N/A

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Teleservice

Effective as of 01-AUG-22

SMITH, STEPHANIE, PhD†

Provider ID: N/A

1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Teleservice

Effective as of 01-AUG-22

TORRES, RANDALL, PSYD

Provider ID: N/A

1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Effective as of 01-FEB-24

TORRES, RANDALL, PSYD

Provider ID: N/A

1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Effective as of 01-FEB-24

OPTOMETRIST

HOLMSTROM, STEVEN, OD†

Provider ID: N/A

31722 RAILROAD CANYON
RD
CANYON LAKE, CA 92587
Effective as of 01-JUL-23

**ANESTHESIOLOGY PAIN
MANAGEMENT**

MADHAV, SANDIP, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JAN-20

MADHAV, SANDIP, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JAN-21

PRASAD, RUPA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-NOV-21

PRASAD, RUPA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-NOV-23

AUDIOLOGIST

HORNER, HEATHER, AuD†

Provider ID: N/A

1820 MARRON RD STE 102
CARLSBAD, CA 92008

Teleservice

Effective as of 01-JUN-22

**CERTIFIED NURSE
PRACTITIONER**

BATAC, NADINE, NP†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 110
CARLSBAD, CA 92011

Effective as of 01-DEC-22

BINAVI, HOWNAZ, NP†

Provider ID: N/A

6010 HIDDEN VALLEY RD

STE 120
CARLSBAD, CA 92011
Effective as of 01-SEP-22

BISHOP, LESLIE, NP†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JAN-21

BISHOP, LESLIE, NP†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JAN-21

HALPERN, DAVID, NP†

Provider ID: N/A

1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009

Effective as of 01-JAN-21

HOOPER, BONNIE, NP†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011

Effective as of 01-JAN-21

HOOPER, BONNIE, NP†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011

Effective as of 01-JAN-21

MOURADIAN, KRISTINA, NP†

Provider ID: N/A

1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008
Effective as of 01-NOV-22

POLIZZI, BRITTANY, NP†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011

Effective as of 01-SEP-22

POLIZZI, BRITTANY, NP†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011

Effective as of 01-JAN-22

RICE, ELIZABETH, NP

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-MAR-24

SOLIC, DIANE, NP

Provider ID: N/A

1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009

Teleservice

Effective as of 01-OCT-22

SYMANSKI, ELIZABETH, NP†

Provider ID: N/A

1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009

Teleservice

Effective as of 01-AUG-22

CHIROPRACTOR

BERRY, MICHAEL, DC

Provider ID: N/A

6986 EL CAMINO REAL STE

F
CARLSBAD, CA 92009
Effective as of 01-APR-15

MILLER, JAMES, DC

Provider ID: N/A

6986 EL CAMINO REAL STE
F
CARLSBAD, CA 92009
Effective as of 01-JUL-17

CLINICAL

NEUROPSYCHOLOGIST

ALASANTRO, LORI, PhD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-18

ALASANTRO, LORI, PhD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

ALASANTRO, LORI, PhD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

DERMATOLOGY

ANGRA, KUNAL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JUL-21

ANGRA, KUNAL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JUL-21

BUSCH, HEIDI, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Teleservice
Effective as of 01-MAR-23

BUSCH, HEIDI, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Teleservice
Effective as of 01-NOV-23

BUSCH, HEIDI, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Teleservice
Effective as of 01-OCT-22

BUSCH, HEIDI, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JAN-24

RILEY, JESSICA, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JAN-24

RILEY, JESSICA, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-NOV-23

RILEY, JESSICA, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JAN-21

RILEY, JESSICA, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JAN-21

ZUBAIR, RAHEEL, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011*
Effective as of 01-NOV-23

ZUBAIR, RAHEEL, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JAN-24

FAMILY PRACTICE


MADHAV, KINJAL, MD†

Provider ID: N/A


6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JAN-24

**HEARING AID DEALER /
SUPPLIER**

DAVIS, KELLE, MA[†]


Provider ID: N/A
 1820 MARRON RD
 CARLSBAD, CA 92008
 Effective as of 01-JAN-21

DAVIS, KELLE, MA[†]

Provider ID: N/A
 1820 MARRON RD STE 102
 CARLSBAD, CA 92008
 Effective as of 01-SEP-22


NEPHROLOGY

SAVANI, AMAN, MD


Provider ID: N/A
 6010 HIDDEN VALLEY RD
 STE 200
 CARLSBAD, CA 92011
 Effective as of 01-AUG-23

NEUROLOGY


BAKER, DAVID, DO

Provider ID: N/A
 6010 HIDDEN VALLEY RD
 STE 200
 CARLSBAD, CA 92011
 Effective as of 01-JAN-24

BAKER, DAVID, DO


Provider ID: N/A
 6010 HIDDEN VALLEY RD
 STE 200
 CARLSBAD, CA 92011
 Effective as of 01-DEC-23

CHOUDRY, BILAL, MD[†]


Provider ID: N/A
 6010 HIDDEN VALLEY RD
 STE 200
 CARLSBAD, CA 92011

Effective as of 01-JAN-21


CHOUDRY, BILAL, MD[†]

Provider ID: N/A
 6010 HIDDEN VALLEY RD
 STE 200
 CARLSBAD, CA 92011
 Effective as of 01-JAN-21


CHOUDRY, BILAL, MD[†]

Provider ID: N/A
 6010 HIDDEN VALLEY RD
 STE 200
 CARLSBAD, CA 92011
 Effective as of 01-FEB-16


CHOUDRY, BILAL, MD[†]

Provider ID: N/A
 6010 HIDDEN VALLEY RD
 STE 200
 CARLSBAD, CA 92011
 Effective as of 01-FEB-16


DELANEY, MICHAEL, MD[†]

Provider ID: N/A
 6010 HIDDEN VALLEY RD
 STE 200
 CARLSBAD, CA 92011
 Teleservice
 Effective as of 01-NOV-22

DELANEY, MICHAEL, MD[†]


Provider ID: N/A
 6010 HIDDEN VALLEY RD
 STE 200
 CARLSBAD, CA 92011
 Teleservice
 Effective as of 01-SEP-21

DELANEY, MICHAEL, MD[†]


Provider ID: N/A
 6010 HIDDEN VALLEY RD
 STE 200
 CARLSBAD, CA 92011
 Teleservice

Effective as of 01-JAN-21


DROKER, BRIAN, MD

Provider ID: N/A
 6010 HIDDEN VALLEY RD
 STE 200
 CARLSBAD, CA 92011
 Effective as of 01-DEC-23


DROKER, BRIAN, MD

Provider ID: N/A
 6010 HIDDEN VALLEY RD
 STE 200
 CARLSBAD, CA 92011
 Effective as of 01-MAR-24


FARNSWORTH, WILLIAM, MD[†]

Provider ID: N/A
 6010 HIDDEN VALLEY RD
 STE 200
 CARLSBAD, CA 92011
 Effective as of 01-NOV-21


FARNSWORTH, WILLIAM, MD[†]

Provider ID: N/A
 6010 HIDDEN VALLEY RD
 STE 200
 CARLSBAD, CA 92011
 Effective as of 01-NOV-21

FARNSWORTH, WILLIAM, MD[†]

Provider ID: N/A
 6010 HIDDEN VALLEY RD
 STE 200
 CARLSBAD, CA 92011
 Effective as of 01-FEB-22

FRISHBERG, BENJAMIN, MD[†]

Provider ID: N/A
 6010 HIDDEN VALLEY RD
 STE 200
 CARLSBAD, CA 92011
 Effective as of 01-SEP-21

FRISHBERG, BENJAMIN, MD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

HALL, JACOB, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

HALL, JACOB, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-24

HALL, JACOB, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Effective as of 01-FEB-21

HO, GILBERT, MD

Provider ID: N/A

5814 VAN ALLEN WAY STE
209
CARLSBAD, CA 92008
Effective as of 01-JAN-21

LANE, RICHARD, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

LANE, RICHARD, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

LANE, RICHARD, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-DEC-23

LOBATZ, MICHAEL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

LOBATZ, MICHAEL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

LOBATZ, MICHAEL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

LUHAR, RIYA, DO

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-AUG-23

LUHAR, RIYA, DO

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JAN-23

LUHAR, RIYA, DO

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JAN-23

NIELSEN, AMY, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-16

NIELSEN, AMY, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

NIELSEN, AMY, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

NIELSEN, AMY, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-MAR-21

NIELSEN, AMY, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-21

OH, IRENE, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

OH, IRENE, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

OH, IRENE, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

OH, IRENE, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD

STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

OMURO, ARTHUR, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

OMURO, ARTHUR, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-NOV-23

PADUGA, REMIA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

PADUGA, REMIA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-24

QUESNELL, TARA, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-NOV-23

QUESNELL, TARA, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-21

SADOFF, MARK, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

SADOFF, MARK, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

SADOFF, MARK, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

SADOFF, MARK, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

SAVANI, AMAN, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-NOV-23

SCHIM, JACK, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

SCHIM, JACK, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

SCHIM, JACK, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

WANG, CHUNYANG, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

WANG, ANCHI, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

WANG, ANCHI, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

WANG, ANCHI, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

WANG, CHUNYANG, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-24

WANG, CHUNYANG, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

WANG, CHUNYANG, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

WANG, ANCHI, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

WANG, ANCHI, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-21

WRIGHT, BRENTON, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-AUG-23

YOSHII-CONTRERAS, JUNE, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-23

**NEUROPHYSIOLOGY
CLINICAL**

PADUGA, REMIA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-NOV-23

QUESNELL, TARA, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-24

OTOLARYNGOLOGY

ABDOU, RAMI, MD†

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008
Effective as of 01-AUG-22

CALZADA, AUDREY, MD†

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008
Effective as of 01-OCT-22

CHANG, EDWARD, MD

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008
Effective as of 01-MAR-24

DATE, AMIT, MD

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008
Teleservice
Effective as of 01-MAY-23

DONALDSON, CHADWICK,

MD†

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008

Teleservice

Effective as of 01-JAN-21

DONALDSON, CHADWICK, MD†

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008

Teleservice

Effective as of 01-JAN-21

PAUL, SUPRITI, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 210
CARLSBAD, CA 92011

Effective as of 01-FEB-22

TIAN, QING, MD†

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008

Teleservice

Effective as of 01-JAN-21

TIAN, QING, MD†

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008

Teleservice

Effective as of 01-NOV-21

**OTOLARYNGOLOGY /
OTOLOGY /
LARYNGOLOGY /
RHINOLOGY**

GOLDSZTEIN, HERNAN, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 210
CARLSBAD, CA 92011

Effective as of 01-FEB-18

SALGADO, MOSES, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 210
CARLSBAD, CA 92011

Effective as of 01-FEB-18

PEDIATRICS

ZACHRY, ALISON, MD†

Provider ID: N/A

1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008

Effective as of 01-SEP-22

**PHYSICAL MEDICINE /
REHABILITATION**

CURRY, JASON, MD†

Provider ID: N/A

6121 PASEO DEL NORTE
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-SEP-21

MADHAV, SANDIP, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JAN-21

TAHAEI, SEYED, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 110
CARLSBAD, CA 92011

Teleservice

Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

DRILLING, KATHERINE, PA

Provider ID: N/A

1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009

Effective as of 01-MAR-23

FANNIN, HANA AH, PA

Provider ID: N/A

2659 GATEWAY RD STE 106
CARLSBAD, CA 92009

Effective as of 01-JAN-23

HERMANSON, KATHLEEN, PA†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

HERMANSON, KATHLEEN, PA†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-SEP-22

HUANG, STEPHANIE, PA†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-OCT-22

HUANG, STEPHANIE, PA†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

INOCELDA, ANDREW, PA†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

INOCELDA, ANDREW, PA†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

MEGALI, NICOLE, PA

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-24

POLLINGTON, CHRISTOPHER, PA

Provider ID: N/A

6121 PASEO DEL NORTE
CARLSBAD, CA 92011
Teleservice
Effective as of 01-OCT-23

RAHIM, ARIANNA, PA

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-OCT-23

REUSCH, KEVIN, PA

Provider ID: N/A

6121 PASEO DEL NORTE
CARLSBAD, CA 92011
Teleservice
Effective as of 01-OCT-23

PSYCHIATRY

CAI, SHEILA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

CAI, SHEILA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

CAI, SHEILA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-SEP-22

CAI, SHEILA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

CAI, SHEILA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

CAI, SHEILA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-SEP-22

PAULITSCH-BUCKINGHAM, ANDREA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

PAULITSCH-BUCKINGHAM, ANDREA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

PAULITSCH-BUCKINGHAM, ANDREA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

PAULITSCH-BUCKINGHAM, ANDREA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

PSYCHIATRY CHILD

CAI, SHEILA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

CAI, SHEILA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

CAI, SHEILA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-SEP-22

CAI, SHEILA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

CAI, SHEILA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

CAI, SHEILA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-SEP-22

PSYCHOLOGIST

KAUP, ALLISON, PhD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-24

KAUP, ALLISON, PhD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-NOV-23

KAUP, ALLISON, PhD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-24

KAUP, ALLISON, PhD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-NOV-23

NOEL, NANCY, PhD

Provider ID: N/A

6768 PASEO DEL VIS
CARLSBAD, CA 92009
Effective as of 01-FEB-23

NOEL, NANCY, PhD

Provider ID: N/A

6768 PASEO DEL VIS
CARLSBAD, CA 92009
Effective as of 01-FEB-23

NOEL, NANCY, PhD

Provider ID: N/A

6768 PASEO DEL VIS
CARLSBAD, CA 92009
Effective as of 01-FEB-23

NOEL, NANCY, PhD

Provider ID: N/A

6768 PASEO DEL VIS
CARLSBAD, CA 92009
Effective as of 01-FEB-23

ROSEN, JAY, PhD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

ROSEN, JAY, PhD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

ROSEN, JAY, PhD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

ROSEN, JAY, PhD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

**REGISTERED PHYSICAL
THERAPIST**

AMBROSE, CHRISTOPHER, PT

Provider ID: N/A

3070 MADISON ST
CARLSBAD, CA 92008
Effective as of 01-JAN-21

BOUTELLE, DAVID, PT

Provider ID: N/A

3070 MADISON ST
CARLSBAD, CA 92008
Effective as of 01-JAN-21

BOUTELLE, BARBARA, PT

Provider ID: N/A

3070 MADISON ST
CARLSBAD, CA 92008
Effective as of 01-SEP-22

DOULL, MATTHEW, PT

Provider ID: N/A

6121 PASEO DEL NORTE
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JUN-23

GARBER, MARC, PT

Provider ID: N/A

6121 PASEO DEL NORTE
CARLSBAD, CA 92011

Teleservice

Effective as of 01-OCT-21

MCGEE, JACQUELINE, PT

Provider ID: N/A

3070 MADISON ST
CARLSBAD, CA 92008

Effective as of 01-JAN-21

TAMAYO, SYDNIE, PT

Provider ID: N/A

6121 PASEO DEL NORTE
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-OCT-23

SLEEP MEDICINE

MADHAV, KINJAL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JAN-21

MADHAV, KINJAL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-OCT-19

SURGERY

NEUROLOGICAL

MURTHY, NIKHIL, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JUL-23

**ADVANCED HEART
FAILURE AND
TRANSPLANT
CARDIOLOGY**

DURAN, ANTONIO, MD

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-JUL-23

HOAGLAND, PETER, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914

Effective as of 01-JAN-21

JASKI, BRIAN, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-JAN-21

ALLERGY IMMUNOLOGY

SHARMA, KUSUM, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Effective as of 01-JUN-22

SHARMA, KUSUM, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Effective as of 01-JAN-23

ANESTHESIOLOGY

GLASSER, MARGA, MD†

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914

Effective as of 01-SEP-21

GLASSER, MARGA, MD†

Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914

Effective as of 01-SEP-21

GLASSER, MARGA, MD†

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914

Effective as of 01-OCT-21

MACCHIO, GREGORY, MD†

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914

Effective as of 01-JUL-22

ROMERO, KENNETH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 206
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

THOMPSON, SANDRA, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

VERDOLIN, MICHAEL, MD

Provider ID: N/A

2452 FENTON ST STE 205
CHULA VISTA, CA 91914

Effective as of 01-JAN-21

**ANESTHESIOLOGY
CRITICAL CARE MEDICINE**

MACCHIO, GREGORY, MD†

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914

Effective as of 01-SEP-22

MACCHIO, GREGORY, MD†

Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914

Effective as of 01-SEP-22

**ANESTHESIOLOGY PAIN
MANAGEMENT**

BAUMGARTL, WILLIAM, MD†

Provider ID: N/A

344 F ST STE 203
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-23

DAIRO, BRANDON, MD†

Provider ID: N/A

340 4TH AVE STE 19
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-NOV-22

GLASSER, MARGA, MD†

Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914

Effective as of 01-JAN-22

MACCHIO, GREGORY, MD†

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914

Effective as of 01-DEC-18

NAVARRO, ROSA, MD†

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914

Effective as of 01-JUL-22

NAVARRO, ROSA, MD†

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914

Effective as of 01-SEP-22

NAVARRO, ROSA, MD†

Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914

Effective as of 01-SEP-22

NAVARRO, ROSA, MD†

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914

Effective as of 01-SEP-15

NAVARRO, ROSA, MD†

Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914

Effective as of 01-AUG-17

NAVARRO, ROSA, MD†

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914

Effective as of 01-JAN-14

ROMERO, KENNETH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 103
CHULA VISTA, CA 91911

Effective as of 01-JUN-19

VERDOLIN, MICHAEL, MD

Provider ID: N/A

2452 FENTON ST STE 205
CHULA VISTA, CA 91914

Effective as of 01-MAR-22

AUDIOLOGIST

HORNER, HEATHER, AuD†

Provider ID: N/A

310 3RD AVE STE B21
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUN-22

JESPERSEN, RHONDA, AuD

Provider ID: N/A

310 3RD AVE STE B21
CHULA VISTA, CA 91910

Effective as of 01-JAN-23

**CARDIAC
ELECTROPHYSIOLOGY**

ATHILL, CHARLES, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914

Effective as of 01-JAN-21

BERMAN, BRETT, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910

Effective as of 01-MAR-16

DAWOOD, FARAH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-DEC-20

LERNER, JONATHAN, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

LERNER, JONATHAN, MD

Provider ID: N/A

865 THIRD AVE
STE 133
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

PUGH, MATTHEW, DO[†]

Provider ID: N/A

765 MEDICAL CENTER CT
STE 205
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-NOV-21

PUGH, MATTHEW, DO[†]

Provider ID: N/A

765 MEDICAL CENTER CT
STE 205
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-SEP-21

SHAH, ABHISHEK, MD[†]

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

SHAH, ABHISHEK, MD

Provider ID: N/A

865 3RD AVE STE 133

CHULA VISTA, CA 91911
Effective as of 01-JAN-23

CARDIOLOGY

AIZIN, VITALI, MD[†]

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

AIZIN, VITALI, MD[†]

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-FEB-16

BARVALIA, MIHIR, MD[†]

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-NOV-22

BERMAN, BRETT, MD[†]

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

BERMAN, BRETT, MD[†]

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-MAR-16

BERMAN, BRETT, MD[†]

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

CEPIN, DANIEL, MD[†]

Provider ID: N/A

890 EASTLAKE PKWY STE

205

CHULA VISTA, CA 91914
Effective as of 01-DEC-22

GOLLAPUDI, RAGHAVA, MD[†]

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Effective as of 01-JUN-21

KAFRI, HASSAN, MD[†]

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-APR-21

KAFRI, HASSAN, MD[†]

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-AUG-20

KAFRI, HASSAN, MD[†]

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-AUG-22

KAFRI, HASSAN, MD[†]

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

LY, NANCY, MD[†]

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

LY, NANCY, MD[†]

Provider ID: N/A

765 MEDICAL CENTER CT

STE 211
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

MONDRAGON, GUSTAVO, MD†

Provider ID: N/A

480 4TH AVE STE 500
CHULA VISTA, CA 91910*
Effective as of 01-JAN-21

NAGHI, JESSE, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

NARAYANAN, MEENA, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

OVIEDO-LINARES, RAUL, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-FEB-24

OVIEDO-LINARES, RAUL, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-OCT-23

PARIKH, MILIND, DO†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

PONCE, SONIA, MD†

Provider ID: N/A

340 4TH AVE STE 11
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

PONCE, SONIA, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

PONCE, SONIA, MD†

Provider ID: N/A

340 4TH AVE STE 11
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-21

ROUGH, STEVEN, MD

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JAN-24

SHARF, ALBERT, MD

Provider ID: N/A

1310 3RD AVE STE B4
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SHEREV, DIMITRI, MD†

Provider ID: N/A

752 MEDICAL CENTER CT

STE 207

CHULA VISTA, CA 91911
Effective as of 01-SEP-22

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

750 MEDICAL CENTER CT
STE 3
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

**CARDIOVASCULAR
DISEASE**

ABELHAD, NADIA, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

AIZIN, VITALI, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-MAR-21

AIZIN, VITALI, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-JUN-16

BERMAN, BRETT, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-FEB-21

CARLSON, STEVEN, MD†

Provider ID: N/A

751 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

CARLSON, STEVEN, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-SEP-22

CARLSON, STEVEN, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-APR-21

CEPIN, DANIEL, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Effective as of 01-JAN-14

CEPIN, DANIEL, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Effective as of 01-FEB-21

COX, JUSTIN, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-SEP-21

DAWOOD, FARAH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

DAWOOD, FARAH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-AUG-21

DO, HULBERT, MD

Provider ID: N/A

865 THIRD AVE
STE 133
CHULA VISTA, CA 91911
Effective as of 01-OCT-23

DO, HULBERT, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-OCT-23

FERNANDEZ, GENARO, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-AUG-21

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

HOURANI, RAYAN, MD

Provider ID: N/A

890 EASTLAKE PKWY STE

205

CHULA VISTA, CA 91914

Teleservice

Effective as of 01-FEB-23

KHAN, HASHIM, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Effective as of 01-APR-21

KHARAZI, ALEXANDRA, MD†

Provider ID: N/A

345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

KIM, JAMES, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUN-23

KIM, JAMES, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUN-21

LY, NANCY, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JUN-21

LY, NANCY, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911
Effective as of 01-JUN-23

LY, NANCY, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911
Effective as of 01-NOV-23

MEHTA, HIRSCH, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205

CHULA VISTA, CA 91914
Effective as of 01-JAN-21

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911
Effective as of 01-SEP-22

MONDRAGON, GUSTAVO, MD

Provider ID: N/A

855 THIRD AVE
STE 2230

CHULA VISTA, CA 91911
Effective as of 01-FEB-24

MONDRAGON, GUSTAVO, MD

Provider ID: N/A

855 THIRD AVE
STE 2230

CHULA VISTA, CA 91911
Effective as of 01-OCT-23

MONDRAGON, GUSTAVO, MD†

Provider ID: N/A

480 4TH AVE STE 500
CHULA VISTA, CA 91910

Effective as of 01-NOV-20

NAGHI, JESSE, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207

CHULA VISTA, CA 91911
Effective as of 01-AUG-21

NARAYANAN, MEENA, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911
Effective as of 01-APR-21

NARAYANAN, MEENA, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911
Effective as of 01-SEP-22

NISHIMURA, MARIN, MD

Provider ID: N/A

890 EASTLAKE PKWY STE
205

CHULA VISTA, CA 91914
Teleservice

Effective as of 01-MAR-23

OMRAN, JAD, MD

Provider ID: N/A

890 EASTLAKE PKWY STE
205

CHULA VISTA, CA 91914
Teleservice

Effective as of 01-FEB-23

OVIEDO-LINARES, RAUL, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911
Effective as of 01-JUN-23

OVIEDO-LINARES, RAUL, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911
Effective as of 01-JUN-21

PARIKH, MILIND, DO†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911
Effective as of 01-SEP-22

PARIZO, JUSTIN, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205

CHULA VISTA, CA 91914
Teleservice

Effective as of 01-SEP-21

PONCE, SONIA, MD†

Provider ID: N/A

480 4TH AVE STE 401
CHULA VISTA, CA 91910

Effective as of 01-AUG-20

PONCE, SONIA, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

PONCE, SONIA, MD†

Provider ID: N/A

340 4TH AVE STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-21

PONCE, SONIA, MD†

Provider ID: N/A

340 4TH AVE STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-APR-21

ROUGH, STEVEN, MD

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-AUG-23

SARSAM, LUAY, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

SHAH, KULIN, MD†

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

SHAH, KULIN, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911
Effective as of 01-JAN-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SHEREV, DIMITRI, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-AUG-21

SHEREV, DIMITRI, MD

Provider ID: N/A

340 FOURTH AVE
STE 4
CHULA VISTA, CA 91910
Effective as of 01-SEP-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JUN-21

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JUN-23

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

YAU, STEPHEN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-22

YAU, STEPHEN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-23

ZAVARO, SUHAIL, MD

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-FEB-23

CERTIFIED

ACUPUNCTURIST

LAM, KHANH, LAC†

Provider ID: N/A

340 4TH AVE STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-21

WILCOX, WENONAH, LAC†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

**CERTIFIED NURSE
PRACTITIONER**

BATAC, NADINE, NP†

Provider ID: N/A

340 4TH AVE STE 19
CHULA VISTA, CA 91910
Effective as of 01-DEC-22

BRAYTENBAH, MELANIE, NP†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JAN-21

BRAYTENBAH, MELANIE, NP†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-SEP-22

BURKE, ALICIA, NP

Provider ID: N/A

765 3RD AVE STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-22

**CARRION GELABERT, ANA,
NPF**

Provider ID: N/A

450 FOURTH AVE
STE 215

CHULA VISTA, CA 91910
Effective as of 01-NOV-23

CORREA, CARINA, NP

Provider ID: N/A

299 J ST
CHULA VISTA, CA 91910
Effective as of 01-AUG-22

HALE, EMILY, NPF

Provider ID: N/A

344 F ST STE 203
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAY-23

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-21

KANTAS, PARIS, NP†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-AUG-22

KELLER, YESENIA, NP

Provider ID: N/A

340 FOURTH AVE
STE 11
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-23

KELLER, YESENIA, NP

Provider ID: N/A

340 FOURTH AVE
STE 11
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-FEB-24

MAYOYO, MARILYNN, NP

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Effective as of 01-MAR-23

OLESCO, JENNIFER, NP†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-NOV-22

PANTOJA, DANICA-ELLA, NP

Provider ID: N/A

340 FOURTH AVE
STE 9
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

ROSS, CRYSTAL, NP†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAY-21

SICKLES, MAGGIE, NP

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-DEC-21

SPAULDING, ENJOLI, NP†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

TOMICICH, STEPHANIE, NP

Provider ID: N/A

752 MEDICAL CENTER CT

STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

YALDO, ATHMAR, NP†

Provider ID: N/A
429 BROADWAY
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-21

**CERTIFIED REGISTERED
NURSE MIDWIFE**

MARTINEZ, NANCY, CRNM

Provider ID: N/A
678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

CHIROPRACTOR

WENDEL, TREVOR, DC

Provider ID: N/A
535 H ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

DERMATOLOGY

ANGRA, KUNAL, MD†

Provider ID: N/A
2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-22

BARNARD, CHRISTOPHER, MD

Provider ID: N/A
2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Effective as of 01-MAR-24

MCKESEY, JACQUELINE, MD

Provider ID: N/A

256 LANDIS AVE FL 3
CHULA VISTA, CA 91910
Effective as of 01-FEB-23

RULLAN, PETER, MD†

Provider ID: N/A
256 LANDIS AVE STE 300
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

RULLAN, JENNIFER, MD†

Provider ID: N/A
256 LANDIS AVE STE 300
CHULA VISTA, CA 91910
Effective as of 01-MAR-14

STEIN, ALEXANDER, MD†

Provider ID: N/A
340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

STEIN, ALEXANDER, MD†

Provider ID: N/A
340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

STEIN, ALEXANDER, MD†

Provider ID: N/A
340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

TOMPKINS, STACY, MD†

Provider ID: N/A
2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-AUG-22

TOMPKINS, STACY, MD†

Provider ID: N/A
2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914

Teleservice
Effective as of 01-NOV-23

TOMPKINS, STACY, MD†

Provider ID: N/A
2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-22

TOMPKINS, STACY, MD†

Provider ID: N/A
2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-22

ZALESKI LARSEN, LISA, DO

Provider ID: N/A
2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-NOV-23

ZALESKI LARSEN, LISA, DO

Provider ID: N/A
2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-JAN-24

ZALESKI LARSEN, LISA, DO

Provider ID: N/A
2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-MAY-23

EMERGENCY MEDICINE

ALCALDE, VICTOR, MD†

Provider ID: N/A
333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

AZAM, ARSALAN, MD

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-FEB-24

BRODAK, DANIKA, MD

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-FEB-24

CARSTAIRS, SHAUN, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

DILLMAN, ARIANA, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

DILLMAN, ARIANA, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

EINSTEIN, ERIC, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

EINSTEIN, ERIC, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

FRENCH, TONIANNE, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

FRENCH, TONIANNE, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

GALASSO, MADISON, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

GALASSO, MADISON, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

GRIESINGER, MICHAEL, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

GRIESINGER, MICHAEL, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

HARE, MARC, MD†

Provider ID: N/A

1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-APR-23

HARE, MARC, MD†

Provider ID: N/A

1111 BROADWAY STE 305

CHULA VISTA, CA 91911

Teleservice

Effective as of 01-MAR-24

HARRELL-BURDER, BEVERLY, MD†

Provider ID: N/A

333 H ST STE 280
CHULA VISTA, CA 91910
Effective as of 01-FEB-21

JOHNSON, WHITNEY, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

JOST, PETER, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

JOURDAIN, VICTOR, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

JOURDAIN, VICTOR, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-FEB-21

KORNBLATT, ALLISON, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

LOPEZ, JASON, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

LOW, MICHAEL, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

MCMILLAN, MONICA, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

NARDI, SEAN, DO†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-DEC-21

PAEZ-PEREZ, YENISLEIDY, DO†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

PORTILLO, TANIA, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

QUENZER, FAITH, DO†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

QUENZER, FAITH, DO†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

REARDON, JACQUELINE, DO†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

REARDON, JACQUELINE, DO†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

ROXAS, ROGER, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

ROXAS, ROGER, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

SBIROLO, EMILY, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-AUG-21

SBIROLO, EMILY, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

STEINER, BRIAN, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

TOVAR, JUAN, MD†

Provider ID: N/A

333 H ST STE 2080

CHULA VISTA, CA 91910

Effective as of 01-JAN-21

TRESENITTER, MEGAN, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

TRESENITTER, MEGAN, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-AUG-21

WHITLEY, NICHOLAS, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910†

Effective as of 01-AUG-18

YAU, STEPHEN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-APR-23

ENDOCRINOLOGY

METABOLISM DIABETES

ARGOUD, GEORGES, MD†

Provider ID: N/A

340 4TH AVE STE 7A
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

ARGOUD, GEORGES, MD†

Provider ID: N/A

340 4TH AVE STE 7A
CHULA VISTA, CA 91910

Effective as of 01-JUN-19

ARGOUD, GEORGES, MD†

Provider ID: N/A

340 4TH AVE STE 7A
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

ARGOUD, GEORGES, MD†

Provider ID: N/A

340 4TH AVE STE 7A
CHULA VISTA, CA 91910*
Effective as of 01-JAN-21

ARGOUD, GEORGES, MD†

Provider ID: N/A

340 4TH AVE STE 7A
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

ARGOUD, GEORGES, MD†

Provider ID: N/A

340 4TH AVE STE 7A
CHULA VISTA, CA 91910
Effective as of 01-SEP-20

CARRILLO, MARITZA, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-JAN-22

CARRILLO, MARITZA, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-JUL-22

ROGERS, MEGAN, MD†

Provider ID: N/A

480 4TH AVE STE 202A
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-JUL-22

ROGERS, MEGAN, MD†

Provider ID: N/A

480 4TH AVE STE 202A
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-JUL-22

ROGERS, MEGAN, MD†

Provider ID: N/A

480 4TH AVE STE 202A
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-AUG-22

VINCENT, LAUREN, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

VINCENT, LAUREN, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

FAMILY PRACTICE

DILLON, MAYRA, MD

Provider ID: N/A

880 THIRD AVE
A
CHULA VISTA, CA 91911

Effective as of 01-AUG-23

LOZANO, JUAN, MD

Provider ID: N/A

1637 THIRD AVE
STE B
CHULA VISTA, CA 91911

Effective as of 01-JAN-24

RODRIGUEZ, NATALIE, MD

Provider ID: N/A

480 PALOMAR ST
CHULA VISTA, CA 91911*
Effective as of 01-NOV-23

SHAFT, ALEXANDER, MD†

Provider ID: N/A

303 H ST STE 103
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-MAR-22

SHAFT, ALEXANDER, MD†

Provider ID: N/A

303 H ST STE 103
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-FEB-23

GASTROENTEROLOGY

ALAYO, ERICK, MD†

Provider ID: N/A

400 E ST
CHULA VISTA, CA 91910
Effective as of 01-OCT-21

ALAYO, ERICK, MD†

Provider ID: N/A

400 E ST
CHULA VISTA, CA 91910
Effective as of 01-OCT-21

ALAYO, ERICK, MD†

Provider ID: N/A

400 E ST
CHULA VISTA, CA 91910
Effective as of 01-OCT-21

ALAYO, ERICK, MD†

Provider ID: N/A

587 3RD AVE
CHULA VISTA, CA 91910*
Effective as of 01-DEC-23

BAIG, NABIL, DO†

Provider ID: N/A

303 H ST STE 103
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-OCT-22

DESTA, TADDESE, MD

Provider ID: N/A

296 H ST STE 301
CHULA VISTA, CA 91910

Effective as of 01-JAN-23

DUQUE, JOHN, MD†

Provider ID: N/A

480 4TH AVE STE 316
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

DUQUE, JOHN, MD†

Provider ID: N/A

480 4TH AVE STE 316
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

DUQUE, JOHN, MD†

Provider ID: N/A

480 4TH AVE STE 316
CHULA VISTA, CA 91910

Effective as of 01-JAN-14

DUQUE, JOHN, MD†

Provider ID: N/A

480 4TH AVE STE 316
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

DUQUE, JOHN, MD†

Provider ID: N/A

480 4TH AVE STE 316
CHULA VISTA, CA 91910

Effective as of 01-SEP-15

HASSANEIN, TAREK, MD†

Provider ID: N/A

303 H ST STE 103
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUL-21

HASSANEIN, TAREK, MD†

Provider ID: N/A

303 H ST STE 103
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-22

HASSANEIN, TAREK, MD†

Provider ID: N/A

256 LANDIS AVE STE 204
CHULA VISTA, CA 91910

Effective as of 01-SEP-15

HASSANEIN, TAREK, MD†

Provider ID: N/A

256 LANDIS AVE STE 202
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

HASSANEIN, TAREK, MD†

Provider ID: N/A

256 LANDIS AVE STE 202
CHULA VISTA, CA 91910

Effective as of 01-MAR-18

HASSANEIN, TAREK, MD†

Provider ID: N/A

303 H ST STE 103
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAY-21

HASSANEIN, TAREK, MD†

Provider ID: N/A

1323 3RD AVE
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

KORN, ERROL, MD

Provider ID: N/A

769 MEDICAL CENTER CT
STE 303
CHULA VISTA, CA 91911

Effective as of 01-MAY-23

KORN, ERROL, MD

Provider ID: N/A

769 MEDICAL CENTER CT
STE 303
CHULA VISTA, CA 91911

Effective as of 01-JUL-23

NOVO, MEGAN, MD

Provider ID: N/A

296 H ST STE 301
CHULA VISTA, CA 91910

Effective as of 01-JAN-23

SEVILLA, CLAUDIA, MD†

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-SEP-22

SWEET, PATRICK, MD†

Provider ID: N/A

353 CHURCH AVE STE A
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAY-22

THOMAS, CARLTON, MD†

Provider ID: N/A

296 H ST
CHULA VISTA, CA 91910

Effective as of 01-APR-21

WIENER, GREGORY, MD†

Provider ID: N/A

353 CHURCH AVE STE A
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

WIENER, GREGORY, MD†

Provider ID: N/A

353 CHURCH AVE STE A
CHULA VISTA, CA 91910

Effective as of 01-AUG-20

WIENER, GREGORY, MD†

Provider ID: N/A

353 CHURCH AVE STE A
CHULA VISTA, CA 91910

Effective as of 01-JAN-14

WIENER, GREGORY, MD†

Provider ID: N/A

353 CHURCH AVE STE A
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

WIENER, GREGORY, MD†

Provider ID: N/A

353 CHURCH AVE STE A
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

WIENER, GREGORY, MD†

Provider ID: N/A

353 CHURCH AVE STE A
CHULA VISTA, CA 91910*

Effective as of 01-SEP-15

**HEARING AID DEALER /
SUPPLIER**

ANDERSON, ELAINE, MA†

Provider ID: N/A

310 3RD AVE STE B21/C11
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

ANDERSON, ELAINE, MA†

Provider ID: N/A

310 3RD AVE STE C11
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

DAVIS, KELLE, MA†

Provider ID: N/A

310 3RD AVE STE C11
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

**HEMATOLOGY /
ONCOLOGY**

ANDREY, JEFFREY, MD†

Provider ID: N/A

450 4TH AVE STE 311
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

BASERI, BABAK, MD†

Provider ID: N/A

450 4TH AVE STE 311
CHULA VISTA, CA 91910

Effective as of 01-DEC-23

BASERI, BABAK, MD†

Provider ID: N/A

450 4TH AVE STE 311
CHULA VISTA, CA 91910

Effective as of 01-FEB-24

BASERI, BABAK, MD†

Provider ID: N/A

450 4TH AVE STE 311
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

**ITURBE-ALESSIO, IGNACIO,
MD†**

Provider ID: N/A

855 3RD AVE STE 3330
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JAN-23

**ITURBE-ALESSIO, IGNACIO,
MD†**

Provider ID: N/A

855 3RD AVE STE 3330
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-FEB-22

JOHNSON, KENNETH, MD†

Provider ID: N/A

769 MEDICAL CENTER CT
STE 202

CHULA VISTA, CA 91911

Effective as of 01-MAY-15

MARJON, PHILIP, MD†

Provider ID: N/A

450 4TH AVE STE 311
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

MOOLANI, RAMESH, MD†

Provider ID: N/A

855 3RD AVE STE 3330
CHULA VISTA, CA 91911

Effective as of 01-FEB-22

MOOLANI, RAMESH, MD†

Provider ID: N/A

855 3RD AVE STE 3330
CHULA VISTA, CA 91911

Effective as of 01-APR-23

**NAIDZIONAK, ULADZISLAU,
MD†**

Provider ID: N/A

750 MEDICAL CENTER CT
STE 9

CHULA VISTA, CA 91911

Effective as of 01-JUL-22

NORTON, MARILYN, MD†

Provider ID: N/A

769 MEDICAL CENTER CT
STE 202

CHULA VISTA, CA 91911

Effective as of 01-FEB-22

NORTON, MARILYN, MD†

Provider ID: N/A

769 MEDICAL CENTER CT
STE 202

CHULA VISTA, CA 91911
Effective as of 01-MAY-15

QUIROZ, ELISA, MD†

Provider ID: N/A
768 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-OCT-21

SAUNDERS, PHILLIP, DO†

Provider ID: N/A
450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A
450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A
450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-MAY-22

SONG, SEUNG-YIL, MD†

Provider ID: N/A
750 MEDICAL CENTER CT
STE 9
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

INTERNAL MEDICINE

CHITKARA, PUJA, MD†

Provider ID: N/A
765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

JAIN, SUPRABHA, MD

Provider ID: N/A
765 3RD AVE STE 10
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-OCT-22

LIRA, JOSE, MD†

Provider ID: N/A
841 KUHN DR STE 200
CHULA VISTA, CA 91914
Effective as of 01-NOV-23

LIRA, JOSE, MD†

Provider ID: N/A
841 KUHN DR STE 200
CHULA VISTA, CA 91914
Effective as of 01-JAN-24

LIU, ANDREW, MD

Provider ID: N/A
340 FOURTH AVE
STE 4
CHULA VISTA, CA 91910
Effective as of 01-SEP-23

LIU, ANDREW, MD

Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-SEP-23

MEYER, JILL, MD†

Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

MEYER, JILL, MD†

Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

MEYER, JILL, MD†

Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

MOOLANI, UJJALA, MD

Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-MAY-23

MOOLANI, UJJALA, MD†

Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

NARULA, ARVIN, MD†

Provider ID: N/A
890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Effective as of 01-JAN-21

OLIVER, DEANNA, MD†

Provider ID: N/A
303 H ST STE 103
CHULA VISTA, CA 91910
Effective as of 01-MAY-21

OLIVER, DEANNA, MD†

Provider ID: N/A
303 H ST STE 103
CHULA VISTA, CA 91910*
Effective as of 01-OCT-22

PATEL, AMAR, MD†

Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-23

PONCE, SONIA, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

REDDY, SMITHA, MD†

Provider ID: N/A

272 CHURCH AVE STE 1
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

REDDY, SMITHA, MD†

Provider ID: N/A

272 CHURCH AVE STE 1
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-OCT-21

**INTERVENTIONAL
CARDIOLOGY**

FERNANDEZ, GENARO, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-MAR-23

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Effective as of 01-JAN-21

JOHN, ALAN, MD

Provider ID: N/A

765 MEDICAL CENTER CT

STE 211
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

JOHN, ALAN, MD

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

KAFRI, HASSAN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

ROUGH, STEVEN, MD

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-NOV-23

ROUGH, STEVEN, MD

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-OCT-23

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-DEC-22

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-DEC-22

SHAH, KULIN, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-APR-23

SHEREV, DIMITRI, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-OCT-19

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-APR-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-APR-23

**MARRIAGE FAMILY
THERAPIST**

**CASTELLANOS, GRACIELA,
MFT†**

Provider ID: N/A

1061 TIERRA DEL REY STE
303
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-DEC-21

**CASTELLANOS, GRACIELA,
MFT†**

Provider ID: N/A

1061 TIERRA DEL REY STE
304
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-DEC-21

**CASTELLANOS, GRACIELA,
MFT†**

Provider ID: N/A

1061 TIERRA DEL REY STE
305
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-DEC-21

SHIELDS, SEBASTIAN, MFT

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUN-23

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Effective as of 01-MAY-23

BEDOYA, LUIS, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUL-22

BEDOYA, LUIS, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-SEP-15

BEDOYA, LUIS, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-21

BEDOYA, LUIS, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-14

FERNANDEZ, RODRIGO, MD†

Provider ID: N/A

450 4TH AVE STE 201
CHULA VISTA, CA 91910

Effective as of 01-MAY-21

HOREISH, ADAM, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Effective as of 01-AUG-15

HOREISH, ADAM, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

HOREISH, ADAM, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-15

HOREISH, ADAM, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

HOREISH, ADAM, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

KAYAL, ANAS, MD†

Provider ID: N/A

296 H ST STE 304
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-SEP-22

KHAING, KATHY, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

KHAING, KATHY, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-APR-19

KHAING, KATHY, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

KHAING, KATHY, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

**LOZADA-PASTORIO,
ELIZABETH, MD†**

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

**LOZADA-PASTORIO,
ELIZABETH, MD†**

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

**LOZADA-PASTORIO,
ELIZABETH, MD†**

Provider ID: N/A

340 4TH AVE STE 14
CHULA VISTA, CA 91910

Effective as of 01-SEP-20

**LOZADA-PASTORIO,
ELIZABETH, MD†**

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911

Effective as of 01-JAN-21

**LOZADA-PASTORIO,
ELIZABETH, MD†**

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

**LOZADA-PASTORIO,
ELIZABETH, MD†**

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Effective as of 01-JUL-15

**LOZADA-PASTORIO,
ELIZABETH, MD†**

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911

Effective as of 01-NOV-16

**LOZADA-PASTORIO,
ELIZABETH, MD†**

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911

Effective as of 01-JUL-22

MENDEZ, DIEGO, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-JUL-22

MEYER, JILL, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

MEYER, JILL, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911

Effective as of 01-JAN-21

MEYER, JILL, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911

Effective as of 01-AUG-14

MEYER, JILL, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911

Effective as of 01-JUL-22

MEYER, JILL, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Effective as of 01-SEP-20

MEYER, JILL, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

MEYER, JILL, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Effective as of 01-JAN-14

MOOLANI, UJJALA, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911

Effective as of 01-NOV-22

MOOLANI, UJJALA, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911

Effective as of 01-OCT-22

MOOLANI, UJJALA, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911

Effective as of 01-JAN-23

MOOLANI, UJJALA, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-FEB-23

PATEL, AMAR, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-24

PATEL, AMAR, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-FEB-20

PATEL, AMAR, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

PHAM, JENNIFER, MD

Provider ID: N/A

340 FOURTH AVE
STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-24

PHAM, JENNIFER, MD

Provider ID: N/A

340 FOURTH AVE
STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-23

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

SOLTERO, RICARDO, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-APR-17

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

VIDEEN, JOHN, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-SEP-20

VIDEEN, JOHN, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

VIDEEN, JOHN, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

VIDEEN, JOHN, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

VIDEEN, JOHN, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

VIDEEN, JOHN, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

YUAN, HENRY, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

NEUROLOGY

BINDAL, ANKUR, MD†

Provider ID: N/A

765 3RD AVE STE 100
CHULA VISTA, CA 91910

Teleservice
Effective as of 01-SEP-22
FARHIDVASH, FARIBA, MD†
Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-DEC-22

FARHIDVASH, FARIBA, MD†
Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-AUG-22

GRATIANNE, ROBERTO, MD†
Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-22

GRATIANNE, ROBERTO, MD†
Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-MAY-22

GUPTA, MONIKA, MD†
Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JUN-22

GUPTA, MONIKA, MD†
Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

HOSSEIN ZADEH MALEKI, ANA, MD
Provider ID: N/A
450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Teleservice
Effective as of 01-MAR-24
HOSSEIN ZADEH MALEKI, ANA, MD
Provider ID: N/A
450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Teleservice
Effective as of 01-MAR-24
HUISA-GARATE, BRANKO, MD†
Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-MAR-24

HUISA-GARATE, BRANKO, MD†
Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

HUISA-GARATE, BRANKO, MD†
Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-FEB-21

MAREK, MAKSYM, MD
Provider ID: N/A
450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-FEB-24

MAREK, MAKSYM, MD
Provider ID: N/A
450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-MAR-24
MAREK, MAKSYM, MD
Provider ID: N/A
450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-OCT-23

MCGEHRIN, KEVIN, MD
Provider ID: N/A
450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD
Provider ID: N/A
450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-23

OLENSKI, KLARI, DO†
Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JUN-22

PHAM, ALISE, DO
Provider ID: N/A
450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-FEB-24

PHAM, JENNIFER, MD
Provider ID: N/A
340 FOURTH AVE
STE 4

CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

PHAM, ALISE, DO

Provider ID: N/A
450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

SILVER, BRENT, MD†

Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

SILVER, BRENT, MD†

Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-DEC-22

SORIA LOPEZ, JOSE, MD†

Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-MAR-21

SORIA LOPEZ, JOSE, MD†

Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-SEP-21

NEUROLOGY CHILD

OLENSKI, KLARI, DO†

Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-MAY-22

OBSTETRICS /

GYNECOLOGY

ANGUIANO, FRANCISCO, MD†

Provider ID: N/A
765 MEDICAL CENTER CT
STE 209
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

ATIGA, SCHUBERT, MD†

Provider ID: N/A
752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

ATIGA, SCHUBERT, MD†

Provider ID: N/A
752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911
Effective as of 01-AUG-20

ATIGA, SCHUBERT, MD†

Provider ID: N/A
752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

ATIGA, SCHUBERT, MD†

Provider ID: N/A
752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

CHAC, RICK, MD†

Provider ID: N/A
660 OLD TELEGRAPH
CANYON RD
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

CHAC, RICK, MD†

Provider ID: N/A
660 OLD TELEGRAPH
CANYON RD
CHULA VISTA, CA 91910
Effective as of 01-AUG-20

CHAC, RICK, MD†

Provider ID: N/A
660 OLD TELEGRAPH
CANYON RD
CHULA VISTA, CA 91910
Effective as of 01-SEP-16

CHAC, RICK, MD†

Provider ID: N/A
660 OLD TELEGRAPH
CANYON RD
CHULA VISTA, CA 91910
Effective as of 01-SEP-20

JIBRIL, DEANAH, DO†

Provider ID: N/A
678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

MENDEZ, DIEGO, MD†

Provider ID: N/A
678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-21

SEFA-BOAKYE, KOFI, MD†

Provider ID: N/A
678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

SHORT, ABIADE, MD†

Provider ID: N/A
678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

SHORT, ABIADE, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-DEC-22

**OCCUPATIONAL
THERAPIST**

CUA, NICOLE, OT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910

Effective as of 01-MAR-24

HUGHES, ELISA, OT†

Provider ID: N/A

880 3RD AVE STE A
CHULA VISTA, CA 91911

Effective as of 01-JUN-22

LOPEZ, ALYSSA-NICOLE, OT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910

Effective as of 01-OCT-23

LOPEZ, ALYSSA-NICOLE, OT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910

Effective as of 01-DEC-23

MORRIS, SHEILA, OT†

Provider ID: N/A

1020 TIERRA DEL REY STE
A-1
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

PORTER, EILEEN, OT

Provider ID: N/A

88 E BONITA RD STE C

CHULA VISTA, CA 91910

Effective as of 01-AUG-23

PORTER, EILEEN, OT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910

Effective as of 01-JAN-22

OPHTHALMOLOGY

BRYANT, DUANE, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-21

BRYANT, DUANE, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-21

BRYANT, DUANE, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-21

BRYANT, DUANE, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-OCT-19

BRYANT, DUANE, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUN-19

CARRABY, ARNETT, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911

Effective as of 01-JUL-22

CARRABY, ARNETT, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911

Effective as of 01-AUG-20

CARRABY, ARNETT, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911

Effective as of 01-JAN-21

COCKERHAM, KIMBERLY, MD

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910

Effective as of 01-DEC-23

DELENGOCKY, TAYSON, DO†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

DELENGOCKY, TAYSON, DO†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911

Effective as of 01-JUL-22


JARDON, JAVIER, MD†

Provider ID: N/A


678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JUL-22


MANI, NASRIN, MD†

Provider ID: N/A
 678 3RD AVE
 CHULA VISTA, CA 91910
 Effective as of 01-JUL-22


MANI, NASRIN, MD†

Provider ID: N/A
 835 3RD AVE STE A
 CHULA VISTA, CA 91911
 Effective as of 01-JUL-22


MANI, MAJID, MD†

Provider ID: N/A
 835 3RD AVE STE A
 CHULA VISTA, CA 91911
 Effective as of 01-JUL-22


MANI, NASRIN, MD†

Provider ID: N/A
 835 3RD AVE STE A
 CHULA VISTA, CA 91911
 Effective as of 01-SEP-22


MANI, MAJID, MD†

Provider ID: N/A
 835 3RD AVE STE A
 CHULA VISTA, CA 91911
 Effective as of 01-SEP-22


MASLIN, JESSICA, MD

Provider ID: N/A
 311 DEL MAR AVE
 CHULA VISTA, CA 91910
 Effective as of 01-FEB-23

MASLIN, JESSICA, MD


Provider ID: N/A
 311 DEL MAR AVE
 CHULA VISTA, CA 91910
 Effective as of 01-FEB-23

MASLIN, JESSICA, MD


Provider ID: N/A
 311 DEL MAR AVE
 CHULA VISTA, CA 91910

Effective as of 01-FEB-23


MASLIN, JESSICA, MD

Provider ID: N/A
 480 FOURTH AVE
 STE 201
 CHULA VISTA, CA 91910
 Effective as of 01-AUG-23


MASLIN, JESSICA, MD

Provider ID: N/A
 480 FOURTH AVE
 STE 201
 CHULA VISTA, CA 91910
 Effective as of 01-JUL-23


MCDONNELL, EMMA, MD†

Provider ID: N/A
 835 3RD AVE STE A
 CHULA VISTA, CA 91911
 Effective as of 01-SEP-22


MCDONNELL, EMMA, MD†

Provider ID: N/A
 835 3RD AVE STE A
 CHULA VISTA, CA 91911
 Effective as of 01-APR-23

MOSS, JASON, MD†


Provider ID: N/A
 678 3RD AVE
 CHULA VISTA, CA 91910
 Effective as of 01-JUL-22

PAPASTERGIOU, GEORGIOS, MD†


Provider ID: N/A
 678 3RD AVE
 CHULA VISTA, CA 91910
 Teleservice
 Effective as of 01-JUL-22

PAPASTERGIOU, GEORGIOS, MD†


Provider ID: N/A

 835 3RD AVE STE A
 CHULA VISTA, CA 91911
 Effective as of 01-SEP-22


PAPASTERGIOU, GEORGIOS, MD†

Provider ID: N/A
 835 3RD AVE STE A
 CHULA VISTA, CA 91911
 Effective as of 01-JAN-21


PEAIRS, JAMES, MD†

Provider ID: N/A
 835 3RD AVE STE A
 CHULA VISTA, CA 91911
 Effective as of 01-SEP-22


PEAIRS, JAMES, MD†

Provider ID: N/A
 835 3RD AVE STE A
 CHULA VISTA, CA 91911
 Effective as of 01-AUG-20


PONS, MAURICIO, MD†

Provider ID: N/A
 835 3RD AVE STE A
 CHULA VISTA, CA 91911
 Effective as of 01-AUG-22

PONS, MAURICIO, MD†

Provider ID: N/A
 678 3RD AVE
 CHULA VISTA, CA 91910
 Effective as of 01-JUL-22

PONS, MAURICIO, MD†

Provider ID: N/A
 835 3RD AVE STE A
 CHULA VISTA, CA 91911
 Effective as of 01-JUL-22

PONS, MAURICIO, MD†

Provider ID: N/A
 835 3RD AVE STE A
 CHULA VISTA, CA 91911

Effective as of 01-SEP-22

RAJSBAUM, MARTIN, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

RAJSBAUM, MARTIN, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SASSANI, PATRICK, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SASSANI, PATRICK, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-MAR-23

SCHER, BARRY, MD†

Provider ID: N/A

480 4TH AVE STE 201
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

SCHER, BARRY, MD

Provider ID: N/A

311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-23

SCHER, BARRY, MD†

Provider ID: N/A

480 4TH AVE STE 201
CHULA VISTA, CA 91910
Effective as of 01-MAR-19

SCHER, BARRY, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SKAF, AYHAM, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

SKAF, AYHAM, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

SKAF, AYHAM, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

SKAF, AYHAM, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

STAINER, GREGORY, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910

Effective as of 01-JAN-24

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Effective as of 01-JUL-20

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Effective as of 01-NOV-20

OPTOMETRIST

CHAIN, PEI CHI, OD

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Effective as of 01-APR-23

EL-MOGHRABI, ROULA, OD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

EL-MOGHRABI, NANCY, OD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

KOO, ANITA, OD

Provider ID: N/A

835 THIRD AVE
STE A
CHULA VISTA, CA 91911

Effective as of 01-FEB-24

KOO, ANITA, OD

Provider ID: N/A

835 THIRD AVE
STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

KOO, ANITA, OD

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-FEB-24

MASCARENO, EFRAIN, OD†

Provider ID: N/A

440 4TH AVE STE 9
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

MASCARENO, EFRAIN, OD†

Provider ID: N/A

440 4TH AVE STE 9
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

MASCARENO, EFRAIN, OD†

Provider ID: N/A

2260 OTAY LAKES RD STE
111
CHULA VISTA, CA 91915
Effective as of 01-JAN-21

MASCARENO, EFRAIN, OD†

Provider ID: N/A

2260 OTAY LAKES RD STE
111
CHULA VISTA, CA 91915
Effective as of 01-SEP-22

NGUYEN, THU, OD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

NGUYEN, THU, OD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SCOVILL, ALEXANDRA, OD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SCOVILL, ALEXANDRA, OD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Effective as of 01-APR-23

OTOLARYNGOLOGY

ABDOU, RAMI, MD†

Provider ID: N/A

577 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-AUG-22

BANTHIA, VISHAL, MD†

Provider ID: N/A

577 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-21

BANTHIA, VISHAL, MD†

Provider ID: N/A

577 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-22

BANTHIA, VISHAL, MD†

Provider ID: N/A

577 3RD AVE

CHULA VISTA, CA 91910
Teleservice

Effective as of 01-SEP-21

CALZADA, AUDREY, MD†

Provider ID: N/A

577 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-OCT-22

CHANG, EDWARD, MD

Provider ID: N/A

577 THIRD AVE,
CHULA VISTA, CA 91910
Effective as of 01-MAR-24

JIMENEZ, CARLOS, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-OCT-20

JIMENEZ, CARLOS, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-OCT-20

MEHTA, RITVIK, MD†

Provider ID: N/A

577 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

MOSHTAGHI, OMID, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

PATSIAS, ALEXIS, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 210

CHULA VISTA, CA 91911
Teleservice
Effective as of 01-APR-21

PATSIAS, ALEXIS, MD†

Provider ID: N/A
765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAY-21

PATSIAS, ALEXIS, MD†

Provider ID: N/A
765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-SEP-22

SAEZ, NEIL, MD

Provider ID: N/A
2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913
Effective as of 01-NOV-23

SAEZ, NEIL, MD

Provider ID: N/A
2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913
Effective as of 01-FEB-24

SAEZ, NEIL, MD

Provider ID: N/A
765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A
765 MEDICAL CENTER CT
STE 210

CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUL-22

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A
765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JAN-21

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A
765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-AUG-20

WOO, LINDA, MD†

Provider ID: N/A
321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-AUG-20

WOO, LINDA, MD†

Provider ID: N/A
321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

WOO, LINDA, MD†

Provider ID: N/A
321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

WOO, LINDA, MD†

Provider ID: N/A
435 H ST
CHULA VISTA, CA 91910
Effective as of 01-AUG-21

OTOLARYNGOLOGY /

**OTOLOGY /
LARYNGOLOGY /
RHINOLOGY**

WOO, LINDA, MD†

Provider ID: N/A
321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-FEB-18

WOO, LINDA, MD†

Provider ID: N/A
321 E ST
CHULA VISTA, CA 91910
Effective as of 01-MAR-18

PEDIATRICS

**PIANSAY, MARIA CORAZON,
MD**

Provider ID: N/A
1637 3RD AVE STE B-F
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

**PIANSAY, MARIA CORAZON,
MD**

Provider ID: N/A
1637 3RD AVE STE H-I
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

ROWHANI, NAGHMEH, MD

Provider ID: N/A
280 E ST
CHULA VISTA, CA 91910
Effective as of 01-FEB-24

TIZNADO, ERNESTO, MD†

Provider ID: N/A
1635 3RD AVE STE L
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

**PHYS MED/ REHAB PAIN
MEDICINE**

KATZEN, SETH, DO

Provider ID: N/A

340 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-MAY-23

KOLODGE, GAVIN, DO

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-JUN-23

RICHARDSON, HENRY, MD†

Provider ID: N/A

340 4TH AVE STE 19
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

**PHYSICAL MEDICINE /
REHABILITATION**

BULLOCK, ANDREW, DO†

Provider ID: N/A

344 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

BULLOCK, ANDREW, DO†

Provider ID: N/A

344 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

BULLOCK, ANDREW, DO†

Provider ID: N/A

344 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

HURSCHMAN, ALAN, MD

Provider ID: N/A

344 F ST STE 203
CHULA VISTA, CA 91910
Effective as of 01-JAN-23

KATZEN, SETH, DO

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

KOLODGE, GAVIN, DO

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-SEP-23

TAHAEI, SEYED, MD†

Provider ID: N/A

340 4TH AVE STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

ARGOUD, MARIA, PA†

Provider ID: N/A

340 4TH AVE STE 7A
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

BEITTER, KEERSTIN, PA†

Provider ID: N/A

340 4TH AVE STE 19
CHULA VISTA, CA 91910
Effective as of 01-MAR-22

CHAN, ALONSO, PA†

Provider ID: N/A

299 J ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

DOUGHERTY, CLARA, PA

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

DOUGHERTY, CLARA, PA

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-FEB-24

GUTH, CARA, PA†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-21

GUTH, CARA, PA†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-24

INDA, PRISCILLA, PA†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

INDA, PRISCILLA, PA†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

INDA, PRISCILLA, PA

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-MAY-23

KOLODGE, KAITLEN, PA

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-AUG-23

KOLODGE, KAITLEN, PA

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-DEC-21

LEE, MYUNGHEE, PA

Provider ID: N/A

340 FOURTH AVE
STE 7A
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-23

LENIHAN, MICHAEL, PA

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-DEC-21

MACASADIA, MARITES, PA

Provider ID: N/A

752 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Effective as of 01-SEP-20

MENDEZ, JESUS, PA†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

NGUYEN, THUY-VY, PA†

Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-AUG-22

NGUYEN, THUY-VY, PA†

Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-NOV-23

ORTEGA-ENDAHL, DAVID, PA

Provider ID: N/A

2648 MAIN ST STE A
CHULA VISTA, CA 91911
Effective as of 01-OCT-21

PEDROZA, JENNIFER, PA†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911
Effective as of 01-AUG-20

PYLE, ALEXANDRA, PA

Provider ID: N/A

480 FOURTH AVE
STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

ROBICHAUD, FAITH, PA

Provider ID: N/A

299 J ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-23

ROBINSON, JENELLE, PA

Provider ID: N/A

340 FOURTH AVE
STE 7A
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

SHAH, SHEENA, PA

Provider ID: N/A

765 3RD AVE STE 100

CHULA VISTA, CA 91910
Effective as of 01-JUL-22

TAYLOR, RYAN, PA

Provider ID: N/A

480 FOURTH AVE
STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

TODD, RACHEL, PA

Provider ID: N/A

299 J ST
CHULA VISTA, CA 91910
Effective as of 01-JUN-23

VARGAS, CHRISTOPHER, PA†

Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Effective as of 01-SEP-22

VARGAS, CHRISTOPHER, PA

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-JAN-23

VARGAS, CHRISTOPHER, PA†

Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Effective as of 01-JAN-23

WHITE, KYLE, PA

Provider ID: N/A

765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

WILAND, WINONA, PA

Provider ID: N/A

577 3RD AVE
CHULA VISTA, CA 91910

Teleservice
Effective as of 01-JUN-23

WRIGHT, DEREK, PA

Provider ID: N/A
340 FOURTH AVE
STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-23

WRIGHT, DEREK, PA

Provider ID: N/A
340 FOURTH AVE
STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-23

WRIGHT, DEREK, PA

Provider ID: N/A
340 FOURTH AVE
STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-23

PODIATRIST

BANKS, JAMINELLI, DPM†

Provider ID: N/A
855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

CAINE, SAMUEL, DPM

Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-23

CHU, ANDREW, DPM†

Provider ID: N/A

855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

COLLINS, MICHAEL, DPM†

Provider ID: N/A
480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

COLLINS, MICHAEL, DPM†

Provider ID: N/A
480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

COLLINS, MICHAEL, DPM†

Provider ID: N/A
480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

COLLINS, MICHAEL, DPM†

Provider ID: N/A
480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-APR-23

DAVIDSON, JOHN, DPM†

Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

DAVIDSON, JOHN, DPM†

Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-23

DAVIDSON, JOHN, DPM†

Provider ID: N/A
345 F ST STE 100

CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-18

DAVIDSON, JOHN, DPM†

Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

DAVIDSON, JOHN, DPM†

Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

DAVIDSON, JOHN, DPM†

Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-22

HAN, KYOUNG, DPM

Provider ID: N/A
855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-JAN-22

KRIGER, STEPHEN, DPM†

Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-FEB-22

KRIGER, STEPHEN, DPM†

Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-22

MANCHEL, BRUCE, DPM†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

MAZZA, DAVID, DPM†

Provider ID: N/A

276 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

MAZZA, DAVID, DPM†

Provider ID: N/A

276 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

MAZZA, DAVID, DPM†

Provider ID: N/A

276 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-DEC-22

MORGAN, CRAIG, DPM†

Provider ID: N/A

276 CHURCH AVE STE A
CHULA VISTA, CA 91910*
Effective as of 01-DEC-17

NGUYEN, HAN, DPM

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUL-23

NGUYEN, HAN, DPM

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

NGUYEN, HAN, DPM

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUN-23

PUCCINELLI, ALAYNA, DPM†

Provider ID: N/A

340 4TH AVE STE 6
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

PUCCINELLI, ALAYNA, DPM†

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

PUCCINELLI, ALAYNA, DPM†

Provider ID: N/A

340 4TH AVE STE 6
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

QUE, HOWIE, DPM

Provider ID: N/A

750 MEDICAL CENTER CT
STE 6
CHULA VISTA, CA 91911
Effective as of 01-JUN-23

READ, TRENTON, DPM

Provider ID: N/A

855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-APR-23

SMITH, COLLIN, DPM†

Provider ID: N/A

855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-JUN-21

SMITH, COLLIN, DPM†

Provider ID: N/A

855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SOUVOROVA, JULIA, DPM†

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

SOUVOROVA, JULIA, DPM†

Provider ID: N/A

336 OXFORD ST STE 104
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24

TOUMA, ELIE, DPM

Provider ID: N/A

1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Effective as of 01-APR-23

TSAI, GRACE, DPM

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-FEB-23

TSAI, GRACE, DPM

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-SEP-23

TSAI, GRACE, DPM

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-APR-23


TSAI, GRACE, DPM

Provider ID: N/A


345 F ST STE 100

CHULA VISTA, CA 91910
Effective as of 01-DEC-23


XU, DIXON, DPM†

Provider ID: N/A
 345 F ST STE 100
 CHULA VISTA, CA 91910
 Teleservice
 Effective as of 01-DEC-23


XU, DIXON, DPM†

Provider ID: N/A
 345 F ST STE 100
 CHULA VISTA, CA 91910
 Teleservice
 Effective as of 01-JAN-21


XU, DIXON, DPM†

Provider ID: N/A
 345 F ST STE 100
 CHULA VISTA, CA 91910
 Teleservice
 Effective as of 01-SEP-22


XU, DIXON, DPM†

Provider ID: N/A
 345 F ST STE 100
 CHULA VISTA, CA 91910
 Teleservice
 Effective as of 01-SEP-22


XU, DIXON, DPM†

Provider ID: N/A
 345 F ST STE 100
 CHULA VISTA, CA 91910
 Teleservice
 Effective as of 01-MAY-21

XU, DIXON, DPM†


Provider ID: N/A
 345 F ST STE 100
 CHULA VISTA, CA 91910
 Teleservice
 Effective as of 01-MAR-24

XU, DIXON, DPM†


Provider ID: N/A
 345 F ST STE 100
 CHULA VISTA, CA 91910
 Teleservice
 Effective as of 01-NOV-20

PSYCHIATRY


BINDAL, ANKUR, MD†

Provider ID: N/A
 765 3RD AVE STE 100
 CHULA VISTA, CA 91910
 Teleservice
 Effective as of 01-SEP-22


BINDAL, ANKUR, MD†

Provider ID: N/A
 765 3RD AVE STE 100
 CHULA VISTA, CA 91910
 Teleservice
 Effective as of 01-JUL-22


BINDAL, ANKUR, MD†

Provider ID: N/A
 765 3RD AVE STE 100
 CHULA VISTA, CA 91910
 Teleservice
 Effective as of 01-JUL-22


BINDAL, ANKUR, MD†

Provider ID: N/A
 765 3RD AVE STE 100
 CHULA VISTA, CA 91910
 Teleservice
 Effective as of 01-SEP-22


BINDAL, ANKUR, MD†

Provider ID: N/A
 765 3RD AVE STE 100
 CHULA VISTA, CA 91910
 Teleservice
 Effective as of 01-JUL-22


BINDAL, ANKUR, MD†

Provider ID: N/A
 765 3RD AVE STE 100
 CHULA VISTA, CA 91910
 Teleservice
 Effective as of 01-JUL-22


CHAUDHRI, YASHWANT, MD†

Provider ID: N/A
 2300 BOSWELL RD STE 225
 CHULA VISTA, CA 91914
 Effective as of 01-AUG-22


CHAUDHRI, YASHWANT, MD†

Provider ID: N/A
 2300 BOSWELL RD STE 225
 CHULA VISTA, CA 91914
 Effective as of 01-AUG-22


KARIPPOT, ANOOP, MD†

Provider ID: N/A
 765 MEDICAL CENTER CT
 STE 216
 CHULA VISTA, CA 91911
 Teleservice
 Effective as of 01-JUN-22


KARIPPOT, ANOOP, MD†

Provider ID: N/A
 765 MEDICAL CENTER CT
 STE 216
 CHULA VISTA, CA 91911
 Teleservice
 Effective as of 01-JUN-22

MARTINEZ, STEPHANIE, MD†

Provider ID: N/A
 678 3RD AVE
 CHULA VISTA, CA 91910
 Effective as of 01-JAN-21

MARTINEZ, STEPHANIE, MD†

Provider ID: N/A
 678 3RD AVE

CHULA VISTA, CA 91910
Effective as of 01-JAN-21

MCGEHRIN, KEVIN, MD

Provider ID: N/A

450 FOURTH AVE
STE 215

CHULA VISTA, CA 91910
Teleservice

Effective as of 01-AUG-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

450 FOURTH AVE
STE 215

CHULA VISTA, CA 91910
Teleservice

Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A

450 FOURTH AVE
STE 215

CHULA VISTA, CA 91910
Teleservice

Effective as of 01-AUG-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

450 FOURTH AVE
STE 215

CHULA VISTA, CA 91910
Teleservice

Effective as of 01-MAR-24

MISHRA, GAURAV, MD†

Provider ID: N/A

678 3RD AVE

CHULA VISTA, CA 91910
Effective as of 01-JAN-21

MISHRA, GAURAV, MD†

Provider ID: N/A

678 3RD AVE

CHULA VISTA, CA 91910
Effective as of 01-JAN-21

NICHOLS, ALPHONSO, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216

CHULA VISTA, CA 91911
Teleservice

Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216

CHULA VISTA, CA 91911
Teleservice

Effective as of 01-JUL-22

PHAM, ALISE, DO

Provider ID: N/A

450 FOURTH AVE
STE 215

CHULA VISTA, CA 91910
Teleservice

Effective as of 01-MAR-24

PHAM, ALISE, DO

Provider ID: N/A

450 FOURTH AVE
STE 215

CHULA VISTA, CA 91910
Teleservice

Effective as of 01-MAR-24

TROYER, EMILY, MD†

Provider ID: N/A

678 3RD AVE

CHULA VISTA, CA 91910
Effective as of 01-JAN-22

TROYER, EMILY, MD†

Provider ID: N/A

678 3RD AVE

CHULA VISTA, CA 91910
Effective as of 01-JAN-22

PSYCHIATRY CHILD

KARIPPOT, ANOOP, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216

CHULA VISTA, CA 91911
Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216

CHULA VISTA, CA 91911
Teleservice

Effective as of 01-JAN-23

KARIPPOT, ANOOP, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216

CHULA VISTA, CA 91911
Teleservice

Effective as of 01-JAN-23

KARIPPOT, ANOOP, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216

CHULA VISTA, CA 91911
Teleservice

Effective as of 01-JUN-22

MISHRA, GAURAV, MD†

Provider ID: N/A

678 3RD AVE

CHULA VISTA, CA 91910
Effective as of 01-JAN-21

MISHRA, GAURAV, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

NICHOLS, ALPHONSO, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUL-22

**PSYCHIATRY SLEEP
MEDICINE**

KARIPPOT, ANOOP, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JAN-23

PSYCHOLOGIST

BAYLON, ALDO, PSYD

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-22

BAYLON, ALDO, PSYD

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-22

CELAYA, PATRICIA, PhD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-22

CELAYA, PATRICIA, PhD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-22

GALLO, LINDA, PhD

Provider ID: N/A

780 BAY BLVD STE 200
CHULA VISTA, CA 91910
Effective as of 01-APR-23

GALLO, LINDA, PhD

Provider ID: N/A

780 BAY BLVD STE 200
CHULA VISTA, CA 91910
Effective as of 01-APR-23

GOULD, HILARY, PhD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

GOULD, HILARY, PhD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

MAPLES, RANDI, PSYD†

Provider ID: N/A

765 3RD AVE STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

MAPLES, RANDI, PSYD†

Provider ID: N/A

765 3RD AVE STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

**PATTERSON-HYATT,
KIMBERLY, PSYD†**

Provider ID: N/A

1061 TIERRA DEL REY STE
303
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

**PATTERSON-HYATT,
KIMBERLY, PSYD†**

Provider ID: N/A

1061 TIERRA DEL REY STE
304
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

**PATTERSON-HYATT,
KIMBERLY, PSYD†**

Provider ID: N/A

1061 TIERRA DEL REY STE
305
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

**PATTERSON-HYATT,
KIMBERLY, PSYD†**

Provider ID: N/A

1061 TIERRA DEL REY STE
303
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

**PATTERSON-HYATT,
KIMBERLY, PSYD†**

Provider ID: N/A

1061 TIERRA DEL REY STE
304
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

**PATTERSON-HYATT,
KIMBERLY, PSYD†**

Provider ID: N/A

1061 TIERRA DEL REY STE
305

CHULA VISTA, CA 91910

Effective as of 01-NOV-21

**WIJAYARATNE, IMANIE,
PSYD†**

Provider ID: N/A

678 3RD AVE

CHULA VISTA, CA 91910

Effective as of 01-JAN-21

**WIJAYARATNE, IMANIE,
PSYD†**

Provider ID: N/A

678 3RD AVE

CHULA VISTA, CA 91910

Effective as of 01-JAN-21

PULMONARY DISEASES

LIRA, JOSE, MD†

Provider ID: N/A

841 KUHN DR STE 200

CHULA VISTA, CA 91914

Effective as of 01-FEB-21

LIRA, JOSE, MD†

Provider ID: N/A

841 KUHN DR STE 200

CHULA VISTA, CA 91914

Effective as of 01-JAN-14

LIRA, JOSE, MD†

Provider ID: N/A

841 KUHN DR STE 200

CHULA VISTA, CA 91914

Effective as of 01-SEP-22

LOZANO, MARTHA, MD†

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914

Effective as of 01-SEP-22

LOZANO, MARTHA, MD†

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914

Effective as of 01-MAR-21

LOZANO, MARTHA, MD†

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914

Effective as of 01-SEP-15

LOZANO, MARTHA, MD†

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914

Effective as of 01-JAN-14

PENA ROMERO, CESAR, MD†

Provider ID: N/A

227 CHURCH AVE
CHULA VISTA, CA 91910

Effective as of 01-SEP-15

PENA ROMERO, CESAR, MD†

Provider ID: N/A

227 CHURCH AVE
CHULA VISTA, CA 91910

Effective as of 01-OCT-19

SANCHEZ, LUIS, MD†

Provider ID: N/A

227 CHURCH AVE
CHULA VISTA, CA 91910*

Effective as of 01-JAN-14

SANCHEZ, LUIS, MD†

Provider ID: N/A

227 CHURCH AVE
CHULA VISTA, CA 91910

Effective as of 01-SEP-15

RADIATION ONCOLOGY

BRUGGEMAN, ANDREW, MD

Provider ID: N/A

769 MEDICAL CENTER CT
STE 100

CHULA VISTA, CA 91911

Effective as of 01-JAN-24

CARMONA, RUBEN, MD

Provider ID: N/A

769 MEDICAL CENTER CT
STE 100

CHULA VISTA, CA 91911

Effective as of 01-JAN-24

CARMONA, RUBEN, MD

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911

Effective as of 01-JAN-24

COLEMAN, LORI, MD†

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911

Effective as of 01-JAN-21

**HATTANGADI GLUTH, JONA,
MD†**

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-DEC-21

JABBARI, SIAVASH, MD†

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911

Effective as of 01-OCT-22

MANSY, GINA, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-APR-21

MELL, LOREN, MD†

Provider ID: N/A
959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-21

PEJAVAR, SUNANDA, MD†

Provider ID: N/A
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

RAHN, DOUGLAS, MD†

Provider ID: N/A
959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-APR-21

RASH, DOMINIQUE, MD†

Provider ID: N/A
959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-21

ROSE, BRENT, MD†

Provider ID: N/A
959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-21

STRAKA, CHRISTOPHER, MD†

Provider ID: N/A
959 LANE AVE
CHULA VISTA, CA 91914
Teleservice

Effective as of 01-DEC-21

UHL, BARRY, MD†

Provider ID: N/A
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JAN-21

VOLPP, PAUL, MD†

Provider ID: N/A
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

WEINSTEIN, GEOFFREY, MD†

Provider ID: N/A
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

WHITE, EVAN, MD†

Provider ID: N/A
959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-APR-21

RADIOLOGY DIAGNOSTIC

YORK, JOHN, MD

Provider ID: N/A
865 3RD AVE STE 100
CHULA VISTA, CA 91911
Effective as of 01-JUN-23

YORK, JOHN, MD

Provider ID: N/A
865 3RD AVE STE 100
CHULA VISTA, CA 91911
Effective as of 01-DEC-23

**REGISTERED PHYSICAL
THERAPIST**

ALLOS, ALEXANDER, PT†

Provider ID: N/A
88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

BURLAKOVSKY, NATHAN, PT

Provider ID: N/A
88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

CHENG, BRANDON, PT

Provider ID: N/A
1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-FEB-24

DAGOSTINO, JACQUELINE, PT†

Provider ID: N/A
1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-JAN-21

DORSEY, KYLE, PT†

Provider ID: N/A
1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-DEC-21

DORSEY, KYLE, PT†

Provider ID: N/A
1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-SEP-22

FARRAR, COURTNEY, PT

Provider ID: N/A
340 FOURTH AVE
STE 19
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUL-23

GRAHEK, LAICEE, PT

Provider ID: N/A

320 BROADWAY STE 2
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

GRAHEK, LAICEE, PT

Provider ID: N/A

2417 FENTON ST STE A
CHULA VISTA, CA 91914
Effective as of 01-JUL-22

HERMAN, RACHEL, PT†

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-SEP-22

HERMAN, RACHEL, PT†

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-NOV-21

JAIN, ALEXANDRA, PT

Provider ID: N/A

880 THIRD AVE
STE A
CHULA VISTA, CA 91911
Effective as of 01-MAR-24

KARANDE, PRACHI, PT†

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-JAN-22

LONG, RYAN, PT

Provider ID: N/A

2417 FENTON ST STE A
CHULA VISTA, CA 91914
Effective as of 01-JUL-22

LONG, RYAN, PT

Provider ID: N/A

320 BROADWAY STE 2
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

MIGNEA, DAVID, PT

Provider ID: N/A

320 BROADWAY STE 2
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

MIGNEA, DAVID, PT

Provider ID: N/A

2417 FENTON ST STE A
CHULA VISTA, CA 91914
Effective as of 01-JUL-22

NGUYEN, TIA, PT

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-MAR-24

NOVENCIDO, ANDREW, PT†

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-SEP-22

PAPA, AMY, PT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

PAPA, AMY, PT

Provider ID: N/A

88 E BONITA RD STE C

CHULA VISTA, CA 91910
Effective as of 01-NOV-21

PHILLIP, OMARI, PT†

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-DEC-21

POLIS, NICK, PT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-MAY-22

SPARKS, TODD, PT†

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-JAN-21

STAHL, KEVIN, PT

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-SEP-23

THOMAS, KAITLIN, PT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

RHEUMATOLOGY

AL NAHLAWI, BASMA, MD†

Provider ID: N/A

296 H ST STE 304
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-SEP-22

CHITKARA, PUJA, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Effective as of 01-JAN-21

CHITKARA, PUJA, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Effective as of 01-MAR-16

CHITKARA, PUJA, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Effective as of 01-SEP-15

CHWA, JEFFREY, DO

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

HAMMETT, ERIN, DO†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

KHANNA, SURABHI, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUN-23

REDDY, DANA, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

REDDY, DANA, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

REDDY, SMITHA, MD†

Provider ID: N/A

272 CHURCH AVE STE 1
CHULA VISTA, CA 91910

Effective as of 01-FEB-19

SPEECH PATHOLOGIST

**AROCHO-SALGADO, MIRELIS,
SP**

Provider ID: N/A

333 H ST STE 5000
CHULA VISTA, CA 91910

Effective as of 01-JUN-22

**AROCHO-SALGADO, MIRELIS,
SP**

Provider ID: N/A

333 H ST STE 5000
CHULA VISTA, CA 91910

Effective as of 01-JUN-22

SURGERY GENERAL

ARCOVEDO, RODOLFO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

ARCOVEDO, RODOLFO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JUN-19

ARCOVEDO, RODOLFO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

ARCOVEDO, RODOLFO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-AUG-23

ARCOVEDO, RODOLFO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JUN-19

BARRERA, HUGO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-SEP-14

BARRERA, HUGO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

BARRERA, HUGO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-19

BARRERA, HUGO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

**CASILLAS BERUMEN, SERGIO,
MD**

Provider ID: N/A

1111 BROADWAY STE 305

CHULA VISTA, CA 91911
Effective as of 01-FEB-24

EWBANK, CLIFTON, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-AUG-22

EWBANK, CLIFTON, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-OCT-22

EWBANK, CLIFTON, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

EWBANK, CLIFTON, MD†

Provider ID: N/A

786 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

HSU, BRADFORD, MD†

Provider ID: N/A

480 4TH AVE STE 404
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

HSU, ANDREW, MD†

Provider ID: N/A

480 4TH AVE STE 404
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

HSU, ANDREW, MD†

Provider ID: N/A

480 4TH AVE STE 404
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

HSU, BRADFORD, MD†

Provider ID: N/A

480 4TH AVE STE 404
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

HSU, ANDREW, MD†

Provider ID: N/A

480 4TH AVE STE 404
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

HSU, BRADFORD, MD†

Provider ID: N/A

480 4TH AVE STE 404
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

HSU, ANDREW, MD†

Provider ID: N/A

480 4TH AVE STE 404
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

HSU, BRADFORD, MD†

Provider ID: N/A

480 4TH AVE STE 404
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

HUANG, MARK, MD†

Provider ID: N/A

345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-OCT-17

KHARAZI, ALEXANDRA, MD†

Provider ID: N/A

345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-MAY-23

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

1111 BROADWAY STE 305

CHULA VISTA, CA 91911

Teleservice

Effective as of 01-MAR-24

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice

Effective as of 01-MAR-24

MORAL, JOHN, MD

Provider ID: N/A

480 4TH AVE STE 404
CHULA VISTA, CA 91910
Effective as of 01-SEP-23

MORAL, JOHN, MD

Provider ID: N/A

480 4TH AVE STE 404
CHULA VISTA, CA 91910
Effective as of 01-JUN-23

SPITZER, BLAKE, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

SPITZER, BLAKE, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-OCT-19

SPITZER, BLAKE, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-MAY-20

SPITZER, BLAKE, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

SUMMERS, STEPHEN, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SUMMERS, STEPHEN, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JUN-21

SUMMERS, STEPHEN, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SUMMERS, STEPHEN, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

TALEBZADEH, NOJAN, MD†

Provider ID: N/A

246 F ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

YANG, YIFAN, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

YANG, YIFAN, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-19

YANG, YIFAN, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JUN-23

YANG, YIFAN, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

YANG, YIFAN, MD†

Provider ID: N/A

786 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

YANG, YIFAN, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

***SURGERY GENERAL
VASCULAR***

**MORENO MARTINEZ,
ENRIQUE, MD†**

Provider ID: N/A

1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

1111 BROADWAY STE 305

CHULA VISTA, CA 91911
Teleservice

Effective as of 01-MAR-24

SURGERY HAND

POMERANTZ, MICHAEL, MD†

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-DEC-21

SURGERY

NEUROLOGICAL

WHITE, DANIEL, MD†

Provider ID: N/A

296 H ST STE 303
CHULA VISTA, CA 91910
Effective as of 01-MAR-23

WHITE, DANIEL, MD†

Provider ID: N/A

296 H ST STE 303
CHULA VISTA, CA 91910
Effective as of 01-OCT-21

WHITE, DANIEL, MD†

Provider ID: N/A

296 H ST STE 303
CHULA VISTA, CA 91910
Effective as of 01-SEP-23

SURGERY ORTHOPEDIC

ANDRY, JAMES, MD

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-MAR-24

BRERETON, DANIEL, DO†

Provider ID: N/A

750 MEDICAL CENTER CT

STE 14
CHULA VISTA, CA 91911
Effective as of 01-DEC-21

DOWNING, KRISTOPHER, MD

Provider ID: N/A
750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-MAR-24

DUTTON, PASCUAL, MD

Provider ID: N/A
750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A
955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A
296 H ST STE 203
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

EVES, WILLIAM, MD†

Provider ID: N/A
480 4TH AVE STE 307
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

EVES, WILLIAM, MD†

Provider ID: N/A
480 4TH AVE STE 307
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

GROTTING, JOHN, MD

Provider ID: N/A
296 H ST STE 203

CHULA VISTA, CA 91910
Effective as of 01-JAN-24

GROTTING, JOHN, MD

Provider ID: N/A
955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-JAN-24

GROTTING, JOHN, MD†

Provider ID: N/A
750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

GROTTING, JOHN, MD†

Provider ID: N/A
750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-AUG-23

GROTTING, JOHN, MD†

Provider ID: N/A
750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-NOV-21

HOFMEISTER, ERIC, MD†

Provider ID: N/A
955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-NOV-21

HOFMEISTER, ERIC, MD†

Provider ID: N/A
955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-FEB-18

HOFMEISTER, ERIC, MD†

Provider ID: N/A
955 LANE AVE STE 200

CHULA VISTA, CA 91914
Effective as of 01-AUG-23

KIMBALL, MICHAEL, MD†

Provider ID: N/A
480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

KLATMAN, SAMUEL, MD†

Provider ID: N/A
955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-AUG-23

KLATMAN, SAMUEL, MD†

Provider ID: N/A
955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-NOV-21

KOLODGE, GAVIN, DO

Provider ID: N/A
955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-AUG-23

POMERANTZ, MICHAEL, MD†

Provider ID: N/A
955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-FEB-18

RICKARDS, ENASS, MD

Provider ID: N/A
480 FOURTH AVE
STE 501
CHULA VISTA, CA 91910
Effective as of 01-FEB-24

ROSENFELD, ALAN, MD†

Provider ID: N/A
480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-APR-23

ROSENFELD, ALAN, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

ROSENFELD, ALAN, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910*
Effective as of 01-FEB-07

ROSENFELD, ALAN, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

ROSENFELD, ALAN, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-NOV-09

ROSENFELD, ALAN, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

TAYYAB, NEIL, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

TAYYAB, NEIL, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

TAYYAB, NEIL, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

TAYYAB, NEIL, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

TAYYAB, NEIL, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-NOV-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-OCT-23

SURGERY THORACIC

HUANG, MARK, MD†

Provider ID: N/A

345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-SEP-17

HUANG, MARK, MD†

Provider ID: N/A

345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

MUMTAZ, SEEMAL, MD†

Provider ID: N/A

345 F ST STE 200

CHULA VISTA, CA 91910
Effective as of 01-SEP-22

MUMTAZ, SEEMAL, MD†

Provider ID: N/A

345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-SEP-17

SURGICAL ONCOLOGY

QUIROZ, ELISA, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

UROLOGY

COHEN, EDWARD, MD

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

DICKS, BRIAN, MD

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

JUMA, SAAD, MD

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

KEILLER, DANNY, MD

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911
Effective as of 01-JAN-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911
Effective as of 01-JAN-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14

CHULA VISTA, CA 91911
Effective as of 01-JAN-24

NGUYEN, HUNG, MD

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911
Effective as of 01-JAN-24

PE, MARK-RALLY, MD

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911
Effective as of 01-JAN-24

ROBERTS, JAMES, MD

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SALMASI, AMIRALI, MD

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14

CHULA VISTA, CA 91911
Effective as of 01-SEP-21

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14

CHULA VISTA, CA 91911
Effective as of 01-NOV-21

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911
Effective as of 01-NOV-22

SEVILLA, CLAUDIA, MD†

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14

CHULA VISTA, CA 91911
Teleservice

Effective as of 01-OCT-21

SEVILLA, CLAUDIA, MD†

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14

CHULA VISTA, CA 91911
Teleservice

Effective as of 01-MAY-21

SEVILLA, CLAUDIA, MD†

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14

CHULA VISTA, CA 91911

Teleservice

Effective as of 01-NOV-21

VAPNEK, EVAN, MD

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911
Effective as of 01-JAN-24

VAPNEK, EVAN, MD†

Provider ID: N/A

786 3RD AVE STE B

CHULA VISTA, CA 91910

Effective as of 01-JAN-21

**CERTIFIED NURSE
PRACTITIONER**

NAVA, PETER, NP

Provider ID: N/A

818 PIER VIEW WAY
CMP PENDLETON, CA
92054

Effective as of 01-JAN-24

NAVA, PETER, NP

Provider ID: N/A

517 N HORNE ST
CMP PENDLETON, CA
92054

Effective as of 01-JAN-24

PEDIATRICS

RONAN, KEVIN, MD

Provider ID: N/A

818 PIER VIEW WAY
CMP PENDLETON, CA
92054

Effective as of 01-MAY-23

EMERGENCY MEDICINE

EL SAID, KHALED, MD†

Provider ID: N/A

11882 DE PALMA RD STE
2F-1
CORONA, CA 92883

Teleservice

Effective as of 01-MAR-24

INFECTIOUS DISEASE

RESTREPO, DALILAH, MD†

Provider ID: N/A

3334 E COAST HWY PMB
655
CORONA DEL MAR, CA
92625

Effective as of 01-AUG-22

AUDIOLOGIST

HORNER, HEATHER, AuD†

Provider ID: N/A

801 ORANGE AVE STE 205
CORONADO, CA 92118

Teleservice

Effective as of 01-JUN-22

CARDIOVASCULAR DISEASE

MAI, TUAN, MD†

Provider ID: N/A

230 PROSPECT PL STE 250
CORONADO, CA 92118

Effective as of 01-NOV-22

CERTIFIED NURSE PRACTITIONER

DWYER, ERIN, NP

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118

Effective as of 01-FEB-24

GOSHEN, KIRSTEN, NP†

Provider ID: N/A

230 PROSPECT PL STE 340
CORONADO, CA 92118

Effective as of 01-DEC-22

TOMICICH, STEPHANIE, NP

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118

Effective as of 01-FEB-24

FAMILY PRACTICE

SHAFT, ALEXANDER, MD†

Provider ID: N/A

131 ORANGE AVE STE 101
CORONADO, CA 92118

Teleservice

Effective as of 01-MAR-22

SHAFT, ALEXANDER, MD†

Provider ID: N/A

131 ORANGE AVE STE 101
CORONADO, CA 92118

Teleservice

Effective as of 01-FEB-23

GASTROENTEROLOGY

BAIG, NABIL, DO†

Provider ID: N/A

131 ORANGE AVE STE 101B
CORONADO, CA 92118

Teleservice

Effective as of 01-OCT-22

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE, MA†

Provider ID: N/A

801 ORANGE AVE
CORONADO, CA 92118

Effective as of 01-SEP-22

INTERNAL MEDICINE

BORTZ, DAVID, MD†

Provider ID: N/A

230 PROSPECT PL STE 340
CORONADO, CA 92118*

Effective as of 01-DEC-22

DAVIS, JASON, MD†

Provider ID: N/A

230 PROSPECT PL STE
340B
CORONADO, CA 92118

Effective as of 01-JAN-24

OLIVER, DEANNA, MD†

Provider ID: N/A

131 ORANGE AVE STE 101
CORONADO, CA 92118

Effective as of 01-MAR-21

OLIVER, DEANNA, MD†

Provider ID: N/A

131 ORANGE AVE STE 101
CORONADO, CA 92118

Effective as of 01-APR-21

NEPHROLOGY

DAVIS, JASON, MD†

Provider ID: N/A

230 PROSPECT PL STE
340B
CORONADO, CA 92118

Effective as of 01-JUL-22

DAVIS, JASON, MD†

Provider ID: N/A

230 PROSPECT PL STE
340B

CORONADO, CA 92118
Effective as of 01-MAR-16

HAMMES, JOHN, MD

Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

**OBSTETRICS /
GYNECOLOGY**

SEFA-BOAKYE, KOFI, MD†

Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-21

SEFA-BOAKYE, KOFI, MD†

Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JUL-14

PHYSICIANS ASSISTANT

DOUGHERTY, CLARA, PA

Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

SURGERY GENERAL

BHOYRUL, SUNIL, MD†

Provider ID: N/A
230 PROSPECT PL STE 340
CORONADO, CA 92118
Effective as of 01-DEC-22

BORTZ, PASCAL, MD†

Provider ID: N/A
230 PROSPECT PL STE 340
CORONADO, CA 92118
Effective as of 01-DEC-22

MORELL, MICHAEL, MD

Provider ID: N/A
230 PROSPECT PL STE 340
CORONADO, CA 92118
Effective as of 01-DEC-23

SURGERY ORTHOPEDIC

ANDRY, JAMES, MD

Provider ID: N/A
230 PROSPECT PL STE 230
CORONADO, CA 92118
Effective as of 01-MAR-24

UROLOGY

BUTLER, PHILIP, MD

Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

COHEN, EDWARD, MD

Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-FEB-24

DATO, PAUL, MD

Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

DICKS, BRIAN, MD

Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

JUMA, SAAD, MD

Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118

Effective as of 01-JAN-24

KEILLER, DANNY, MD

Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

NEUSTEIN, PAUL, MD

Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

NGUYEN, HUNG, MD

Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

PE, MARK-RALLY, MD

Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

ROBERTS, JAMES, MD†

Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-21

ROBERTS, JAMES, MD†

Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-20

ROBERTS, JAMES, MD†

Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A
 230 PROSPECT PL STE 210
 CORONADO, CA 92118
 Effective as of 01-JAN-24

SALMASI, AMIRALI, MD
 Provider ID: N/A
 230 PROSPECT PL STE 210
 CORONADO, CA 92118
 Effective as of 01-JAN-24

VAPNEK, EVAN, MD
 Provider ID: N/A
 230 PROSPECT PL STE 210
 CORONADO, CA 92118
 Effective as of 01-JAN-24

**CERTIFIED NURSE
PRACTITIONER**

PASICOLAN, MARI, NP
 Provider ID: N/A
 24833 DEL PRADO
 DANA POINT, CA 92629
 Effective as of 01-DEC-22

PASICOLAN, MARI, NP
 Provider ID: N/A
 24833 DEL PRADO
 DANA POINT, CA 92629
 Effective as of 01-DEC-22

PASICOLAN, MARI, NP
 Provider ID: N/A
 24833 DEL PRADO
 DANA POINT, CA 92629
 Effective as of 01-DEC-22

**MARRIAGE FAMILY
THERAPIST**

MOORE, CANDACE, MFT
 Provider ID: N/A
 23 TERRAZA DEL MAR

DANA POINT, CA 92629
 Effective as of 01-JAN-22

MOORE, CANDACE, MFT
 Provider ID: N/A
 23 TERRAZA DEL MAR
 DANA POINT, CA 92629
 Effective as of 01-JAN-22

OPTOMETRIST

SPAETH, JOHN, OD
 Provider ID: N/A
 24040 CAMINO DEL AVION
 STE G
 DANA POINT, CA 92629
 Effective as of 01-SEP-23

WANG, MATTHEW, OD
 Provider ID: N/A
 24692 DEL PRADO STE B
 DANA POINT, CA 92629
 Effective as of 01-OCT-23

WANG, MATTHEW, OD
 Provider ID: N/A
 24692 DEL PRADO STE B
 DANA POINT, CA 92629
 Effective as of 01-JAN-23

PHYSICIANS ASSISTANT

JEFFREY, JAMES, PA
 Provider ID: N/A
 24060 CAMINO DEL AVION
 STE A
 DANA POINT, CA 92629
 Effective as of 01-NOV-23

PSYCHOLOGIST

UNGER, ARLENE, PhD†
 Provider ID: N/A
 34145 PACIFIC COAST HWY
 STE 821

DANA POINT, CA 92629
 Effective as of 01-DEC-20

UNGER, ARLENE, PhD†
 Provider ID: N/A
 34145 PACIFIC COAST HWY
 STE 821
 DANA POINT, CA 92629
 Effective as of 01-DEC-20

UNGER, ARLENE, PhD†
 Provider ID: N/A
 34145 PACIFIC COAST HWY
 STE 821
 DANA POINT, CA 92629
 Effective as of 01-DEC-20

UNGER, ARLENE, PhD†
 Provider ID: N/A
 34145 PACIFIC COAST HWY
 STE 821
 DANA POINT, CA 92629
 Effective as of 01-DEC-20

DERMATOLOGY

MARRIOTT, AGATA, MD
 Provider ID: N/A
 1349 CAMINO DEL MAR
 STE D
 DEL MAR, CA 92014
 Effective as of 01-SEP-22

PHYSICIANS ASSISTANT

HANSEN, CHRISTINA, PA
 Provider ID: N/A
 12865 POINTE DEL MAR
 WAY STE 200
 DEL MAR, CA 92014
 Teleservice
 Effective as of 01-OCT-23

LEE, ISABEL, PA
 Provider ID: N/A

1349 CAMINO DEL MAR
STE B
DEL MAR, CA 92014
Teleservice
Effective as of 01-DEC-23

SZABO, HAYLIE, PA

Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 200
DEL MAR, CA 92014
Teleservice
Effective as of 01-OCT-22

PSYCHIATRY

COLOGNE, SCOTT, MD†

Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014
Effective as of 01-OCT-23

COLOGNE, SCOTT, MD†

Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014
Effective as of 01-OCT-23

COLOGNE, SCOTT, MD†

Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014
Effective as of 01-OCT-23

COLOGNE, SCOTT, MD†

Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014
Effective as of 01-OCT-23

VIJAYASARATHI, KRISHNA,

DO†

Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

**VIJAYASARATHI, KRISHNA,
DO†**

Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-SEP-22

**VIJAYASARATHI, KRISHNA,
DO†**

Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014
Effective as of 01-SEP-22

**VIJAYASARATHI, KRISHNA,
DO†**

Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

**VIJAYASARATHI, KRISHNA,
DO†**

Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

**VIJAYASARATHI, KRISHNA,
DO†**

Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1

DEL MAR, CA 92014
Effective as of 01-SEP-22

**VIJAYASARATHI, KRISHNA,
DO†**

Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014
Effective as of 01-SEP-22

**VIJAYASARATHI, KRISHNA,
DO†**

Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

PSYCHOLOGIST

**ROSENGARTEN, ARTHUR,
PhD†**

Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014*
Effective as of 01-MAY-23

ROSENGARTEN, ARTHUR, PhD

Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014*
Effective as of 01-MAY-23

**ROSENGARTEN, ARTHUR,
PhD†**

Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

ROSENGARTEN, ARTHUR,

PhD†

Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

**ROSENGARTEN, ARTHUR,
PhD†**

Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014*
Effective as of 01-MAY-23

ROSENGARTEN, ARTHUR, PhD

Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014*
Effective as of 01-MAY-23

**ROSENGARTEN, ARTHUR,
PhD†**

Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

**ROSENGARTEN, ARTHUR,
PhD†**

Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

SURGERY ORTHOPEDIC

BROWN, RICHARD, MD†

Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 200

DEL MAR, CA 92014

Teleservice

Effective as of 01-JAN-22

MOHLENBROCK, WILLIAM, MD

Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 200
DEL MAR, CA 92014

Teleservice

Effective as of 01-JAN-22

THUNDER, RICHARD, MD†

Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 200
DEL MAR, CA 92014

Teleservice

Effective as of 01-JAN-22

ALLERGY IMMUNOLOGY

REDDY, SUMANA, MD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-DEC-22

**ANESTHESIOLOGY PAIN
MANAGEMENT**

COHEN, ZACHARY, MD†

Provider ID: N/A

278 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-NOV-21

AUDIOLOGIST

HORNER, HEATHER, AuD†

Provider ID: N/A

1767 E MAIN ST
EL CAJON, CA 92021
Teleservice

Effective as of 01-JUN-22

SHASKY, GARY, AuD†

Provider ID: N/A

1767 E MAIN ST
EL CAJON, CA 92021
Effective as of 01-JAN-21

CARDIAC

ELECTROPHYSIOLOGY

LERNER, JONATHAN, MD

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-JUL-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-JAN-23

CARDIOLOGY

BARVALIA, MIHIR, MD†

Provider ID: N/A

1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020
Teleservice

Effective as of 01-NOV-22

BARVALIA, MIHIR, MD†

Provider ID: N/A

1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020
Teleservice

Effective as of 01-JAN-24

KAFRI, HASSAN, MD†

Provider ID: N/A

328 HIGHLAND AVE STE

200
EL CAJON, CA 92020
Effective as of 01-JAN-21

KAFRI, HASSAN, MD†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Effective as of 01-JAN-21

KAFRI, HASSAN, MD†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Effective as of 01-JAN-19

KAFRI, HASSAN, MD†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Effective as of 01-AUG-20

KAFRI, HASSAN, MD†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Effective as of 01-SEP-22

PONCE, SONIA, MD†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Effective as of 01-JAN-21

SHARF, ALBERT, MD

Provider ID: N/A

1240 BROADWAY STE 210
EL CAJON, CA 92021
Effective as of 01-JAN-24

SHARF, ALBERT, MD

Provider ID: N/A

230 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-JAN-24

SHEREV, DIMITRI, MD

Provider ID: N/A

1380 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-JAN-24

**CARDIOVASCULAR
DISEASE**

ABELHAD, NADIA, MD

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-JAN-24

BARVALIA, MIHIR, MD†

Provider ID: N/A

1380 EL CAJON BLVD STE
212
EL CAJON, CA 92020
Effective as of 01-JAN-22

BARVALIA, MIHIR, MD†

Provider ID: N/A

1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020
Teleservice
Effective as of 01-AUG-21

CARLSON, STEVEN, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Teleservice
Effective as of 01-APR-21

DO, HULBERT, MD

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-OCT-23

FERNANDEZ, GENARO, MD†

Provider ID: N/A

1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020
Effective as of 01-AUG-21

HOURLANI, RAYAN, MD†

Provider ID: N/A

300 S PIERCE ST STE 102
EL CAJON, CA 92020
Teleservice
Effective as of 01-JAN-21

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-SEP-22

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-APR-21

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-SEP-22

NAGHI, JESSE, MD†

Provider ID: N/A

1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020
Effective as of 01-AUG-21

NARAYANAN, MEENA, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-APR-21

NARAYANAN, MEENA, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-SEP-22

NISHIMURA, MARIN, MD

Provider ID: N/A

300 S PIERCE ST STE 102
EL CAJON, CA 92020
Teleservice
Effective as of 01-MAR-23

OMRAN, JAD, MD†

Provider ID: N/A

300 S PIERCE ST STE 102
EL CAJON, CA 92020
Teleservice
Effective as of 01-JAN-21

PARIKH, MILIND, DO†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-SEP-22

PONCE, SONIA, MD†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Effective as of 01-SEP-22

SARSAM, LUAY, MD

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-JUL-23

SHAH, KULIN, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-JAN-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-SEP-22

SHEREV, DIMITRI, MD†

Provider ID: N/A

1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020
Effective as of 01-AUG-21

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-JAN-23

YAU, STEPHEN, MD†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Teleservice
Effective as of 01-AUG-22

YAU, STEPHEN, MD†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Teleservice
Effective as of 01-MAR-23

ZAVARO, SUHAIL, MD†

Provider ID: N/A

300 S PIERCE ST STE 102
EL CAJON, CA 92020
Teleservice
Effective as of 01-JAN-21

**CERTIFIED
ACUPUNCTURIST**

LAROWE, ALEXISS, LAC†

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JUL-21

LAROWE, ALEXISS, LAC†

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JUL-21

LAROWE, ALEXISS, LAC†

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JUL-21

LAROWE, ALEXISS, LAC

Provider ID: N/A

470 N MOLLISON AVE
EL CAJON, CA 92021
Effective as of 01-MAY-23

LAROWE, ALEXISS, LAC

Provider ID: N/A

470 N MOLLISON AVE
EL CAJON, CA 92021
Effective as of 01-MAY-23

SLOAN, ERICA, LAC

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-MAR-24

SLOAN, ERICA, LAC

Provider ID: N/A

☒ 855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-MAR-24

**CERTIFIED NURSE
PRACTITIONER**

BRANNEN, MANDY, NP†

Provider ID: N/A

☒ 215 W MADISON AVE
EL CAJON, CA 92020

Effective as of 01-JAN-21

CARDENAS, MIRIAM, NPF

Provider ID: N/A

☒ 1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-OCT-23

CHUDACEK, JANET, NP†

Provider ID: N/A

☒ 215 W MADISON AVE
EL CAJON, CA 92020

Teleservice

Effective as of 01-JAN-21

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

☒ 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Teleservice

Effective as of 01-AUG-21

LUCKETT, DE COURCY, NP†

Provider ID: N/A

☒ 1580 N 2ND ST
EL CAJON, CA 92021

Effective as of 01-JAN-21

MAYOYO, MARILYNN, NP

Provider ID: N/A

☒ 300 S PIERCE ST STE 102
EL CAJON, CA 92020

Effective as of 01-MAY-23

MURRAY, CARLA, NP

Provider ID: N/A

☒ 855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-FEB-24

PIRTLE, KEYSHONE, NP†

Provider ID: N/A

☒ 5442 SYCUAN RD
EL CAJON, CA 92019

Effective as of 01-SEP-21

REAL, MARIA, NP

Provider ID: N/A

☒ 1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-OCT-23

REDDY, PRIYA, NP

Provider ID: N/A

☒ 1032 BROADWAY
EL CAJON, CA 92021

Effective as of 01-NOV-22

RENZAS, JENNIFER, NP

Provider ID: N/A

☒ 1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-JUL-21

RENZAS, JENNIFER, NP

Provider ID: N/A

☒ 165 S 1ST ST
EL CAJON, CA 92019

Teleservice

Effective as of 01-JUL-21

SIRLEAF, MASSANU, NP†

Provider ID: N/A

☒ 1351 BROADWAY
EL CAJON, CA 92021

Effective as of 01-JAN-21

WILLIAMS, BREAHA, NP

Provider ID: N/A

☒ 165 S 1ST ST
EL CAJON, CA 92019

Effective as of 01-DEC-21

WILLIAMS, SHANTRICE, NP

Provider ID: N/A

☒ 855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-FEB-23

WILLIAMS, BREAHA, NP

Provider ID: N/A

☒ 1032 BROADWAY
EL CAJON, CA 92021

Effective as of 01-DEC-21

YALDO, ATHMAR, NP†

Provider ID: N/A

☒ 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Teleservice

Effective as of 01-DEC-21

**CERTIFIED REGISTERED
NURSE MIDWIFE**

HAMMOND, HEATHER, CRNM†

Provider ID: N/A

☒ 855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-AUG-20

HAMMOND, HEATHER, CRNM

Provider ID: N/A

☒ 470 N MOLLISON AVE

EL CAJON, CA 92021
Effective as of 01-MAY-23

HAMMOND, HEATHER, CRNM†

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-JAN-24

CHIROPRACTOR

DORADO, SUE, DC

Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-OCT-23

DORADO, SUE, DC

Provider ID: N/A

165 S 1ST ST
EL CAJON, CA 92019

Teleservice

Effective as of 01-OCT-23

FULKS, ZACKARY, DC

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-MAY-23

HALEY, STEVEN, DC

Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-OCT-23

HALEY, STEVEN, DC

Provider ID: N/A

165 S 1ST ST
EL CAJON, CA 92019

Teleservice

Effective as of 01-OCT-23

MANSOUR, RASHAD, DC

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-MAR-23

MCCOWN, BARRY, DC

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-MAY-23

ZECHA, RONALD, DC

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-JUL-22

DERMATOLOGY

BARRIO, VICTORIA, MD

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Teleservice

Effective as of 01-MAR-24

BROGAN, JACQUELINE, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JAN-21

BROGAN, JACQUELINE, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JUL-22

BROGAN, JACQUELINE, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-OCT-21

CELANO, NICHOLAS, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JUL-22

CELANO, NICHOLAS, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JAN-21

CELANO, NICHOLAS, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JAN-21

CELANO, NICHOLAS, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-SEP-22

CHIANG, JENNIFER, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-SEP-22

CHIANG, JENNIFER, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JAN-21

CHIANG, JENNIFER, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JAN-21

CHIANG, JENNIFER, MD†

Provider ID: N/A

292 AVOCADO AVE

EL CAJON, CA 92020
Effective as of 01-MAR-18

CHIANG, JENNIFER, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-JUL-22

GONZALEZ, JOSE, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020
Teleservice
Effective as of 01-JAN-24

GONZALEZ, JOSE, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020
Teleservice
Effective as of 01-MAY-23

GONZALEZ, JOSE, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020
Teleservice
Effective as of 01-AUG-22

GORDON, JUSTIN, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-AUG-22

GORDON, JUSTIN, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-APR-22

HANSEN, DOYLE, MD†

Provider ID: N/A

1679 E MAIN ST STE 208
EL CAJON, CA 92021
Effective as of 01-JAN-14

KASSAB, GHADA, MD

Provider ID: N/A

330 S MAGNOLIA AVE
EL CAJON, CA 92020
Effective as of 01-JAN-21

KASSAB, GHADA, MD

Provider ID: N/A

624 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-MAR-23

KASSAB, GHADA, MD

Provider ID: N/A

624 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-JUL-23

LIN, SHINKO, MD

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020
Teleservice
Effective as of 01-MAR-24

NELSON, AISLYN, MD

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-JAN-24

SATEESH, BROOKE, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-MAR-16

SATEESH, BROOKE, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JUL-22

SATEESH, BROOKE, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-JAN-21

SATEESH, BROOKE, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-SEP-22

TYAGI, ABHILASHA, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-SEP-22

TYAGI, ABHILASHA, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-AUG-22

TYAGI, ABHILASHA, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-APR-22

UEBELHOER, NATHAN, DO†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-FEB-22

UEBELHOER, NATHAN, DO†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-JUL-22

UEBELHOER, NATHAN, DO†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-JAN-24

EMERGENCY MEDICINE

WANG, JOYCE, MD†

Provider ID: N/A
875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-JUL-22

YAU, STEPHEN, MD†

Provider ID: N/A
328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Teleservice
Effective as of 01-APR-23

FAMILY PRACTICE

SHAFT, ALEXANDER, MD†

Provider ID: N/A
463 N MAGNOLIA AVE
EL CAJON, CA 92020
Teleservice
Effective as of 01-FEB-23

SHAFT, ALEXANDER, MD†

Provider ID: N/A
463 N MAGNOLIA AVE
EL CAJON, CA 92020
Teleservice
Effective as of 01-OCT-21

GASTROENTEROLOGY

CUBAS, IVAN, MD†

Provider ID: N/A
2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JUL-18

DESTA, TADDESE, MD†

Provider ID: N/A
2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JUL-18

HASSANEIN, TAREK, MD†

Provider ID: N/A
463 N MAGNOLIA AVE
EL CAJON, CA 92020
Teleservice
Effective as of 01-MAR-18

HASSANEIN, TAREK, MD†

Provider ID: N/A
463 N MAGNOLIA AVE
EL CAJON, CA 92020
Teleservice
Effective as of 01-FEB-21

HASSANEIN, TAREK, MD†

Provider ID: N/A
463 N MAGNOLIA AVE STE
A
EL CAJON, CA 92020
Effective as of 01-DEC-20

HASSANEIN, TAREK, MD†

Provider ID: N/A
463 N MAGNOLIA AVE
EL CAJON, CA 92020
Teleservice
Effective as of 01-SEP-22

NOVO, MEGAN, MD

Provider ID: N/A
2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JAN-23

NOVO, MEGAN, MD

Provider ID: N/A
2732 NAVAJO RD STE 200
EL CAJON, CA 92020

Effective as of 01-MAY-23

SCHAEFFER, CYNTHIA, MD†

Provider ID: N/A
2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JUL-18

SHAFFER, KATHERINE, MD†

Provider ID: N/A
2732 NAVAJO RD STE 201
EL CAJON, CA 92020
Effective as of 01-JAN-21

THOMAS, CARLTON, MD†

Provider ID: N/A
2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JUL-18

GENERAL PRACTICE

ALSHAMMARY, MOHAMMED, MD

Provider ID: N/A
855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-MAY-23

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE, MA†

Provider ID: N/A
1767 E MAIN ST
EL CAJON, CA 92021
Effective as of 01-SEP-22

DANDURAND, JOHN, MA†

Provider ID: N/A
1767 E MAIN ST
EL CAJON, CA 92021
Teleservice
Effective as of 01-JAN-21

DAVIS, KELLE, MA[†]

Provider ID: N/A

1767 E MAIN ST
EL CAJON, CA 92021
Effective as of 01-SEP-22

DAVIS, KELLE, MA[†]

Provider ID: N/A

1767 E MAIN ST
EL CAJON, CA 92021
Effective as of 01-JAN-21

INTERNAL MEDICINE

AWDISHO, ALAN, DO[†]

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Teleservice
Effective as of 01-SEP-22

MANSOUR, DAVID, DO[†]

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-AUG-22

MAY, LOUIS, MD[†]

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-DEC-22

MICHAEL, RAMI, MD[†]

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Teleservice
Effective as of 01-NOV-22

OLIVER, DEANNA, MD[†]

Provider ID: N/A

463 N MAGNOLIA AVE
EL CAJON, CA 92020

Effective as of 01-MAR-21

OLIVER, DEANNA, MD[†]

Provider ID: N/A

463 N MAGNOLIA AVE
EL CAJON, CA 92020*
Effective as of 01-OCT-22

**INTERVENTIONAL
CARDIOLOGY**

JOHN, ALAN, MD

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-MAY-23

KAFRI, HASSAN, MD[†]

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-JUL-22

KAFRI, HASSAN, MD[†]

Provider ID: N/A

436 S MAGNOLIA AVE STE
101
EL CAJON, CA 92020
Effective as of 01-JUL-22

NAGHI, JESSE, MD[†]

Provider ID: N/A

1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020
Effective as of 01-JAN-24

RUBIO GARCIA, MANOLO, MD[†]

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-DEC-22

SHAH, KULIN, MD[†]

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-APR-23

SUDHAKAR, DEEPTHI, MD[†]

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-APR-23

**LICENSED CLINICAL
SOCIAL WORKER**

FRAGOSO, DOMINIQUE, LCSW

Provider ID: N/A

215 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JAN-24

**ORLANDO, FRANCESCA,
LCSW**

Provider ID: N/A

215 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-FEB-23

TAYAG, DYLAN, LCSW[†]

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-SEP-22

TAYLOR, MISTY, LCSW

Provider ID: N/A

5442 SYCUAN RD
EL CAJON, CA 92019
Effective as of 01-FEB-24

WELSH, BRITT, LCSW[†]

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-FEB-21

MARRIAGE FAMILY

THERAPIST

ARNOLD, REBECCA, MFT

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-FEB-24

ESTAVILLO, SAUL, MFT

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-AUG-23

OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER, MD

Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-OCT-23

AL-MSHHDANI, AYSER, MD

Provider ID: N/A

165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-OCT-23

BULLOCH, EDGAR, MD†

Provider ID: N/A

133 W MAIN ST STE 100
EL CAJON, CA 92020
Effective as of 01-JUN-22

DAVIS, TRACIE, MD

Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-OCT-23

DAVIS, TRACIE, MD

Provider ID: N/A

165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-OCT-23

FOLCH TORRES-AGUIAR, BEATRIZ, MD†

Provider ID: N/A

165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-AUG-22

FOLCH TORRES-AGUIAR, BEATRIZ, MD†

Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-AUG-22

FULFORD, KEVIN, MD†

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JUL-22

GELLENS, ANDREW, MD†

Provider ID: N/A

165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-NOV-21

GELLENS, ANDREW, MD†

Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-NOV-21

MENDEZ, DIEGO, MD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-JUL-22

SEAVEY, MICHELLE, MD

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-DEC-23

STABEN, REBECCA, DO†

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JUL-22

TAJРАН, DEENA, MD†

Provider ID: N/A

291 E LEXINGTON AVE STE
AC
EL CAJON, CA 92020
Effective as of 01-JAN-21

OCCUPATIONAL THERAPIST

JOHNSTON, LAUREN, OT†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-JUL-22

OPHTHALMOLOGY

ABDALLAH, WALID, MD

Provider ID: N/A

231 W MAIN ST
EL CAJON, CA 92020
Effective as of 01-FEB-24

BINDER, NICHOLAS, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-FEB-24

BINDER, NICHOLAS, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-DEC-23

BINDER, NICHOLAS, MD

Provider ID: N/A

450 FLETCHER PKWY STE
112
EL CAJON, CA 92020

Effective as of 01-NOV-23

BINDER, NICHOLAS, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-NOV-23

BOECKMANN, JESSICA, MD†

Provider ID: N/A

450 FLETCHER PKWY
EL CAJON, CA 92020

Effective as of 01-JAN-21

HSU, CHRISTOPHER, MD†

Provider ID: N/A

225 W MADISON AVE STE 1
EL CAJON, CA 92020

Effective as of 01-SEP-22

HSU, CHRISTOPHER, MD

Provider ID: N/A

450 FLETCHER PKWY STE
112
EL CAJON, CA 92020

Effective as of 01-NOV-23

JARDON, JAVIER, MD†

Provider ID: N/A

436 S MAGNOLIA AVE STE
101
EL CAJON, CA 92020

Effective as of 01-JUL-22

MANI, NASRIN, MD†

Provider ID: N/A

436 S MAGNOLIA AVE STE
101
EL CAJON, CA 92020

Effective as of 01-JUL-22

MANI, NASRIN, MD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020

Effective as of 01-JUL-22

MCDONNELL, EMMA, MD†

Provider ID: N/A

231 W MAIN ST
EL CAJON, CA 92020

Effective as of 01-NOV-22

MOSS, JASON, MD†

Provider ID: N/A

436 S MAGNOLIA AVE STE
101
EL CAJON, CA 92020

Effective as of 01-JUL-22

**PAPASTERGIU, GEORGIOS,
MD†**

Provider ID: N/A

436 S MAGNOLIA AVE STE
101
EL CAJON, CA 92020

Effective as of 01-JUL-22

**PAPASTERGIU, GEORGIOS,
MD†**

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Teleservice

Effective as of 01-JUL-22

PATEL, GITANE, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-JAN-24

PATEL, SARJAN, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-JAN-24

PATEL, GITANE, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-DEC-23

PATEL, SARJAN, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-DEC-23

PATEL, SARJAN, MD†

Provider ID: N/A

450 FLETCHER PKWY STE
112
EL CAJON, CA 92020

Effective as of 01-DEC-23

PATEL, GITANE, MD

Provider ID: N/A

450 FLETCHER PKWY STE
112
EL CAJON, CA 92020

Effective as of 01-NOV-23

PONS, MAURICIO, MD†

Provider ID: N/A

231 W MAIN ST
EL CAJON, CA 92020

Effective as of 01-AUG-22

PONS, MAURICIO, MD†

Provider ID: N/A

436 S MAGNOLIA AVE STE 101
EL CAJON, CA 92020
Effective as of 01-JUL-22

PONS, MAURICIO, MD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-JUL-22

PRABHU, SUJATA, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-DEC-23

PRABHU, SUJATA, MD

Provider ID: N/A

450 FLETCHER PKWY STE 112
EL CAJON, CA 92020
Effective as of 01-NOV-23

SKAF, AYHAM, MD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-JUL-22

SKAF, AYHAM, MD†

Provider ID: N/A

436 S MAGNOLIA AVE STE 101
EL CAJON, CA 92020
Effective as of 01-JUL-22

ZHAO, TAILUN, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-JAN-24

ZHAO, TAILUN, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-NOV-23

ZHAO, TAILUN, MD

Provider ID: N/A

450 FLETCHER PKWY STE 112
EL CAJON, CA 92020
Effective as of 01-NOV-23

OPTOMETRIST

AOTO, KIM, OD†

Provider ID: N/A

450 FLETCHER PKWY STE 112
EL CAJON, CA 92020
Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A

450 FLETCHER PKWY STE 112
EL CAJON, CA 92020
Effective as of 01-DEC-23

DYER, SHARON, OD†

Provider ID: N/A

225 W MADISON AVE STE 1
EL CAJON, CA 92020
Effective as of 01-SEP-22

HAN, SUL KI, OD†

Provider ID: N/A

450 FLETCHER PKWY STE 112
EL CAJON, CA 92020
Effective as of 01-DEC-23

KHALIL, VADY, OD†

Provider ID: N/A

450 FLETCHER PKWY STE 112
EL CAJON, CA 92020

Effective as of 01-DEC-23

KHALIL, VADY, OD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-DEC-23

KOO, ANITA, OD

Provider ID: N/A

231 W MAIN ST
EL CAJON, CA 92020
Effective as of 01-JAN-24

KOO, ANITA, OD

Provider ID: N/A

231 W MAIN ST
EL CAJON, CA 92020
Effective as of 01-FEB-24

ZVANUT, DONALD, OD†

Provider ID: N/A

225 W MADISON AVE STE 1
EL CAJON, CA 92020
Effective as of 01-SEP-22

ZVANUT, DONALD, OD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-DEC-23

PHYSICIANS ASSISTANT

ALYAS, ALISIA, PA

Provider ID: N/A

165 S 1ST ST
EL CAJON, CA 92019
Teleservice

Effective as of 01-JUN-21

ALYAS, ALISIA, PA

Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-JUN-21

ESCALANTE, JUVY, PA

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-FEB-23

HABBOUSH, RANA, PA

Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-OCT-23

INDA, PRISCILLA, PA†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-JAN-21

INDA, PRISCILLA, PA†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-JAN-21

INDA, PRISCILLA, PA†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-JAN-21

MERCER, KELLY, PA†

Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-APR-21

MERCER, KELLY, PA†

Provider ID: N/A

165 S 1ST ST
EL CAJON, CA 92019

Teleservice

Effective as of 01-APR-21

ROSENBLATT, SHERI, PA

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020

Effective as of 01-JUN-23

RYAN, TYLER, PA†

Provider ID: N/A

463 N MAGNOLIA AVE STE
B
EL CAJON, CA 92020

Effective as of 01-DEC-22

PODIATRIST

FARMER, STEVEN, DPM†

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-JUL-21

PSYCHIATRY

DIA, ALI, MD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020

Teleservice

Effective as of 01-DEC-22

DIA, ALI, MD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020

Teleservice

Effective as of 01-DEC-22

KURZ, TROY, MD†

Provider ID: N/A

133 W MAIN ST STE 100
EL CAJON, CA 92020

Effective as of 01-OCT-22

KURZ, TROY, MD†

Provider ID: N/A

133 W MAIN ST STE 100
EL CAJON, CA 92020

Effective as of 01-OCT-22

MATIALEU, LEOPOLDINE, MD

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-DEC-22

MATIALEU, LEOPOLDINE, MD

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-DEC-22

MATIALEU, LEOPOLDINE, MD

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-JUL-22

MATIALEU, LEOPOLDINE, MD

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-DEC-22

MATIALEU, LEOPOLDINE, MD

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-DEC-22

MATIALEU, LEOPOLDINE, MD

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-JUL-22

**POSTLETHWAITE,
ALEJANDRA, MD†**

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JAN-24

**POSTLETHWAITE,
ALEJANDRA, MD†**

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JAN-24

SADDA, REEM, MD

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-MAR-24

SADDA, REEM, MD

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-MAR-24

SANDERS, ROBERT, DO†

Provider ID: N/A

225 W MADISON AVE STE 2
EL CAJON, CA 92020
Effective as of 01-OCT-22

SANDERS, ROBERT, DO†

Provider ID: N/A

225 W MADISON AVE STE 2
EL CAJON, CA 92020
Effective as of 01-OCT-22

PSYCHOLOGIST

ARAIZA, ERNESTINA, PSYD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020

Effective as of 01-AUG-21

ARAIZA, ERNESTINA, PSYD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-AUG-21

RADIOLOGY DIAGNOSTIC

MOSHFEGH, AMIEL, MD†

Provider ID: N/A

463 N MAGNOLIA AVE STE
B
EL CAJON, CA 92020
Effective as of 01-SEP-22

**REGISTERED PHYSICAL
THERAPIST**

DASCENZO, EMILY, PT†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Teleservice
Effective as of 01-JUL-22

GRAHEK, LAICEE, PT

Provider ID: N/A

181 JAMACHA RD
EL CAJON, CA 92019
Effective as of 01-JUL-22

LONG, RYAN, PT

Provider ID: N/A

181 JAMACHA RD
EL CAJON, CA 92019
Effective as of 01-JUL-22

MANDERSON, MARY, PT

Provider ID: N/A

1246 E MAIN ST STE 109
EL CAJON, CA 92021
Effective as of 01-JUL-22

MIGNEA, DAVID, PT

Provider ID: N/A

181 JAMACHA RD
EL CAJON, CA 92019
Effective as of 01-JUL-22

SURGERY ORTHOPEDIC

NOURI, LABEED, MD

Provider ID: N/A

330 S MAGNOLIA AVE STE
302
EL CAJON, CA 92020
Effective as of 01-JAN-21

CERTIFIED NURSE

PRACTITIONER

TORIOLA, ABIODUN, NP

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
EL TORO, CA 92630
Effective as of 01-JUL-23

**ANESTHESIOLOGY PAIN
MANAGEMENT**

DAIRO, BRANDON, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE B301
ENCINITAS, CA 92024
Effective as of 01-DEC-20

CARDIAC

ELECTROPHYSIOLOGY

HAMZEI, ALI, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

WHITWAM, WAYNE, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-AUG-22

CARDIOLOGY

BHATIA, PRERANA, MD

Provider ID: N/A

477 N EL CAMINO REAL
ENCINITAS, CA 92024
Effective as of 01-AUG-23

WHITWAM, WAYNE, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-NOV-20

**CARDIOVASCULAR
DISEASE**

AVALOS, ROY, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

BACKMAN, JOHN, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

BULIBEK, BATYRJAN, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

CARTER, STEPHANIE, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE

204

ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-21

CARTER, STEPHANIE, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
204
ENCINITAS, CA 92024

Teleservice

Effective as of 01-SEP-21

CARTER, STEPHANIE, MD†

Provider ID: N/A

354 SANTA FE DR
ENCINITAS, CA 92024
Effective as of 01-JUN-21

HARRINGTON, JOHN, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
204
ENCINITAS, CA 92024

Effective as of 01-MAR-22

HARRINGTON, JOHN, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
204
ENCINITAS, CA 92024

Effective as of 01-MAR-22

JACOBY, RICHARD, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
204
ENCINITAS, CA 92024

Effective as of 01-JAN-21

KULHANEK, JAN, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

MCGINTY, PATRICK, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

MEHBOOB, SALMAN, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
204
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-21

RASCH, DAMIAN, DO†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

SAB, SHIV, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Teleservice

Effective as of 01-DEC-22

SAB, SHIV, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Teleservice

Effective as of 01-JUN-22

SHEREV, DIMITRI, MD

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Effective as of 01-SEP-23

CERTIFIED

ACUPUNCTURIST

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-FEB-24

GONZALEZ, ANDRES, LAC

Provider ID: N/A

1130 2ND ST
ENCINITAS, CA 92024
Effective as of 01-MAY-23

JULIAN, FIDES, LAC

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-FEB-24

MURRAY, STEVEN, LAC†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-AUG-21

TANG-RITCHIE, LENG, LAC†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-21

CERTIFIED NURSE

PRACTITIONER

BINAVI, HOWNAZ, NP†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-SEP-22

CARDINELL, ANNA, NP†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-AUG-22

CHAMBERS, KATRINA, NP

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-23

DWYER, ERIN, NP

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-JAN-24

FAIQ, JAMILA, NP†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024

Teleservice

Effective as of 01-NOV-22

FAIQ, JAMILA, NP†

Provider ID: N/A

477 N EL CAMINO REAL
STE D200
ENCINITAS, CA 92024

Effective as of 01-JAN-21

HERR, COLLEEN, NP

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024

Effective as of 01-JAN-21

HOOPER, BONNIE, NP†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-JAN-21

HOOPER, BONNIE, NP†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-JAN-21

KORMANIK, PATRICIA, NP†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUL-21

LOWE, ASHLEY, NP

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Teleservice

Effective as of 01-JUL-23

MAROSOK, MICHELLE, NP

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice

Effective as of 01-NOV-23

MOONEY, PATRICIA, NP†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice

Effective as of 01-MAY-21

MOONEY, PATRICIA, NP†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice

Effective as of 01-JAN-24

MORENO, KATHERINE, NP

Provider ID: N/A

700 GARDEN VIEW CT STE
204

ENCINITAS, CA 92024
Teleservice
Effective as of 01-DEC-23

MWAURA, WAIRIMU, NP†

Provider ID: N/A
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

MWAURA, WAIRIMU, NP†

Provider ID: N/A
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUN-21

MYERS, JESSE, NP

Provider ID: N/A
477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024
Effective as of 01-JAN-21

NIZHEBORSKY, OKSANA, NP†

Provider ID: N/A
320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

PACHOE, MADISON, NP

Provider ID: N/A
477 N EL CAMINO REAL
STE A200
ENCINITAS, CA 92024
Teleservice
Effective as of 01-DEC-21

POLIZZI, BRITTANY, NP†

Provider ID: N/A
477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-JAN-22

POLIZZI, BRITTANY, NP†

Provider ID: N/A
477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-SEP-22

SRILASAK, MICHELE, NP†

Provider ID: N/A
1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUL-21

SYMANSKI, ELIZABETH, NP†

Provider ID: N/A
477 N EL CAMINO REAL
STE A200
ENCINITAS, CA 92024
Effective as of 01-AUG-22

TOMICICH, STEPHANIE, NP†

Provider ID: N/A
320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-DEC-21

WILLEY, MARTI, NP†

Provider ID: N/A
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUN-21

WILLEY, MARTI, NP†

Provider ID: N/A
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

WOODRUFF, WHITNEY, NP

Provider ID: N/A

700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-JAN-21

WOODRUFF, WHITNEY, NP

Provider ID: N/A
781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-MAR-23

WOODRUFF, WHITNEY, NP

Provider ID: N/A
781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-MAR-23

YEO, ALEXANDRIA, NP

Provider ID: N/A
1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Effective as of 01-JUN-23

**CERTIFIED REGISTERED
NURSE ANESTHETIST**

ASHMAN, RANDY, CRNA

Provider ID: N/A
781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUL-23

ESTABROOK, LARA, CRNA

Provider ID: N/A
320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-JUL-23

ESTABROOK, LARA, CRNA

Provider ID: N/A
781 GARDEN VIEW CT STE

100
ENCINITAS, CA 92024
Effective as of 01-JUL-23

FITZPATRICK, APRIL, CRNA

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-MAR-23

FITZPATRICK, APRIL, CRNA

Provider ID: N/A

781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-MAR-23

KING, APRIL, CRNA

Provider ID: N/A

781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-MAR-23

KING, APRIL, CRNA

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-MAR-23

KING, APRIL, CRNA†

Provider ID: N/A

700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-JAN-21

LAZARUS, ELIZABETH, CRNA

Provider ID: N/A

781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-JUL-23

**CERTIFIED REGISTERED
NURSE MIDWIFE**

CORRY, ANDREA, CRNM

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-SEP-23

**ELY-KONOSKE, RACHEL,
CRNM**

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

CHIROPRACTOR

TRAINER, JASON, DC

Provider ID: N/A

1130 2ND ST
ENCINITAS, CA 92024
Effective as of 01-MAR-24

DERMATOLOGY

ANGRA, KUNAL, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUL-21

ANGRA, KUNAL, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUL-21

BRAUN, TARA, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-24

BROUHA, BROOK, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-NOV-23

BROUHA, BROOK, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-JAN-24

GLADSJO, JULIE, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-JAN-21

GLADSJO, JULIE, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-SEP-22

GLADSJO, JULIE, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-SEP-22

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

285 N EL CAMINO REAL
STE 117

ENCINITAS, CA 92024
Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE 117
ENCINITAS, CA 92024
Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE 117
ENCINITAS, CA 92024
Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE 117
ENCINITAS, CA 92024
Effective as of 01-JAN-24

HEMPERLY, STEPHEN, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Teleservice
Effective as of 01-NOV-23

HEMPERLY, STEPHEN, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-21

RILEY, JESSICA, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-JAN-21

RILEY, JESSICA, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-AUG-20

RILEY, JESSICA, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-SEP-22

**ENDOCRINOLOGY
METABOLISM DIABETES**

SHAH, NANDI, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-JAN-24

FAMILY PRACTICE

ANDERSON, LINDSEY, DO†

Provider ID: N/A

1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Effective as of 01-AUG-23

ESTRADA, JOHANNA, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Effective as of 01-AUG-21

GASTROENTEROLOGY

ALHANKAWI, DHUHA, MD

Provider ID: N/A

477 N EL CAMINO REAL

STE A308

ENCINITAS, CA 92024
Effective as of 01-APR-23

ALHANKAWI, DHUHA, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024
Effective as of 01-AUG-23

BORTNIKER, ETHAN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-DEC-23

BORTNIKER, ETHAN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-JUN-23

BORTNIKER, ETHAN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-JUN-23

BORTNIKER, ETHAN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-JUN-23

BORTNIKER, ETHAN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-MAR-24

DILAURO, STEVEN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024

Teleservice

Effective as of 01-OCT-23

DILAURO, STEVEN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-23

DILAURO, STEVEN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
102

ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-23

DILAURO, STEVEN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-24

DILAURO, STEVEN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-23

GOLDKLANG, ROBERT, MD

Provider ID: N/A

781 GARDEN VIEW CT STE

100

ENCINITAS, CA 92024

Effective as of 01-MAR-23

GOLDKLANG, ROBERT, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024

Effective as of 01-JAN-24

GOLDKLANG, ROBERT, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
102

ENCINITAS, CA 92024

Effective as of 01-APR-23

GOLDKLANG, ROBERT, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
102

ENCINITAS, CA 92024

Effective as of 01-JAN-21

GOLDKLANG, ROBERT, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
102

ENCINITAS, CA 92024

Effective as of 01-MAR-23

GOLDKLANG, ROBERT, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024

Effective as of 01-OCT-23

LAJOIE, ADRIANNE, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024

Effective as of 01-OCT-23

LAJOIE, ADRIANNE, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
102

ENCINITAS, CA 92024

Effective as of 01-MAR-23

LAJOIE, ADRIANNE, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
102

ENCINITAS, CA 92024

Effective as of 01-JAN-21

LAJOIE, ADRIANNE, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024

Effective as of 01-JAN-24

LAJOIE, ADRIANNE, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024

Effective as of 01-JUN-23

LAJOIE, ADRIANNE, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024

Effective as of 01-MAR-23

MADANI, BAHAR, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE A308

ENCINITAS, CA 92024

Effective as of 01-FEB-22

PATEL, JANKI, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-FEB-24

PATEL, JANKI, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-21

PATEL, JANKI, MD

Provider ID: N/A

700 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAR-23

PATEL, JANKI, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-21

PATEL, JANKI, MD

Provider ID: N/A

700 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUN-23

PATEL, JANKI, MD

Provider ID: N/A

354 SANTA FE DR
ENCINITAS, CA 92024
Effective as of 01-FEB-24

SINGH, MARVIN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-JUN-23

SINGH, MARVIN, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-APR-18

GENERAL DENTISTRY

MEHROTRA, SACHI, DDS

Provider ID: N/A

4403 MANCHESTER AVE
STE 101
ENCINITAS, CA 92024
Effective as of 01-OCT-21

**GYNECOLOGIC
ONCOLOGY**

ESKANDER, RAMEZ, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUL-21

**HEMATOLOGY /
ONCOLOGY**

BESSUDO, ALBERTO, MD†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-21

BESSUDO, ALBERTO, MD†

Provider ID: N/A

326 SANTA FE DR STE 105

ENCINITAS, CA 92024
Teleservice
Effective as of 01-APR-21

FLORES, EDNA, MD†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Effective as of 01-JAN-24

SULLIVAN, JESSICA, DO†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

**HOSPICE AND PALLIATIVE
MEDICINE**

RUBENSIK, TAMARA, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 100
ENCINITAS, CA 92024
Effective as of 01-FEB-21

RUBENSIK, TAMARA, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUL-21

INTERNAL MEDICINE

BAUTISTA, JENNIFER, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-DEC-20

BAUTISTA, JENNIFER, MD†

Provider ID: N/A

320 SANTA FE DR STE
107-C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

DELANEY, CODY, DO†

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*

Teleservice

Effective as of 01-OCT-22

DESGRANGES, PATRICK, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*

Teleservice

Effective as of 01-NOV-21

EISMAN, SCOTT, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-FEB-22

ELHOFY, ASHRAF, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*

Effective as of 01-JAN-21

ELLIS, ADAM, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*

Effective as of 01-JAN-21

KHAYYAT, OMAR, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE
220

ENCINITAS, CA 92024*
Effective as of 01-AUG-21

LIU, STEVEN, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE
220

ENCINITAS, CA 92024*
Effective as of 01-JAN-21

LIU, ANDREW, MD

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Effective as of 01-SEP-23

MCMURRAY, SARAH, DO†

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*

Effective as of 01-JAN-21

MOOLANI, UJJALA, MD

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Effective as of 01-MAY-23

NARDI, MELISSA, DO†

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*

Effective as of 01-JAN-21

NELKIN, CORY, DO†

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*

Teleservice

Effective as of 01-OCT-21

NGUYEN, ANDY, DO†

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*

Effective as of 01-JAN-21

NGUYEN, ALEXIE, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024

Effective as of 01-JAN-21

PHAM, STEVEN, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*

Teleservice

Effective as of 01-NOV-21

RUMMANI, BENNY, DO†

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*

Effective as of 01-JUL-21

STEADMAN, MICHAEL, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*

Effective as of 01-JAN-21

TRAN, AMY, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*

Effective as of 01-JAN-21

TRAN, SHERI, MD†

Provider ID: N/A

326 SANTA FE DR STE 100

ENCINITAS, CA 92024
Effective as of 01-APR-21

TRING, ELEANOR, DO†

Provider ID: N/A

662 ENCINITAS BLVD STE
220

ENCINITAS, CA 92024*

Effective as of 01-JUL-21

**INTERNAL MEDICINE
CRITICAL CARE MEDICINE**

FUSSELL, KEVIN, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-JUL-21

PINO, ALEJANDRO, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-JUL-21

SHIN, STEPHANIE, MD†

Provider ID: N/A

320 SANTA FE DR STE
107-C

ENCINITAS, CA 92024

Effective as of 01-JAN-21

TRAN, SHERI, MD†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024

Effective as of 01-JAN-21

ZHANG, MICHELLE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAY-22

**INTERVENTIONAL
CARDIOLOGY**

JACOBY, RICHARD, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
204

ENCINITAS, CA 92024

Effective as of 01-SEP-21

MEHBOOB, SALMAN, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
204

ENCINITAS, CA 92024

Teleservice

Effective as of 01-SEP-21

**LICENSED CLINICAL
SOCIAL WORKER**

REBELO, MARCIA, LCSW

Provider ID: N/A

187 CALLE MAGDALENA
STE 212

ENCINITAS, CA 92024

Effective as of 01-OCT-23

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Effective as of 01-MAY-23

LAKHERA, YOGITA, MD†

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-21

LAKHERA, YOGITA, MD†

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-24

LAKHERA, YOGITA, MD†

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUL-22

LAKHERA, YOGITA, MD†

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-17

STEER, DYLAN, MD†

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Effective as of 01-JAN-21

NEUROLOGY

BAKER, DAVID, DO

Provider ID: N/A

354 SANTA FE DR
ENCINITAS, CA 92024

Effective as of 01-JAN-24

SCHORR, EMILY, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-MAR-24

**OBSTETRICS /
GYNECOLOGY**

BINDER, PRATIBHA, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024

Effective as of 01-JUL-21

DELCORE, LAURA, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024

Effective as of 01-SEP-22

DRIEBE, AMY, MD†

Provider ID: N/A

1505 ENCINITAS BLVD
ENCINITAS, CA 92024

Effective as of 01-SEP-22

HILL, KAITLYN, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE C208
ENCINITAS, CA 92024

Teleservice

Effective as of 01-SEP-21

HILL, KAITLYN, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE C208
ENCINITAS, CA 92024

Teleservice

Effective as of 01-APR-23

MACKAY, GILLIAN, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-23

SPRING ROBINSON,

CHANDRA, DO

Provider ID: N/A

477 N EL CAMINO REAL
STE C208
ENCINITAS, CA 92024

Effective as of 01-JAN-23

ONCOLOGY MEDICAL

FLORES, EDNA, MD†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024

Effective as of 01-JAN-21

FRAKES, LAURIE, MD†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-24

FRAKES, LAURIE, MD†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-21

MCCLAY, EDWARD, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE D200
ENCINITAS, CA 92024

Effective as of 01-JAN-21

MCCLAY, EDWARD, MD†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024

Effective as of 01-FEB-21

OPHTHALMOLOGY

FISH, STEVEN, MD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Effective as of 01-APR-23

FISH, STEVEN, MD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Effective as of 01-APR-23

FISH, STEVEN, MD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Effective as of 01-APR-23

FISH, STEVEN, MD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Effective as of 01-APR-23

HUDSON, HENRY, MD†

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Effective as of 01-APR-22

JOHNSTON, ERIC, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE C202
ENCINITAS, CA 92024

Effective as of 01-MAY-21

MCGRAW, JOSEPH, MD†

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-NOV-21

SAMUEL, MICHAEL, MD†

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-MAR-21

SAMUEL, MICHAEL, MD†

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-FEB-21

VIECHNICKI, TARA, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE C202
ENCINITAS, CA 92024
Effective as of 01-DEC-11

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-JAN-21

ZHAO, TAILUN, MD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-NOV-23

ZHAO, TAILUN, MD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-JUL-23

ZHAO, TAILUN, MD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-JAN-24

OPTOMETRIST

CAO-NGUYEN, TIEN, OD

Provider ID: N/A

477 N EL CAMINO REAL
STE C202
ENCINITAS, CA 92024
Effective as of 01-JUL-23

DEAN, MOENA, OD†

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-JUL-21

DEAN, MOENA, OD†

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-SEP-22

MARR, RYAN, OD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-DEC-22

SOLIS, KEVIN, OD

Provider ID: N/A

477 N EL CAMINO REAL
STE C202
ENCINITAS, CA 92024
Effective as of 01-JUN-23

TAN, CONNIE, OD

Provider ID: N/A

477 N EL CAMINO REAL
STE C202
ENCINITAS, CA 92024
Effective as of 01-JUN-21

**ORAL MAXILLOFACIAL
SURGEON**

ELI, BRADLEY, DMD

Provider ID: N/A

4403 MANCHESTER AVE
STE 101
ENCINITAS, CA 92024
Teleservice
Effective as of 01-SEP-20

OTOLARYNGOLOGY

REUTHER, MARSHA, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024
Effective as of 01-JAN-21

PEDIATRICS

KOOROS, KOOROSH, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024
Effective as of 01-FEB-22

ZACHRY, ALISON, MD†

Provider ID: N/A

1130 2ND ST
ENCINITAS, CA 92024
Effective as of 01-SEP-22

PHYSICIANS ASSISTANT

DAS, GOURAB, PA

Provider ID: N/A

477 N EL CAMINO REAL
STE A200
ENCINITAS, CA 92024
Effective as of 01-JAN-21

DOUGHERTY, CLARA, PA†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-FEB-24

DOUGHERTY, CLARA, PA†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-SEP-22

GILLAN, JAMES, PA†

Provider ID: N/A

320 SANTA FE DR STE
107-C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

HIGGINS, JOSHUA, PA†

Provider ID: N/A

1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Effective as of 01-JAN-22

PELIO, DARREN, PA†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-SEP-22

VANETSKY, GARY, PA†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-JAN-21

VANETSKY, GARY, PA†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-JAN-21

PODIATRIST

BERGER, COLBY, DPM

Provider ID: N/A

501 N EL CAMINO REAL
STE 201
ENCINITAS, CA 92024
Effective as of 01-APR-23

BERGER, COLBY, DPM

Provider ID: N/A

501 N EL CAMINO REAL
STE 201
ENCINITAS, CA 92024
Effective as of 01-JUN-23

DUSTIN, ADAM, DPM†

Provider ID: N/A

326 ENCINITAS BLVD STE
100
ENCINITAS, CA 92024
Effective as of 01-FEB-21

GILLES, LOUIS, DPM

Provider ID: N/A

320 SANTA FE DR STE 305
ENCINITAS, CA 92024
Effective as of 01-AUG-23

KREPS, CHRISTOPHER, DPM

Provider ID: N/A

501 N EL CAMINO REAL
STE 201
ENCINITAS, CA 92024
Effective as of 01-JUN-23

KREPS, CHRISTOPHER, DPM

Provider ID: N/A

501 N EL CAMINO REAL
STE 201
ENCINITAS, CA 92024
Effective as of 01-DEC-23

LIEBERMAN, RONALD, DPM

Provider ID: N/A

501 N EL CAMINO REAL

STE 201

ENCINITAS, CA 92024
Effective as of 01-DEC-23

LIEBERMAN, RONALD, DPM†

Provider ID: N/A

1011 DEVONSHIRE DR STE F
ENCINITAS, CA 92024
Effective as of 01-AUG-15

RUETENIK, BRAD, DPM

Provider ID: N/A

501 N EL CAMINO REAL
STE 201
ENCINITAS, CA 92024
Effective as of 01-DEC-23

PSYCHOLOGIST

GOMEZ, JUANITA, PhD†

Provider ID: N/A

1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Effective as of 01-AUG-22

GOMEZ, JUANITA, PhD†

Provider ID: N/A

1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Effective as of 01-AUG-22

PULMONARY DISEASES

EISMAN, SCOTT, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-NOV-20

FUSSELL, KEVIN, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-22

GADRE, ABHISHEK, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-22

GADRE, ABHISHEK, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-JUL-21

HSING, ANDREW, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-JAN-24

HSING, ANDREW, MD†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

LIANG, NI-CHENG, MD†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

LIANG, NI-CHENG, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-NOV-20

MAGANA, MARISA, MD†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

MAGANA, MARISA, MD†

Provider ID: N/A

326 SANTA FE DR STE 100

ENCINITAS, CA 92024

Effective as of 01-APR-23

MAKANI, SAMIR, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-APR-23

MAKANI, SAMIR, MD†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

MAKANI, SAMIR, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-NOV-20

PINO, ALEJANDRO, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-22

SARNOFF, ROBERT, MD†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

SARNOFF, ROBERT, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-APR-21

SHIN, STEPHANIE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-DEC-20

TRAN, SHERI, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-23

ZHANG, MICHELLE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

ZHANG, MICHELLE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-APR-23

ZHANG, MICHELLE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-SEP-23

RADIATION ONCOLOGY

BEAR, JONATHAN, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-JUN-23

HATTANGADI GLUTH, JONA, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024
Effective as of 01-DEC-23

HORN, ADAM, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-JUN-23

MACEWAN, IAIN, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024
Effective as of 01-DEC-23

MANSY, GINA, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

MAYADEV, JYOTI, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024
Effective as of 01-DEC-23

MELL, LOREN, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

MURPHY, JAMES, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-DEC-23

RAHN, DOUGLAS, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

ROSE, BRENT, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024
Effective as of 01-DEC-23

SANDHU, AJAY, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

SEIBERT, TYLER, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024
Effective as of 01-DEC-23

SHARABI, ANDREW, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

SIMPSON, DANIEL, MD

Provider ID: N/A

1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024
Effective as of 01-DEC-23

STRAKA, CHRISTOPHER, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

TYE, KAREN, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-JUN-23

WHITE, EVAN, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

YASHAR, CATHERYN, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

**REGISTERED DIETITIAN /
NUTRITIONIST**

SALCEDO, ALEXANDRA, RD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-JAN-24

**REGISTERED PHYSICAL
THERAPIST**

DOULL, MATTHEW, PT

Provider ID: N/A

351 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUN-23

TAMAYO, SYDNIE, PT

Provider ID: N/A

351 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-OCT-23

SLEEP MEDICINE

MENN, STUART, MD

Provider ID: N/A

4403 MANCHESTER AVE
STE 101
ENCINITAS, CA 92024

Effective as of 01-MAR-23

**SURGERY COLON
SURGERY**

PARRY, LISA, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE 200
ENCINITAS, CA 92024

Effective as of 01-APR-21

SCHULTZEL, MATTHEW, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024

Effective as of 01-JAN-21

SURGERY GENERAL

ARMANI, AVA, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024

Effective as of 01-JUL-21

BURGESS, DANIEL, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-21

BURGESS, DANIEL, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE C204
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-21

BURGESS, DANIEL, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024

Teleservice

Effective as of 01-OCT-23

BURGESS, DANIEL, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE C204
ENCINITAS, CA 92024

Teleservice

Effective as of 01-OCT-23

JACOBSEN, GARTH, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-21

RAYAN, SUNIL, MD†

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Effective as of 01-AUG-15

SCHULTZEL, MATTHEW, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE C204
ENCINITAS, CA 92024

Effective as of 01-JUL-20

**SURGERY GENERAL
VASCULAR**

RAYAN, SUNIL, MD†

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Effective as of 01-JAN-21

SURGERY ORTHOPEDIC

AFRA, ROBERT, MD†

Provider ID: N/A

317 N EL CAMINO REAL STE
405
ENCINITAS, CA 92024

Effective as of 01-JAN-16

BREMNER, LUKE, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Effective as of 01-DEC-19

BREMNER, LUKE, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Effective as of 01-MAR-23

CHAN, JUSTIN, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-AUG-20

CHAN, JUSTIN, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-23

GROTING, JOHN, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE B301
ENCINITAS, CA 92024

Effective as of 01-NOV-23

HAJNIK, CHRISTOPHER, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-DEC-19

HAJNIK, CHRISTOPHER, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-23

HAMMEL, NATHAN, MD†

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-23

HAMMEL, NATHAN, MD†

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-DEC-19

KIM, PAUL, MD†

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Effective as of 01-SEP-22

MEINEKE, RYAN, MD†

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAY-22

MEINEKE, RYAN, MD†

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-23

RAISZADEH, RAMIN, MD†

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Effective as of 01-JAN-23

SCHULTZEL, MARK, MD†

Provider ID: N/A

519 ENCINITAS BLVD STE
106

ENCINITAS, CA 92024

Teleservice

Effective as of 01-OCT-22

SURGERY PLASTIC

CHAO, JAMES, MD†

Provider ID: N/A

499 N EL CAMINO REAL
STE C200

ENCINITAS, CA 92024

Effective as of 01-JUL-15

GOSMAN, AMANDA, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-NOV-21

GUPTA, ANSHU, MD

Provider ID: N/A

700 GARDEN VIEW CT STE
208

ENCINITAS, CA 92024

Effective as of 01-MAY-23

GUPTA, ABHAY, MD

Provider ID: N/A

351 SANTA FE DR STE 250
ENCINITAS, CA 92024

Effective as of 01-MAY-23

SURGICAL ONCOLOGY

CHEN, STEVEN, MD†

Provider ID: N/A

499 N EL CAMINO REAL
STE C200

ENCINITAS, CA 92024

Effective as of 01-JUL-15

UROLOGY

COHEN, EDWARD, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-APR-16

COHEN, EDWARD, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-JAN-21

COHEN, EDWARD, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-JUL-22

COHEN, EDWARD, MD†

Provider ID: N/A

320 SANTA FE DR STE 305
ENCINITAS, CA 92024

Effective as of 01-SEP-21

COHEN, EDWARD, MD†

Provider ID: N/A

320 SANTA FE DR STE 305
ENCINITAS, CA 92024

Effective as of 01-SEP-22


DATO, PAUL, MD

Provider ID: N/A


320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-JAN-24


DICKS, BRIAN, MD

Provider ID: N/A
 320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Effective as of 01-JAN-24


KEILLER, DANNY, MD

Provider ID: N/A
 320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Effective as of 01-FEB-24


NAITOH, JOHN, MD†

Provider ID: N/A
 320 SANTA FE DR STE 305
 ENCINITAS, CA 92024
 Effective as of 01-SEP-22


NAITOH, JOHN, MD†

Provider ID: N/A
 320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Effective as of 01-JUL-22


NAITOH, JOHN, MD†

Provider ID: N/A
 320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Effective as of 01-NOV-21

NEUSTEIN, PAUL, MD

Provider ID: N/A
 320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Effective as of 01-FEB-24

NGUYEN, HUNG, MD†


Provider ID: N/A
 320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Teleservice
 Effective as of 01-JAN-21

NGUYEN, HUNG, MD†


Provider ID: N/A
 320 SANTA FE DR STE 108

ENCINITAS, CA 92024
 Teleservice
 Effective as of 01-SEP-21


NGUYEN, HUNG, MD†

Provider ID: N/A
 320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Teleservice
 Effective as of 01-JAN-24


PE, MARK-RALLY, MD

Provider ID: N/A
 320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Effective as of 01-FEB-24


ROBERTS, JAMES, MD

Provider ID: N/A
 320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Effective as of 01-JAN-24


SALEM, CAROL, MD

Provider ID: N/A
 320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Effective as of 01-FEB-24


SALMASI, AMIRALI, MD

Provider ID: N/A
 320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Effective as of 01-FEB-24

VAPNEK, EVAN, MD

Provider ID: N/A
 320 SANTA FE DR STE 108
 ENCINITAS, CA 92024
 Effective as of 01-JAN-24


YUH, BENJAMIN, MD†

Provider ID: N/A
 320 SANTA FE DR STE 108
 ENCINITAS, CA 92024


Effective as of 01-JAN-24

ANESTHESIOLOGY


FARUQUE, TANIA, MD†

Provider ID: N/A
 255 N ELM ST STE 101
 ESCONDIDO, CA 92025
 Effective as of 01-JAN-21

KHATIBI, NIKAN, DO†


Provider ID: N/A
 160 N DATE ST
 ESCONDIDO, CA 92025
 Effective as of 01-JAN-21

KHATIBI, NIKAN, DO†


Provider ID: N/A
 160 N DATE ST
 ESCONDIDO, CA 92025
 Effective as of 01-JAN-21

**ANESTHESIOLOGY PAIN
MANAGEMENT**


COHEN, ZACHARY, MD

Provider ID: N/A
 940 E VALLEY PKWY STE K
 ESCONDIDO, CA 92025
 Effective as of 01-JAN-23

DAIRO, BRANDON, MD†

Provider ID: N/A
 1955 CITRACADO PKWY
 STE 203
 ESCONDIDO, CA 92029
 Teleservice
 Effective as of 01-NOV-22

KHATIBI, NIKAN, DO†

Provider ID: N/A
 160 N DATE ST
 ESCONDIDO, CA 92025
 Effective as of 01-JUL-21

KHATIBI, NIKAN, DO†

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

KHATIBI, NIKAN, DO†

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

KHATIBI, NIKAN, DO†

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

PRASAD, RUPA, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-NOV-23

ROBINSON, COLE, MD

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUN-23

AUDIOLOGIST

HERRERA, CHARITY, AuD†

Provider ID: N/A

330 W FELICITA AVE STE
A4
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

HORNER, HEATHER, AuD†

Provider ID: N/A

330 W FELICITA AVE STE
A4
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUN-22

CARDIAC

ELECTROPHYSIOLOGY

LERNER, JONATHAN, MD

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

SAWHNEY, NAVINDER, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 320
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

SHAH, ABHISHEK, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JAN-23

CARDIOLOGY

BAYAT, HAMED, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

CHEN, ANDREW, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

GILBERT, CHRISTOPHER, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

GORWIT, JEFFREY, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029*
Effective as of 01-MAR-23

**VANICHSARN, CHRISTOPHER,
MD**

Provider ID: N/A

2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

**CARDIOVASCULAR
DISEASE**

ABELHAD, NADIA, MD

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

CARLSON, STEVEN, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAY-21

DO, HULBERT, MD

Provider ID: N/A

488 E VALLEY PKWY STE
107

ESCONDIDO, CA 92025
Effective as of 01-OCT-23

MALEK, MIKHAIL, MD

Provider ID: N/A
2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A
488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-MAY-21

NARAYANAN, MEENA, MD†

Provider ID: N/A
488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-MAY-21

PARIKH, MILIND, DO†

Provider ID: N/A
488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-MAY-21

SARSAM, LUAY, MD

Provider ID: N/A
488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A
488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

SERRY, ROD, MD

Provider ID: N/A
2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

SHAH, KULIN, MD†

Provider ID: N/A
488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JAN-23

SHAH, ABHISHEK, MD†

Provider ID: N/A
488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A
488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JAN-23

**CERTIFIED
ACUPUNCTURIST**

CHEN, SISI, LAC†

Provider ID: N/A
240 W MISSION AVE STE C
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

KIM, MIN JOO, LAC†

Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-NOV-22

CERTIFIED NURSE

PRACTITIONER

BATAC, NADINE, NP†

Provider ID: N/A
1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
Effective as of 01-DEC-22

BISHOP, LESLIE, NP†

Provider ID: N/A
1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-MAR-21

CARNEY, AMY, NP

Provider ID: N/A
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-23

GARVIN, JOSEPH, NP†

Provider ID: N/A
2125 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-JAN-22

KONYN, CATHERINE, NPF

Provider ID: N/A
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-APR-23

KOROGODSKI, ANNA, NP†

Provider ID: N/A
704 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

LAI, AMARA, MD

Provider ID: N/A

488 E VALLEY PKWY STE 411
ESCONDIDO, CA 92025
Effective as of 01-AUG-22

LAI, AMARA, MD

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-AUG-22

MANCHESTER, KAREN, NP

Provider ID: N/A

2130 CITRACADO PKWY STE 220
ESCONDIDO, CA 92029
Effective as of 01-FEB-24

MEYERS, JUDITH, NP†

Provider ID: N/A

1955 CITRACADO PKWY STE 300
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

MILLER, JEAN, NP

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

NEGRON, CAROLINE, NP

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

RICE, ELIZABETH, NP

Provider ID: N/A

1955 CITRACADO PKWY STE 102
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

ROSE, LAURA, NP

Provider ID: N/A

1955 CITRACADO PKWY STE 203
ESCONDIDO, CA 92029

Teleservice

Effective as of 01-DEC-23

SPAULDING, ENJOLI, NP†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

TEHRAN, SAGHI, NP†

Provider ID: N/A

704 E GRAND AVE
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-JUL-22

TEHRAN, SAGHI, NP†

Provider ID: N/A

255 N ASH ST STE 101
ESCONDIDO, CA 92027

Teleservice

Effective as of 01-JUL-22

TRAN, DAPHNE, NP

Provider ID: N/A

2125 CITRACADO PKWY
ESCONDIDO, CA 92029
Effective as of 01-FEB-23

**CERTIFIED REGISTERED
NURSE ANESTHETIST**

BARBA, ARNEL, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE 110
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

BROWN, SHENISE, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE 110
ESCONDIDO, CA 92025

Effective as of 01-JAN-24

FIEDLER, DEREK, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE 110
ESCONDIDO, CA 92025

Effective as of 01-FEB-24

HASE, KATHLEEN, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE 110
ESCONDIDO, CA 92025

Effective as of 01-JAN-24

ORTEGA, JOSEPH, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE 110
ESCONDIDO, CA 92025

Effective as of 01-FEB-24

**SEILNACHT-BERNARD,
KAREN, CRNA†**

Provider ID: N/A

488 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

**CERTIFIED REGISTERED
NURSE MIDWIFE**

ALLEN, ANNE, CRNM†

Provider ID: N/A

488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025

Effective as of 01-JUL-22

HAMMOND, HEATHER, CRNM

Provider ID: N/A

488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

ONEILL, THERESE, CRNM†

Provider ID: N/A

488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

ONEILL, THERESE, CRNM†

Provider ID: N/A

488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

CHIROPRACTOR

BARTZ, PAUL, DC†

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

FONSECA, ROSANNA, DC

Provider ID: N/A

2065 S ESCONDIDO BLVD STE 105
ESCONDIDO, CA 92025
Effective as of 01-MAY-21

KEYS, ANNA, DC

Provider ID: N/A

240 W MISSION AVE STE C
ESCONDIDO, CA 92025
Effective as of 01-JUN-21

ZECHA, RONALD, DC

Provider ID: N/A

488 E VALLEY PKWY STE 411
ESCONDIDO, CA 92025
Effective as of 01-AUG-22

ZECHA, RONALD, DC

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

ZECHA, RONALD, DC

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-22

CLINICAL

NEUROPSYCHOLOGIST

QUESNELL, TARA, DO†

Provider ID: N/A

1955 CITRACADO PKWY STE 102
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-NOV-23

DERMATOLOGY

ARMSTRONG, PATRICK, MD

Provider ID: N/A

2125 CITRACADO PKWY STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

STEIN, ALEXANDER, MD

Provider ID: N/A

1101 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Effective as of 01-NOV-23

VENKAT, ARUN, MD†

Provider ID: N/A

488 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-OCT-13

EMERGENCY MEDICINE

HARE, MARC, MD

Provider ID: N/A

1045 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Effective as of 01-APR-23

ENDOCRINOLOGY

METABOLISM DIABETES

BAILEY, TIMOTHY, MD

Provider ID: N/A

625 CITRACADO PKWY STE 108
ESCONDIDO, CA 92025
Effective as of 01-OCT-23

FARJOUDI, FARHAD, MD

Provider ID: N/A

2125 CITRACADO PKWY STE 220
ESCONDIDO, CA 92029
Effective as of 01-FEB-24

FAMILY PRACTICE

COBIAN, VANESSA, MD

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

RAO, USHA, MD†

Provider ID: N/A

704 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-NOV-23

SHAFT, ALEXANDER, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-FEB-23

SHAFT, ALEXANDER, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-MAR-22

GASTROENTEROLOGY

CHELIMILLA, HARITHA, MD

Provider ID: N/A

488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025

Effective as of 01-OCT-20

CHELIMILLA, HARITHA, MD

Provider ID: N/A

735 E OHIO AVE STE 204
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

CHELIMILLA, HARITHA, MD

Provider ID: N/A

735 E OHIO AVE STE 204
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

GARA, NAVEEN, MD†

Provider ID: N/A

935 E PENNSYLVANIA AVE

ESCONDIDO, CA 92025

Effective as of 01-SEP-22

GARA, NAVEEN, MD†

Provider ID: N/A

661 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025

Effective as of 01-JAN-21

HASSANEIN, TAREK, MD†

Provider ID: N/A

488 E VALLEY PKWY
ESCONDIDO, CA 92025

Effective as of 01-JUL-21

HASSANEIN, TAREK, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-MAR-22

HASSANEIN, TAREK, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-MAY-22

**HEARING AID DEALER /
SUPPLIER**

ANDERSON, ELAINE, MA†

Provider ID: N/A

330 W FELICITA AVE STE
A4
ESCONDIDO, CA 92025

Effective as of 01-SEP-22

INTERNAL MEDICINE

LIU, ANDREW, MD

Provider ID: N/A

631 E GRAND AVE

ESCONDIDO, CA 92025

Effective as of 01-SEP-23

LY, SOPHEAP, MD

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Effective as of 01-NOV-23

OLIVER, DEANNA, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025

Effective as of 01-MAR-22

PEARCE, DANIEL, DO

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025

Effective as of 01-OCT-23

**INTERVENTIONAL
CARDIOLOGY**

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025

Effective as of 01-DEC-22

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025

Effective as of 01-MAY-23

SHAH, KULIN, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025

Effective as of 01-APR-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

488 E VALLEY PKWY STE 107
ESCONDIDO, CA 92025
Effective as of 01-APR-23

**LICENSED CLINICAL
SOCIAL WORKER**

BECERRA, GABRIEL, LCSW

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

CHRISTENSEN, PATTI, LCSW

Provider ID: N/A

1002 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

GUZZO, RICHARD, LCSW

Provider ID: N/A

1002 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

HARRIS, LAURA, LCSW

Provider ID: N/A

1002 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

HARRIS, LAURA, LCSW

Provider ID: N/A

1002 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

MAGOS, DANIEL, LCSW

Provider ID: N/A

425 N DATE ST

ESCONDIDO, CA 92025
Effective as of 01-JAN-24

MARTINEZ, NORAYMA, LCSW†

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-NOV-22

ROBLEDO, DAMIAN, LCSW

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

ROBLEDO, DAMIAN, LCSW

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-APR-23

**MARRIAGE FAMILY
THERAPIST**

HOLLEMAN, KEVIN, DO

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-APR-23

PRATHER, ALLYSON, MFT

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-MAR-24

TIZNADO, MONICA, MFT

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

NEPHROLOGY

AL-DAHHAN, ZAID, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-AUG-23

AL-DAHHAN, ZAID, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

AL-DAHHAN, ZAID, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

AL-DAHHAN, ZAID, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

CHOUDRY, QASIM, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-NOV-23

CHOUDRY, QASIM, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-OCT-23

CHOUDRY, QASIM, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-OCT-23

CHOUDRY, QASIM, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-JUL-23

CHOUdry, QASIM, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-JUL-23

CHOUdry, QASIM, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-DEC-23

CHOUdry, QASIM, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-DEC-23

GREENSTEIN, JOSHUA, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-JAN-21

GREENSTEIN, JOSHUA, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-JUL-22

GREENSTEIN, JOSHUA, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-JAN-21

HEBREO, JOSEPH, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-JUL-22

HEBREO, JOSEPH, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-MAR-17

HEBREO, JOSEPH, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-JAN-21

HEBREO, JOSEPH, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-JAN-21

KAYAL, ANAS, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-JUL-22

KHAWAR, OSMAN, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-JAN-21

KHAWAR, OSMAN, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-JUL-22

KHAWAR, OSMAN, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-JAN-21

NEYAZ, MOHAMMED, DO†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-JAN-21

NEYAZ, MOHAMMED, DO†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-JUL-22

NEYAZ, MOHAMMED, DO†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-JAN-21

SHAPIRO, MARK, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-JUL-22

SHAPIRO, MARK, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-JAN-21

NEUROLOGY

BAKER, DAVID, DO

Provider ID: N/A

1955 CITRACADO PKWY
STE 102

ESCONDIDO, CA 92029

Effective as of 01-JAN-24

DELANEY, MICHAEL, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102

ESCONDIDO, CA 92029
Effective as of 01-JAN-21

DELANEY, MICHAEL, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102

ESCONDIDO, CA 92029
Effective as of 01-JAN-21

DELANEY, MICHAEL, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102

ESCONDIDO, CA 92029
Effective as of 01-FEB-19

DROKER, BRIAN, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 102

ESCONDIDO, CA 92029
Effective as of 01-MAR-24

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102

ESCONDIDO, CA 92029
Effective as of 01-FEB-22

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102

ESCONDIDO, CA 92029
Effective as of 01-NOV-21

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102

ESCONDIDO, CA 92029
Effective as of 01-JAN-21

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102

ESCONDIDO, CA 92029
Effective as of 01-SEP-22

OH, IRENE, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102

ESCONDIDO, CA 92029
Effective as of 01-JAN-21

OH, IRENE, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102

ESCONDIDO, CA 92029
Effective as of 01-JAN-21

PADUGA, REMIA, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102

ESCONDIDO, CA 92029
Effective as of 01-SEP-22

QUESNELL, TARA, DO†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102

ESCONDIDO, CA 92029
Teleservice

Effective as of 01-JAN-24

SAVANI, AMAN, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 102

ESCONDIDO, CA 92029
Effective as of 01-NOV-23

SHAPIRO, MARK, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025*

Teleservice

Effective as of 01-JAN-21

WANG, CHUNYANG, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 102

ESCONDIDO, CA 92029
Effective as of 01-FEB-24

WANG, ANCHI, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102

ESCONDIDO, CA 92029
Teleservice

Effective as of 01-JAN-21

**OBSTETRICS /
GYNECOLOGY**

BABKINA, NATALIA, MD

Provider ID: N/A

488 E VALLEY PKWY STE
400

ESCONDIDO, CA 92025
Effective as of 01-MAR-23

BABKINA, NATALIA, MD

Provider ID: N/A

488 E VALLEY PKWY STE
308

ESCONDIDO, CA 92025
Effective as of 01-JAN-24

BABKINA, NATALIA, MD

Provider ID: N/A

488 E VALLEY PKWY STE
311

ESCONDIDO, CA 92025
Effective as of 01-JAN-24

BABKINA, NATALIA, MD

Provider ID: N/A

488 E VALLEY PKWY STE 310
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

BULLOCH, EDGAR, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

BULLOCH, EDGAR, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

BULLOCH, EDGAR, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

CIZMAR, BRANISLAV, MD

Provider ID: N/A

488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

CIZMAR, BRANISLAV, MD

Provider ID: N/A

488 E VALLEY PKWY STE 311
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

CIZMAR, BRANISLAV, MD

Provider ID: N/A

2130 CITRACADO PKWY STE 220
ESCONDIDO, CA 92029
Effective as of 01-FEB-24

HINSHAW, PAUL, DO†

Provider ID: N/A

1955 CITRACADO PKWY STE 302
ESCONDIDO, CA 92029
Effective as of 01-SEP-22

HINSHAW, PAUL, DO†

Provider ID: N/A

488 E VALLEY PKWY STE 400
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

HUSKEY, DANA, MD

Provider ID: N/A

488 E VALLEY PKWY STE 310
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

SHORT, ABIAD, MD†

Provider ID: N/A

255 N ASH ST STE 101
ESCONDIDO, CA 92027
Effective as of 01-JUL-22

OPHTHALMOLOGY

AVALLONE, THOMAS, MD†

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-MAY-23

AVALLONE, THOMAS, MD†

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-APR-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

700 W EL NORTE PKWY STE 200

ESCONDIDO, CA 92026
Effective as of 01-DEC-21

BINDER, NICHOLAS, MD†

Provider ID: N/A

830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
Effective as of 01-APR-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
Effective as of 01-NOV-23

CHOPLIN, NEIL, MD†

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-JUL-21

CHOPLIN, NEIL, MD†

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-SEP-15

HUDSON, HENRY, MD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-21

HUDSON, HENRY, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

HUDSON, HENRY, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

**MORRISON-REYES, JOSHUA,
MD†**

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

**MORRISON-REYES, JOSHUA,
MD†**

Provider ID: N/A

830 W VALLEY PKWY STE

300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

**MORRISON-REYES, JOSHUA,
MD**

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-MAR-23

**MORRISON-REYES, JOSHUA,
MD†**

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

MORTON, ASA, MD†

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-AUG-23

MORTON, ASA, MD†

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-NOV-21

PATEL, GITANE, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

PATEL, SARJAN, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

PRABHU, SUJATA, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

PRABHU, SUJATA, MD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-23

PRABHU, SUJATA, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

PRABHU, SUJATA, MD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-21

SHEILS, CATHERINE, MD

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-JAN-24

ZHAO, TAILUN, MD

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

Effective as of 01-JAN-24

ZHAO, TAILUN, MD

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

Effective as of 01-JUL-23

ZHAO, TAILUN, MD

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

Effective as of 01-NOV-23

OPTOMETRIST

AOTO, KIM, OD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025

Effective as of 01-JAN-21

AOTO, KIM, OD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025

Effective as of 01-JAN-21

AOTO, KIM, OD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025

Effective as of 01-SEP-22

AOTO, KIM, OD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

Effective as of 01-SEP-22

AOTO, KIM, OD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

Effective as of 01-DEC-21

DYER, SHARON, OD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025

Effective as of 01-SEP-22

JULAZADEH, SARA, OD

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026

Effective as of 01-SEP-23

KHALIL, VADY, OD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

Effective as of 01-NOV-22

KHALIL, VADY, OD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

Effective as of 01-NOV-22

KHIEU, TINA, OD

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

Effective as of 01-NOV-23

KHIEU, TINA, OD

Provider ID: N/A

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Effective as of 01-DEC-23

SCOTT, JEFFREY, OD†

Provider ID: N/A

830 W VALLEY PKWY STE
300

ESCONDIDO, CA 92025

Effective as of 01-JAN-22

TAUNTON, PHILIP, OD†

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026

Effective as of 01-SEP-21

TAUNTON, PHILIP, OD†

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026

Effective as of 01-SEP-23

TONNU, ANH, OD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

Effective as of 01-DEC-21

PEDIATRICS

MALEKSHAMRAN, KEYVAN, MD†

Provider ID: N/A

426 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-AUG-22

**PHYS MED/ REHAB PAIN
MEDICINE**

RICHARDSON, HENRY, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 203

ESCONDIDO, CA 92029
Effective as of 01-MAR-23

**PHYSICAL MEDICINE /
REHABILITATION**

TAHAEI, SEYED, MD†

Provider ID: N/A
215 S HICKORY ST STE 116
ESCONDIDO, CA 92025
Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

BALDWIN, DONNA, PA†

Provider ID: N/A
1035 E GRAND AVE STE 101
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

BEITTER, KEERSTIN, PA†

Provider ID: N/A
1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
Effective as of 01-MAR-22

CHATFIELD, ALEXANDRA, PA†

Provider ID: N/A
1955 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-FEB-21

COLESON, PAMELA, PA

Provider ID: N/A
460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

DANESHVAR, ABRAHAM, PA

Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice

Effective as of 01-AUG-23

ESCALANTE, JUVY, PA

Provider ID: N/A
460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-FEB-23

ESCALANTE, JUVY, PA

Provider ID: N/A
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-FEB-23

GANGJI, SHAZMIN, PA

Provider ID: N/A
460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

GANGJI, SHAZMIN, PA

Provider ID: N/A
460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

HUANG, STEPHANIE, PA†

Provider ID: N/A
1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

MEHTA, NOOPUR, PA

Provider ID: N/A
460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

MONTES, VIVIAN, PA

Provider ID: N/A
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-APR-23

NG, EUNICE, PA

Provider ID: N/A
488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

NIAKAMAL, EVAN, PA†

Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

WICKWARE, TRACY, PA†

Provider ID: N/A
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

WICKWARE, TRACY, PA

Provider ID: N/A
426 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

WICKWARE, TRACY, PA†

Provider ID: N/A
460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

WICKWARE, TRACY, PA

Provider ID: N/A
488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

WILE, KIMBERLY, PA

Provider ID: N/A
625 CITRACADO PKWY STE
108
ESCONDIDO, CA 92025
Effective as of 01-NOV-23

WRIGHT, DEREK, PA

Provider ID: N/A

1955 CITRACADO PKWY
ESCONDIDO, CA 92029
Effective as of 01-NOV-23

WRIGHT, DEREK, PA

Provider ID: N/A

1955 CITRACADO PKWY
ESCONDIDO, CA 92029
Effective as of 01-AUG-23

PODIATRIST

BANKS, JAMINELLI, DPM†

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

CHU, ANDREW, DPM†

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

FARMER, STEVEN, DPM†

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

FARMER, STEVEN, DPM†

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

HAN, KYOUNG, DPM

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-JAN-22

LARKINS, PHILIP, DPM

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

MORRIS, JASON, DPM

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUN-21

MORRIS, JASON, DPM

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-SEP-22

MORRIS, JASON, DPM

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JAN-23

NEGRON, RICARDO, DPM

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

NEGRON, RICARDO, DPM

Provider ID: N/A

1001 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

NEGRON, RICARDO, DPM

Provider ID: N/A

1001 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

READ, TRENTON, DPM

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-APR-23

REDKAR, AVANTI, DPM

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

REDKAR, AVANTI, DPM

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-MAY-22

SMITH, COLLIN, DPM†

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

SMITH, COLLIN, DPM†

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-DEC-21

SMITH, COLLIN, DPM†

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-FEB-21

TOUMA, ELIE, DPM†

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-FEB-23

TOUMA, ELIE, DPM

Provider ID: N/A

1045 E PENNSYLVANIA
AVE

ESCONDIDO, CA 92025
Teleservice
Effective as of 01-APR-23

TOUMA, ELIE, DPM†

Provider ID: N/A
704 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-DEC-22

PSYCHIATRY

CASTILLO, TIFFANY, MD†

Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-NOV-22

CASTILLO, TIFFANY, MD†

Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-NOV-22

CHAND, RAVINDRA, MD†

Provider ID: N/A
2185 CITRACADO PKWY
ESCONDIDO, CA 92029
Effective as of 01-JUL-21

CHAND, RAVINDRA, MD†

Provider ID: N/A
2185 CITRACADO PKWY
ESCONDIDO, CA 92029
Effective as of 01-JUL-21

FANOUS, ASHRAF, MD

Provider ID: N/A
221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

FANOUS, ASHRAF, MD

Provider ID: N/A
221 W CREST ST STE 205

ESCONDIDO, CA 92025
Effective as of 01-MAY-23

FU, KATHERINE, MD

Provider ID: N/A
704 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

FU, KATHERINE, MD

Provider ID: N/A
704 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

HOLLEMAN, KEVIN, DO

Provider ID: N/A
221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-APR-23

HOLLEMAN, KEVIN, DO

Provider ID: N/A
221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-APR-23

KOH, STEVE, MD†

Provider ID: N/A
255 N ASH ST STE 101
ESCONDIDO, CA 92027
Teleservice
Effective as of 01-JAN-22

KOH, STEVE, MD†

Provider ID: N/A
704 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-SEP-22

KOH, STEVE, MD†

Provider ID: N/A
255 N ASH ST STE 101
ESCONDIDO, CA 92027

Teleservice
Effective as of 01-JAN-22

KOH, STEVE, MD†

Provider ID: N/A
704 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-SEP-22

PARASHAR, ANUSHREE, MD

Provider ID: N/A
221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD

Provider ID: N/A
221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD

Provider ID: N/A
221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD

Provider ID: N/A
221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

RODARTE, GABRIEL, MD†

Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†

Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

RODARTE, GABRIEL, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

PSYCHOLOGIST

CALOCA, LAURA, PSYD

Provider ID: N/A

488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

CALOCA, LAURA, PSYD

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

CALOCA, LAURA, PSYD

Provider ID: N/A

488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025

Effective as of 01-JAN-24

CALOCA, LAURA, PSYD

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

**CARLTON PENN, CORNELIA,
PhD**

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-NOV-22

**CARLTON PENN, CORNELIA,
PhD**

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

**CARLTON PENN, CORNELIA,
PhD**

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-NOV-22

**CARLTON PENN, CORNELIA,
PhD**

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

CHAO, BRIAN, PhD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

CHAO, BRIAN, PhD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

**ESTRADA PATINO, ANGELA,
PSYD**

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

**ESTRADA PATINO, ANGELA,
PSYD**

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

GREENE, ERIC, PSYD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

GREENE, ERIC, PSYD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

**GUARDADO-SOTO, RAQUEL,
PhD**

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

**GUARDADO-SOTO, RAQUEL,
PhD**

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

HOLDEN, MATTHEW, PhD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

HOLDEN, MATTHEW, PhD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

MEJIAS, JUAN, PhD

Provider ID: N/A

426 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

MEJIAS, JUAN, PhD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

MEJIAS, JUAN, PhD

Provider ID: N/A

426 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

MEJIAS, JUAN, PhD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

SUOZZO, JOSEPH, PhD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

SUOZZO, JOSEPH, PhD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-JAN-24

**VALLEZ-BARLAM, ANDREA,
PhD**

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

**VALLEZ-BARLAM, ANDREA,
PhD**

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

**VALLEZ-BARLAM, ANDREA,
PhD**

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

**VALLEZ-BARLAM, ANDREA,
PhD**

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

**WOODWORTH, JENNIFER,
PSYD**

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

**WOODWORTH, JENNIFER,
PSYD**

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

PULMONARY DISEASES

BENDER, FRANK, MD

Provider ID: N/A

2125 CITRACADO PKWY
STE 230
ESCONDIDO, CA 92029
Effective as of 01-FEB-24

POPPER, STEVEN, MD

Provider ID: N/A

2125 CITRACADO PKWY
STE 230
ESCONDIDO, CA 92029
Effective as of 01-JAN-24

QUAN, MICHELE, MD†

Provider ID: N/A

2125 CITRACADO PKWY
STE 230
ESCONDIDO, CA 92029
Effective as of 01-SEP-22

RADIATION ONCOLOGY

COLEMAN, LORI, MD†

Provider ID: N/A

2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

FULLER, DONALD, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

FULLER, DONALD, MD†

Provider ID: N/A

701 E GRAND AVE STE 200

ESCONDIDO, CA 92025
Effective as of 01-SEP-22

FULLER, DONALD, MD†

Provider ID: N/A
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

FULLER, DONALD, MD†

Provider ID: N/A
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

IJAZ, TAHIR, MD†

Provider ID: N/A
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

IJAZ, TAHIR, MD†

Provider ID: N/A
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

IJAZ, TAHIR, MD†

Provider ID: N/A
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

JABBARI, SIAVASH, MD†

Provider ID: N/A
2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029
Effective as of 01-OCT-22

SHIRAZI, REZA, MD†

Provider ID: N/A
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

SHIRAZI, REZA, MD†

Provider ID: N/A
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

SHIRAZI, REZA, MD†

Provider ID: N/A
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

SHIRAZI, REZA, MD†

Provider ID: N/A
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

UHL, BARRY, MD†

Provider ID: N/A
2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUL-21

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAY-21

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Teleservice

Effective as of 01-SEP-22

VOLPP, PAUL, MD†

Provider ID: N/A
2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

WEINSTEIN, GEOFFREY, MD†

Provider ID: N/A
2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-SEP-22

**REGISTERED PHYSICAL
THERAPIST**

BOUTELLE, DAVID, PT

Provider ID: N/A
1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027
Effective as of 01-FEB-24

BOUTELLE, BARBARA, PT

Provider ID: N/A
1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027
Effective as of 01-FEB-24

FARRAR, COURTNEY, PT

Provider ID: N/A
1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029

Teleservice

Effective as of 01-JUL-23

FARRAR, COURTNEY, PT†

Provider ID: N/A

1340 W VALLEY PKWY STE 201

ESCONDIDO, CA 92029

Effective as of 01-JAN-21

MCGEE, JACQUELINE, PT

Provider ID: N/A

1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027

Effective as of 01-JAN-21

SPEECH PATHOLOGIST

KOUKEYAN, KARIN, SP

Provider ID: N/A

500 LA TERRAZA BLVD STE 150

ESCONDIDO, CA 92025

Effective as of 01-JAN-23

SURGERY

CARDIOVASCULAR

LIN, YUAN, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 220

ESCONDIDO, CA 92029

Effective as of 01-MAR-23

SURGERY GENERAL

**CASILLAS BERUMEN, SERGIO,
MD**

Provider ID: N/A

1045 E PENNSYLVANIA
AVE

ESCONDIDO, CA 92025

Effective as of 01-FEB-24

GROVE, JAY, MD†

Provider ID: N/A

2185 CITRACADO PKWY
ESCONDIDO, CA 92029

Teleservice

Effective as of 01-JAN-21

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

1045 E PENNSYLVANIA
AVE

ESCONDIDO, CA 92025

Teleservice

Effective as of 01-MAR-24

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

1045 E PENNSYLVANIA
AVE

ESCONDIDO, CA 92025

Teleservice

Effective as of 01-MAR-24

SURGERY GENERAL

VASCULAR

BULKIN, ANATOLY, MD†

Provider ID: N/A

625 CITRACADO PKWY STE 203

ESCONDIDO, CA 92025

Effective as of 01-JAN-24

CHANG, ALEXANDER, MD†

Provider ID: N/A

625 CITRACADO PKWY STE 203

ESCONDIDO, CA 92025

Effective as of 01-AUG-20

MORENO MARTINEZ,

ENRIQUE, MD†

Provider ID: N/A

1045 E PENNSYLVANIA

AVE

ESCONDIDO, CA 92025

Teleservice

Effective as of 01-MAR-24

NEMCEFF, DENNIS, MD†

Provider ID: N/A

625 CITRACADO PKWY STE 203

ESCONDIDO, CA 92025

Effective as of 01-JAN-21

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

1045 E PENNSYLVANIA
AVE

ESCONDIDO, CA 92025

Teleservice

Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

1045 E PENNSYLVANIA
AVE

ESCONDIDO, CA 92025

Teleservice

Effective as of 01-MAR-24

SURGERY

NEUROLOGICAL

STERN, MARK, MD†

Provider ID: N/A

705 E OHIO AVE

ESCONDIDO, CA 92025

Effective as of 01-JAN-21

STERN, MARK, MD†

Provider ID: N/A

705 E OHIO AVE

ESCONDIDO, CA 92025

Effective as of 01-SEP-23

SURGERY ORTHOPEDIC

BARBA, DANIEL, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

KNUTSON, THOMAS, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

PALANCA, ARIEL, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-JAN-24

RAISZADEH, RAMIN, MD†

Provider ID: N/A

2125 CITRACADO PKWY
STE 310
ESCONDIDO, CA 92029
Effective as of 01-JAN-23

RAISZADEH, RAMIN, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
316
ESCONDIDO, CA 92025
Effective as of 01-JAN-23

SHARP, LORRA, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

UROLOGY

ANTHONY, JULIAN, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-JAN-24

ANTHONY, JULIAN, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 210
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

CARDIOLOGY

BISWAS, MIMI, MD

Provider ID: N/A

591 E ELDER ST STE C
FALLBROOK, CA 92028
Teleservice
Effective as of 01-NOV-23

COX, JEREMY, DO

Provider ID: N/A

591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-NOV-23

MESSENGER, BRADLEY, MD†

Provider ID: N/A

591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-JAN-19

PAREKH, NIRAJ, MD†

Provider ID: N/A

591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-JAN-19

SANGODKAR, SANDEEP, DO†

Provider ID: N/A

591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-JAN-19

**CARDIOVASCULAR
DISEASE**

SANGODKAR, SANDEEP, DO†

Provider ID: N/A

591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-MAR-20

SANGODKAR, SANDEEP, DO†

Provider ID: N/A

591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-MAR-20

**CERTIFIED
ACUPUNCTURIST**

LAROWE, ALEXISS, LAC†

Provider ID: N/A

1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-21

LAROWE, ALEXISS, LAC†

Provider ID: N/A

1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-21

LAROWE, ALEXISS, LAC†

Provider ID: N/A

1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-21

WACHNER, KRISTELYN, LAC†

Provider ID: N/A

1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-OCT-22

WACHNER, KRISTELYN, LAC†

Provider ID: N/A

1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-OCT-22

**CERTIFIED NURSE
PRACTITIONER**

HAMED, JACQUELYN, NP
Provider ID: N/A

1328 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-NOV-23

NATARAJAN, EVALYNN, NP
Provider ID: N/A

1328 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-MAY-23

STARICKA, MELISSA, NPF
Provider ID: N/A

1328 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-FEB-23

CHIROPRACTOR

BARTZ, PAUL, DC†
Provider ID: N/A

1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-22

FARSHLER, ANTHONY, DC†
Provider ID: N/A

1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-22

MCCARTHY, CHEYENNE, DC†
Provider ID: N/A

1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-22

SHERIDAN, SHANE, DC
Provider ID: N/A

1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-FEB-24

DERMATOLOGY

GILBOA, RUTH, MD†
Provider ID: N/A

1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JUN-21

ROSS, ANDREW, MD†
Provider ID: N/A

1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JUL-22

ROSS, ANDREW, MD†
Provider ID: N/A

1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-SEP-22

ROSS, ANDREW, MD†
Provider ID: N/A

1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-AUG-20

SAMADY, JOSEPH, MD†
Provider ID: N/A

1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-AUG-20

SAMADY, JOSEPH, MD†
Provider ID: N/A

1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-SEP-22

SAMADY, JOSEPH, MD†

Provider ID: N/A

1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JUL-22

**SIRICHOTIRATANA, MELISSA,
MD†**

Provider ID: N/A

1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JAN-23

VENKAT, ARUN, MD†
Provider ID: N/A

1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JUN-21

WONG, DARRYL, MD†
Provider ID: N/A

1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JUN-21

GASTROENTEROLOGY

HONG, JOHN, MD†
Provider ID: N/A

521 E ELDER ST STE 104
FALLBROOK, CA 92028
Effective as of 01-JAN-21

INTERNAL MEDICINE

MOOLANI, UJJALA, MD
Provider ID: N/A

591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-MAY-23

NEPHROLOGY

AL-DAHAN, ZAID, MD
Provider ID: N/A

591 E ELDER ST STE C

FALLBROOK, CA 92028
Effective as of 01-MAY-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

591 E ELDER ST STE C
FALLBROOK, CA 92028
Teleservice
Effective as of 01-OCT-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

591 E ELDER ST STE C
FALLBROOK, CA 92028
Teleservice
Effective as of 01-FEB-24

NEUROLOGY

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-SEP-17

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-OCT-15

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-OCT-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-OCT-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-JUL-19

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-APR-22

**OBSTETRICS /
GYNECOLOGY**

STIGEN, THERESA, MD†

Provider ID: N/A

577 E ELDER ST STE K
FALLBROOK, CA 92028
Effective as of 01-SEP-17

OPHTHALMOLOGY

DONALDSON, JARED, MD†

Provider ID: N/A

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-DEC-22

DONALDSON, JARED, MD†

Provider ID: N/A

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-SEP-22

DONALDSON, JARED, MD†

Provider ID: N/A

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-JAN-23

JOHNSON, ROGER, MD†

Provider ID: N/A

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-JAN-22

JOHNSON, ROGER, MD†

Provider ID: N/A

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-FEB-22

ZHOU, SIWEI, MD†

Provider ID: N/A

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-JUL-23

OPTOMETRIST

ARCHIBALD, JOHN, OD†

Provider ID: N/A

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-JUL-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-DEC-23

BULLUM, ANTHONY, OD†

Provider ID: N/A

1328 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-22

COLEMAN, BROOKE, OD†

Provider ID: N/A

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-FEB-22

COOPER, MICHAEL, OD†

Provider ID: N/A

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-FEB-22

COOPER, MICHAEL, OD†

Provider ID: N/A

521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-SEP-22

PEDIATRICS

ROBINSON, DAISY, MD

Provider ID: N/A
321 E ALVARADO ST
FALLBROOK, CA 92028
Effective as of 01-MAR-23

RONAN, KEVIN, MD

Provider ID: N/A
321 E ALVARADO ST
FALLBROOK, CA 92028
Effective as of 01-MAY-23

PHYSICIANS ASSISTANT

SERING, MALIA, PA†

Provider ID: N/A
1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-SEP-22

PODIATRIST

FARMER, STEVEN, DPM†

Provider ID: N/A
1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-21

FARMER, STEVEN, DPM†

Provider ID: N/A
1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-22

NEGRON, RICARDO, DPM

Provider ID: N/A
1309 S MISSION RD
FALLBROOK, CA 92028

Effective as of 01-JUL-22

NEGRON, RICARDO, DPM

Provider ID: N/A
1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-21

NEGRON, RICARDO, DPM

Provider ID: N/A
1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-21

ALLERGY IMMUNOLOGY

PANGANIBAN, CHRISTINE, MD†

Provider ID: N/A
26672 PORTOLA PKWY STE 110
FOOTHILL RANCH, CA 92610

Effective as of 01-NOV-22

PANGANIBAN, CHRISTINE, MD†

Provider ID: N/A
26672 PORTOLA PKWY STE 110
FOOTHILL RANCH, CA 92610

Effective as of 01-NOV-22

YOSHII, DENIS, DO†

Provider ID: N/A
26750 TOWNE CENTRE DR STE D
FOOTHILL RANCH, CA 92610

Effective as of 01-APR-23

YOSHII, DENIS, DO†

Provider ID: N/A
26750 TOWNE CENTRE DR

STE D

FOOTHILL RANCH, CA 92610

Effective as of 01-APR-23

YOSHII, DENIS, DO†

Provider ID: N/A
26750 TOWNE CENTRE DR STE D
FOOTHILL RANCH, CA 92610
Effective as of 01-JAN-18

CERTIFIED NURSE PRACTITIONER

KHAN, AHAD, NP

Provider ID: N/A
26672 PORTOLA PKWY
FOOTHILL RANCH, CA 92610
Effective as of 01-MAY-23

LIU, GRACE, NP

Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-MAY-23

LIU, GRACE, NP

Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-MAY-23

SORIA, JULIE, NP

Provider ID: N/A
26672 PORTOLA PKWY
FOOTHILL RANCH, CA 92610
Effective as of 01-APR-22

CHIROPRACTOR

TUREK, PAUL, DC

Provider ID: N/A

27462 PORTOLA PKWY STE 201
FOOTHILL RANCH, CA 92610

Effective as of 01-JUL-21

DERMATOLOGY

AHADIAT, OMEED, MD

Provider ID: N/A

26700 TOWNE CENTRE DR STE 170
FOOTHILL RANCH, CA 92610

Effective as of 01-DEC-23

ENDOCRINOLOGY

METABOLISM DIABETES

AHL, SCOTT, DO†

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610

Effective as of 01-OCT-22

GASTROENTEROLOGY

ASHBY, KEVIN, MD

Provider ID: N/A

26700 TOWNE CENTRE DR STE 100
FOOTHILL RANCH, CA 92610

Effective as of 01-MAR-20

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE

104
FOOTHILL RANCH, CA 92610

Effective as of 01-NOV-22

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610

Effective as of 01-NOV-22

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610

Effective as of 01-OCT-23

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610

Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610

Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610

Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610

Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610

Effective as of 01-JAN-23

BEMANIAN, SHAHROOZ, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610

Effective as of 01-JAN-23

BEMANIAN, SHAHROOZ, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610

Effective as of 01-OCT-23

LEE, PAUL, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610

Effective as of 01-OCT-23

OMAN, MATTHEW, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA

92610
Effective as of 01-OCT-23

YU, VICTOR, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-23

YU, VICTOR, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-23

**OBSTETRICS /
GYNECOLOGY**

DAVIS, STEPHANIE, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
108
FOOTHILL RANCH, CA
92610

Effective as of 01-FEB-23

DEJBAKSH, SHEILA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
180
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-22

MILLER, JAMIE, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
108
FOOTHILL RANCH, CA
92610

Effective as of 01-NOV-23

PETERS, AMY, DO

Provider ID: N/A

26672 PORTOLA PKWY STE
108
FOOTHILL RANCH, CA
92610

Effective as of 01-NOV-23

PETERS, AMY, DO†

Provider ID: N/A

26672 PORTOLA PKWY STE
180
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-22

PRICE, KERRY, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
180
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

DUGGAN, VERONICA, PA

Provider ID: N/A

26672 PORTOLA PKWY STE
100
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-23

DUGGAN, VERONICA, PA

Provider ID: N/A

26672 PORTOLA PKWY STE
100
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-23

VU, BAO-KHOI, PA†

Provider ID: N/A

26781 PORTOLA PKWY STE
4E
FOOTHILL RANCH, CA
92610

Effective as of 01-SEP-20

WU, VANNA, PA

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAR-24

PULMONARY DISEASES

FRANKLIN RUTLAND, CEDRIC, MD†

Provider ID: N/A

26672 PORTOLA PKWY
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-21

RHEUMATOLOGY

MAHMOOD, FARAH, MD†

Provider ID: N/A

26700 TOWNE CENTRE DR
STE 165
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-19

SURGERY GENERAL

SALEM, YASSER, MD†

Provider ID: N/A

26781 PORTOLA PKWY STE
4E
FOOTHILL RANCH, CA
92610

Effective as of 01-AUG-20

SALEM, YASSER, MD†

Provider ID: N/A

26781 PORTOLA PKWY STE
4E
FOOTHILL RANCH, CA
92610

Effective as of 01-AUG-17

SALEM, YASSER, MD†

Provider ID: N/A

26781 PORTOLA PKWY STE
4E
FOOTHILL RANCH, CA
92610

Effective as of 01-AUG-13

SURGERY PLASTIC

DANESHMAND, HOOTAN, MD

Provider ID: N/A

27462 PORTOLA PKWY STE
100
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-22

DANESHMAND, HOOTAN, MD

Provider ID: N/A

27462 PORTOLA PKWY STE
100
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-18

DANESHMAND, HOOTAN, MD

Provider ID: N/A

27462 PORTOLA PKWY STE
100
FOOTHILL RANCH, CA
92610

Effective as of 01-APR-11

DANESHMAND, HOOTAN, MD

Provider ID: N/A

27462 PORTOLA PKWY STE
100
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-12

ALLERGY IMMUNOLOGY

BROWN, HOSEA, MD†

Provider ID: N/A

1000 E LATHAM AVE STE B
HEMET, CA 92543

Effective as of 01-FEB-22

BROWN, HOSEA, MD†

Provider ID: N/A

1000 E LATHAM AVE STE B
HEMET, CA 92543

Effective as of 01-JUL-23

BROWN, HOSEA, MD†

Provider ID: N/A

1000 E LATHAM AVE STE B
HEMET, CA 92543

Effective as of 01-MAY-15

SALEH, HANA, MD†

Provider ID: N/A

391 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-SEP-15

ANESTHESIOLOGY

DORAISWAMY, ARUL, MD†

Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-MAY-15

DORAISWAMY, ARUL, MD†

Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-MAY-15

HYUN, SUZANNE, MD

Provider ID: N/A

3989 W STETSON AVE STE
102
HEMET, CA 92545

Effective as of 01-MAR-24

JEDAMSKI, WALDTRAUT, MD

Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-OCT-19

PANG, GARY, MD†

Provider ID: N/A

☐ 3989 W STETSON AVE STE 102
HEMET, CA 92545
Effective as of 01-MAR-24

ANESTHESIOLOGY PAIN MANAGEMENT

CHEN, HAMILTON, MD†

Provider ID: N/A

☐ 3989 W STETSON AVE STE 102
HEMET, CA 92545
Effective as of 01-MAY-21

DORAISWAMY, ARUL, MD†

Provider ID: N/A

☐ 1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-NOV-17

DORAISWAMY, ARUL, MD†

Provider ID: N/A

☐ 1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-NOV-14

GUIANG, RAINIER, MD†

Provider ID: N/A

☐ 3989 W STETSON AVE STE 102
HEMET, CA 92545
Effective as of 01-MAR-24

GUIANG, RAINIER, MD†

Provider ID: N/A

☐ 3989 W STETSON AVE STE 102
HEMET, CA 92545
Effective as of 01-MAY-21

KANU, ABDUL, MD

Provider ID: N/A

☐ 1011 E DEVONSHIRE AVE
HEMET, CA 92543

Teleservice
Effective as of 01-JUN-21

LEIER, TIM, MD

Provider ID: N/A

☐ 1011 E DEVONSHIRE AVE STE 203
HEMET, CA 92543
Effective as of 01-SEP-19

PANG, GARY, MD†

Provider ID: N/A

☐ 3989 W STETSON AVE STE 102
HEMET, CA 92545
Effective as of 01-MAY-21

CARDIOLOGY

AGARWAL, ASHOK, MD

Provider ID: N/A

☐ 136 S SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-JAN-17

AGARWAL, ASHOK, MD

Provider ID: N/A

☐ 136 S SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-JAN-17

AGARWAL, ASHOK, MD

Provider ID: N/A

☐ 136 S SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-JAN-17

AMIN, JATIN, MD†

Provider ID: N/A

☐ 3853 W STETSON AVE STE 104
HEMET, CA 92545
Teleservice

Effective as of 01-JAN-19

ATTIA, NADER, DO†

Provider ID: N/A

☐ 3853 W STETSON AVE STE 104
HEMET, CA 92545
Teleservice
Effective as of 01-JAN-19

BISWAS, MIMI, MD†

Provider ID: N/A

☐ 3853 W STETSON AVE STE 104
HEMET, CA 92545
Teleservice
Effective as of 01-JAN-19

COX, JEREMY, DO†

Provider ID: N/A

☐ 3853 W STETSON AVE STE 104
HEMET, CA 92545
Effective as of 01-JAN-19

GOKHROO, RAHUL, MD†

Provider ID: N/A

☐ 949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-DEC-22

GOKHROO, RAHUL, MD†

Provider ID: N/A

☐ 949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-DEC-22

GRANT ANDERSON, BETTY, MD†

Provider ID: N/A

☐ 949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-JUL-14

GRANT ANDERSON, BETTY, MD†

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-JUN-17

MESSENGER, BRADLEY, MD†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Effective as of 01-JAN-19

RIVA, GREGORY, MD†

Provider ID: N/A

1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-MAR-14

RIVA, GREGORY, MD†

Provider ID: N/A

1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-13

SANGODKAR, SANDEEP, DO

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Effective as of 01-NOV-23

**CARDIOVASCULAR
DISEASE**

AGARWAL, ASHOK, MD

Provider ID: N/A

136 S SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-JUL-23

AGGARWAL, SAURABH, MD†

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-AUG-22

AGGARWAL, SAURABH, MD†

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-AUG-22

AGGARWAL, SAURABH, MD†

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-DEC-21

AMIN, JATIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Teleservice
Effective as of 01-SEP-18

AMIN, JATIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Teleservice
Effective as of 01-MAY-21

ATTIA, NADER, DO†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Teleservice
Effective as of 01-MAY-21

ATTIA, NADER, DO†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Teleservice
Effective as of 01-SEP-18

ATTIA, NADER, DO†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Teleservice
Effective as of 01-MAR-20

ATTIA, NADER, DO†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Teleservice
Effective as of 01-JUL-22

BISWAS, MIMI, MD†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Teleservice
Effective as of 01-SEP-18

COX, JEREMY, DO†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Effective as of 01-SEP-18

**GRANT ANDERSON, BETTY,
MD†**

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-AUG-23

PAREKH, NIRAJ, MD†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Teleservice

Effective as of 01-MAY-21

PAREKH, NIRAJ, MD†

Provider ID: N/A

☐ 3853 W STETSON AVE STE 104
HEMET, CA 92545

Teleservice

Effective as of 01-MAR-20

PAREKH, NIRAJ, MD†

Provider ID: N/A

☐ 3853 W STETSON AVE STE 104
HEMET, CA 92545

Teleservice

Effective as of 01-MAR-20

RASTOGI, ANISHA, MD†

Provider ID: N/A

☐ 1275 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-FEB-21

RASTOGI, ANISHA, MD†

Provider ID: N/A

☐ 1275 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-AUG-20

RASTOGI, ANIL, MD†

Provider ID: N/A

☐ 1275 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-SEP-00

RASTOGI, ANIL, MD†

Provider ID: N/A

☐ 1275 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-MAY-15

RASTOGI, ANIL, MD†

Provider ID: N/A

☐ 1275 E LATHAM AVE STE A

HEMET, CA 92543

Effective as of 01-SEP-09

RIVA, GREGORY, MD†

Provider ID: N/A

☐ 1275 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-MAY-15

**CERTIFIED NURSE
PRACTITIONER**

ABAYA, HONEYLYNN, NP

Provider ID: N/A

☐ 3989 W STETSON AVE STE 202
HEMET, CA 92545

Effective as of 01-OCT-23

ADEDAYO, TOLULOPE, NP†

Provider ID: N/A

☐ 422 N SAN JACINTO ST STE A
HEMET, CA 92543

Effective as of 01-APR-21

ADEDAYO, TOLULOPE, NP

Provider ID: N/A

☐ 1030 E FLORIDA AVE
HEMET, CA 92543

Effective as of 01-FEB-24

ADEGBITE, ADEKUNLE, NP†

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

ADEGBITE, ADEKUNLE, NP†

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

ADEGBITE, ADEKUNLE, NP†

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

ADEGBITE, ADEKUNLE, NP†

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-SEP-22

ADEGBITE, ADEKUNLE, NP†

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-SEP-22

AGUILAR, MICHELLE, NP†

Provider ID: N/A

☐ 1000 E LATHAM AVE STE G
HEMET, CA 92543
Effective as of 01-MAY-21

**AMJAD WARYAM, ASHEE
AMJAD, NP†**

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-AUG-21

**AMJAD WARYAM, ASHEE
AMJAD, NP†**

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-AUG-21

**AMJAD WARYAM, ASHEE
AMJAD, NP†**

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

AMJAD WARYAM, ASHEE

AMJAD, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

ANUFORO, CHINWE, NP

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAY-23

ANUFORO, CHINWE, NP

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAY-23

BAKER, SERENA, NP

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-MAY-23

BAKER, SERENA, NP

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUL-23

BAKER, SERENA, NP

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUL-23

BEDFORD, RONALD, NP†

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-SEP-22

BEDFORD, RONALD, NP†

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-SEP-22

BRAR, SUKHDEEP, NP

Provider ID: N/A

255 N GILBERT ST BLDG B4
HEMET, CA 92543
Effective as of 01-SEP-21

BRASKET, ADAM, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-NOV-21

BRASKET, ADAM, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

BRASKET, ADAM, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

EDEM, MARY, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAR-21

HUERTA, CARMEN, NP†

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-MAY-22

HUERTA, CARMEN, NP†

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543

HEMET, CA 92543
Effective as of 01-AUG-22

HUERTA, CARMEN, NP†

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-AUG-22

HUERTA, CARMEN, NP†

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-AUG-22

HUERTA, CARMEN, NP†

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-AUG-22

HUERTA, CARMEN, NP†

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-OCT-22

HUERTA, CARMEN, NP†

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-DEC-22

IGWE, CHINWENDU, NP†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-AUG-19

IGWE, CHINWENDU, NP†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-JAN-20

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-JUL-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-DEC-22

IHEMEDU, AMARACHI, NPF

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

IHEMEDU, AMARACHI, NPF

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

IHEMEDU, AMARACHI, NPF

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JAN-23

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUL-23

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUL-23

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUL-23

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUL-23

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-MAY-23

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-MAY-23

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-22

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-22

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-22

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-22

JONES, LAKESHA, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

JONES, LAKESHA, NP†
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

KUMAR, NINA, NP†
Provider ID: N/A

422 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-APR-21

KUMAR, NINA, NP
Provider ID: N/A

1030 E FLORIDA AVE
HEMET, CA 92543
Effective as of 01-FEB-24

LAWHORN, CHRISTA, NPF
Provider ID: N/A

1701 E FLORIDA AVE
HEMET, CA 92544
Effective as of 01-JAN-24

LE, NGUYEN, NP
Provider ID: N/A

1030 E FLORIDA AVE
HEMET, CA 92543
Effective as of 01-FEB-24

LEANO, ANYLOU, NP†
Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-JUL-17

MELOT, KAREN, NP
Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-20

MELOT, KAREN, NP

Provider ID: N/A
1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-20

MELOT, KAREN, NP

Provider ID: N/A
1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-20

MILLON, TINA, NPF

Provider ID: N/A
1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-SEP-23

MILLON, TINA, NPF

Provider ID: N/A
1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-SEP-23

MILLON, TINA, NPF

Provider ID: N/A
1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-SEP-23

NGUYEN, ANDY, NP†

Provider ID: N/A
2390 E FLORIDA AVE STE
104
HEMET, CA 92544
Effective as of 01-JUL-21

NGUYEN, ANDY, NP†

Provider ID: N/A
2390 E FLORIDA AVE STE
104
HEMET, CA 92544
Effective as of 01-JUL-21

O'NEIL, NICOLE, NP†

Provider ID: N/A
1701 E FLORIDA AVE
HEMET, CA 92544
Effective as of 01-MAR-22

ONUOHA, NOJA, NP†

Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-AUG-23

ONUOHA, NOJA, NP†

Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAR-23

ONUOHA, NOJA, NP†

Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAR-23

ONUOHA, NOJA, NP†

Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543*
Effective as of 01-NOV-22

ONUOHA, NOJA, NP†

Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543*
Effective as of 01-NOV-22

PAULHUS, PATRICIA, NP†

Provider ID: N/A
3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-MAR-20

PAULHUS, PATRICIA, NP†

Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-MAR-20

PAULHUS, PATRICIA, NP†
Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-MAR-20

RATAJCZAK, CELESTE, NP
Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-FEB-24

SALAS-AMIGON, BRENDA, NP†
Provider ID: N/A

391 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-AUG-18

SANCHEZ, YAHAIIRA, NP†
Provider ID: N/A

1003 E FLORIDA AVE STE 101
HEMET, CA 92543
Effective as of 01-MAR-22

SANCHEZ, YAHAIIRA, NP†
Provider ID: N/A

1003 E FLORIDA AVE STE 101
HEMET, CA 92543
Effective as of 01-DEC-22

SANCHEZ, YAHAIIRA, NP†
Provider ID: N/A

1003 E FLORIDA AVE STE 101
HEMET, CA 92543
Effective as of 01-OCT-22

SANCHEZ, YAHAIIRA, NP†
Provider ID: N/A

1003 E FLORIDA AVE STE 104
HEMET, CA 92543
Effective as of 01-OCT-22

SHARTZER, ANNA, NP†
Provider ID: N/A

903 E DEVONSHIRE AVE STE D
HEMET, CA 92543
Effective as of 01-SEP-22

SHARTZER, ANNA, NP†
Provider ID: N/A

422 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-SEP-22

SHEIKH, SARAH, NP
Provider ID: N/A

901 S STATE ST STE 600
HEMET, CA 92543
Effective as of 01-OCT-16

SHEIKH, SARAH, NP
Provider ID: N/A

901 S STATE ST STE 600
HEMET, CA 92543
Effective as of 01-MAY-23

SINGH, JOGENDRA, NP†
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-22

SINGH, JOGENDRA, NP†
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-22

SINGH, JOGENDRA, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-20

SINGH, JOGENDRA, NP†
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-20

VALDEVERONA, KATHY, NP†
Provider ID: N/A

4020 W FLORIDA AVE
HEMET, CA 92545
Effective as of 01-NOV-19

VENTURA, ALEXIS, NP
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23

VENTURA, ALEXIS, NP
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

VENTURA, ALEXIS, NP
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

VENTURA, ALEXIS, NP
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JAN-23

VENTURA, ALEXIS, NP
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-JAN-23

VIDAL, ALYSSA, NPF

Provider ID: N/A

☐ 3989 W STETSON AVE STE 202
HEMET, CA 92545

Effective as of 01-SEP-23

VIDAL, ALYSSA, NPF

Provider ID: N/A

☐ 3989 W STETSON AVE STE 202
HEMET, CA 92545

Effective as of 01-SEP-23

VIDAL, ALYSSA, NPF

Provider ID: N/A

☐ 3989 W STETSON AVE STE 202
HEMET, CA 92545

Effective as of 01-SEP-23

VIDAL, ALYSSA, NPF

Provider ID: N/A

☐ 3989 W STETSON AVE STE 202
HEMET, CA 92545

Effective as of 01-SEP-23

WILLIAM, PHEBEE, NP†

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-MAY-21

WILLIAM, PHEBEE, NP†

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-MAY-21

ZELEDON, JAIME, NP

Provider ID: N/A

☐ 422 N SAN JACINTO ST STE

B

HEMET, CA 92543

Effective as of 01-MAY-18

CHIROPRACTOR

BROWN, KEVIN, DC

Provider ID: N/A

☐ 3012 W FLORIDA AVE
HEMET, CA 92545

Effective as of 01-AUG-23

BROWN, KEVIN, DC†

Provider ID: N/A

☐ 2940 W FLORIDA AVE STE B
HEMET, CA 92545

Effective as of 01-MAR-22

BROWN, KEVIN, DC

Provider ID: N/A

☐ 3012 W FLORIDA AVE
HEMET, CA 92545

Effective as of 01-AUG-23

BROWN, KEVIN, DC†

Provider ID: N/A

☐ 2940 W FLORIDA AVE STE B
HEMET, CA 92545

Effective as of 01-MAR-22

HINES, TAYTE, DC

Provider ID: N/A

☐ 903 E DEVONSHIRE AVE STE D
HEMET, CA 92543

Effective as of 01-JAN-24

ROBINSON, DEAN, DC

Provider ID: N/A

☐ 903 E DEVONSHIRE AVE STE D
HEMET, CA 92543

Effective as of 01-JUL-22

WACHHOLZ, PAMELA, DC

Provider ID: N/A

☐ 760 W ACACIA AVE STE 113
HEMET, CA 92543

Effective as of 01-JUL-23

WACHHOLZ, PAMELA, DC

Provider ID: N/A

☐ 760 W ACACIA AVE STE 113
HEMET, CA 92543

Effective as of 01-SEP-09

WACHHOLZ, PAMELA, DC

Provider ID: N/A

☐ 760 W ACACIA AVE STE 113
HEMET, CA 92543

Effective as of 01-FEB-11

DERMATOLOGY

HARFORD, ROBERT, MD†

Provider ID: N/A

☐ 750 E LATHAM AVE STE 3
HEMET, CA 92543

Effective as of 01-DEC-20

MITCHELL, JESSE, MD

Provider ID: N/A

☐ 3989 W STETSON AVE STE 201
HEMET, CA 92545

Effective as of 01-DEC-23

MITCHELL, JESSE, MD

Provider ID: N/A

☐ 3989 W STETSON AVE STE 201
HEMET, CA 92545

Effective as of 01-DEC-23

MITCHELL, JESSE, MD

Provider ID: N/A

☐ 3989 W STETSON AVE STE 201
HEMET, CA 92545

Effective as of 01-DEC-23

MITCHELL, JESSE, MD

Provider ID: N/A

3989 W STETSON AVE STE 201
HEMET, CA 92545

Effective as of 01-DEC-23

MITCHELL, JESSE, MD†

Provider ID: N/A

3853 W STETSON AVE STE 201
HEMET, CA 92545

Effective as of 01-JUL-21

MITCHELL, JESSE, MD†

Provider ID: N/A

3853 W STETSON AVE STE 201
HEMET, CA 92545

Effective as of 01-JUL-21

MUDGE, BRADLEY, MD†

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543

Teleservice

Effective as of 01-OCT-21

OBEREMOK, STEVE, MD

Provider ID: N/A

720 E LATHAM AVE STE 1
HEMET, CA 92543*

Effective as of 01-JUL-23

OBEREMOK, STEVE, MD

Provider ID: N/A

901 S STATE ST STE 100
HEMET, CA 92543

Effective as of 01-AUG-23

SAIED, NAGI, MD†

Provider ID: N/A

850 E LATHAM AVE STE 201

HEMET, CA 92543

Teleservice

Effective as of 01-OCT-21

SAIED, NAGI, MD†

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543

Teleservice

Effective as of 01-NOV-21

SAKO, ERIC, MD†

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543

Teleservice

Effective as of 01-NOV-21

SAKO, ERIC, MD†

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543

Teleservice

Effective as of 01-OCT-21

SAKO, ERIC, MD†

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543

Teleservice

Effective as of 01-DEC-21

SAKO, ERIC, MD†

Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543

Teleservice

Effective as of 01-FEB-24

SEYFZADEH, MANOUCHEHR, MD†

Provider ID: N/A

1280 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-JUL-14

EMERGENCY MEDICINE

MATHUR, ARVIND, MD†

Provider ID: N/A

975 SAINT JOHN PL
HEMET, CA 92543

Effective as of 01-APR-23

ENDOCRINOLOGY

METABOLISM DIABETES

HAIDER, UZMA, MD†

Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543

Effective as of 01-DEC-20

HAIDER, UZMA, MD†

Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543

Effective as of 01-JUL-21

HAIDER, UZMA, MD†

Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543

Effective as of 01-NOV-23

HAIDER, SHANZAY, MD

Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543

Effective as of 01-MAR-24

HAIDER, SHANZAY, MD

Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543

Effective as of 01-MAR-24

HAIDER, SHANZAY, MD

Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-MAR-24

HAIDER, SHANZAY, MD

Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-MAR-24

HAIDER, UZMA, MD†

Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-DEC-20

FAMILY PRACTICE

**CHAMBI-HERNANDEZ, RUTH,
MD**

Provider ID: N/A

1035 SAINT JOHN PL
HEMET, CA 92543
Effective as of 01-MAY-23

GASTROENTEROLOGY

**CHAKRABARTY,
MILANKUMAR, MD†**

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-MAY-15

**CHAKRABARTY,
MILANKUMAR, MD†**

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-MAY-15

**CHAKRABARTY,
MILANKUMAR, MD†**

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-JUL-23

**CHAKRABARTY,
MILANKUMAR, MD†**

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-AUG-20

**CHAKRABARTY,
MILANKUMAR, MD†**

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-SEP-09

NAKKA, SREENIVASA, MD†

Provider ID: N/A

949 CALHOUN PL STE A
HEMET, CA 92543
Effective as of 01-JUL-23

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-MAY-22

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-JUL-23

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE

101

HEMET, CA 92543
Effective as of 01-MAY-22

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-DEC-22

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-APR-22

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-JAN-22

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
104
HEMET, CA 92543
Effective as of 01-DEC-22

**HEMATOLOGY /
ONCOLOGY**

AGAJANIAN, RICHY, MD

Provider ID: N/A

1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-JUL-23

BANTA, WARREN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105

HEMET, CA 92544
Effective as of 01-AUG-22

BANTA, WARREN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105

HEMET, CA 92544
Effective as of 01-AUG-22

BANTA, WARREN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105

HEMET, CA 92544
Effective as of 01-AUG-22

BANTA, WARREN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105

HEMET, CA 92544
Effective as of 01-AUG-22

BANTA, WARREN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105

HEMET, CA 92544
Effective as of 01-AUG-22

BASERI, BABAK, MD

Provider ID: N/A

1001 S STATE ST STE A
HEMET, CA 92543

Effective as of 01-APR-23

BELLO, OSAGIE, MD

Provider ID: N/A

2390 E FLORIDA AVE STE
105

HEMET, CA 92544
Effective as of 01-OCT-23

BELLO, OSAGIE, MD

Provider ID: N/A

2390 E FLORIDA AVE STE
105

HEMET, CA 92544
Effective as of 01-OCT-23

BELLO, OSAGIE, MD

Provider ID: N/A

2390 E FLORIDA AVE STE
105

HEMET, CA 92544
Effective as of 01-OCT-23

HUANG, DANIEL, MD

Provider ID: N/A

1001 S STATE ST STE A
HEMET, CA 92543

Effective as of 01-APR-23

LEE, BYUNG, DO†

Provider ID: N/A

2390 E FLORIDA AVE STE
105

HEMET, CA 92544
Effective as of 01-JUL-21

LEE, BYUNG, DO†

Provider ID: N/A

2390 E FLORIDA AVE STE
105

HEMET, CA 92544
Effective as of 01-JUL-21

LEE, BYUNG, DO†

Provider ID: N/A

2390 E FLORIDA AVE STE
105

HEMET, CA 92544
Effective as of 01-JUL-21

MARJON, PHILIP, MD

Provider ID: N/A

1001 S STATE ST STE A
HEMET, CA 92543

Effective as of 01-APR-23

MOST, CAROLE, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105

HEMET, CA 92544
Effective as of 01-MAR-21

MOST, CAROLE, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105

HEMET, CA 92544
Effective as of 01-SEP-18

MOST, CAROLE, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105

HEMET, CA 92544
Effective as of 01-SEP-18

MOST, CAROLE, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105

HEMET, CA 92544
Effective as of 01-SEP-18

SARWARI, NAWID, MD

Provider ID: N/A

1001 S STATE ST STE A
HEMET, CA 92543

Effective as of 01-APR-23

SAUNDERS, PHILLIP, DO

Provider ID: N/A

1001 S STATE ST STE A
HEMET, CA 92543

Effective as of 01-APR-23


SAUNDERS, PHILLIP, DO†

Provider ID: N/A


1011 E DEVONSHIRE AVE
STE 201

HEMET, CA 92543
Effective as of 01-JAN-20


SAUNDERS, PHILLIP, DO†

Provider ID: N/A
 1011 E DEVONSHIRE AVE
STE 201
HEMET, CA 92543
Effective as of 01-DEC-20


SCHWERKOSKE, JOHN, MD

Provider ID: N/A
 1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-JUL-23


SHUM, MERRILL, MD

Provider ID: N/A
 1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-JUL-23


SHUM, MERRILL, MD

Provider ID: N/A
 1011 E DEVONSHIRE AVE
STE 201
HEMET, CA 92543
Effective as of 01-JUL-23

TSAI, JAMES, MD†

Provider ID: N/A
 201 LAURSEN ST
HEMET, CA 92543
Effective as of 01-SEP-09

TSANG, WALTER, MD†


Provider ID: N/A
 2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-FEB-20

TSANG, WALTER, MD†

Provider ID: N/A
 2390 E FLORIDA AVE STE


105
HEMET, CA 92544
Effective as of 01-FEB-20

TSANG, WALTER, MD†

Provider ID: N/A
 2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-FEB-20


***HOSPICE AND PALLIATIVE
MEDICINE***

**TAECHARVONGPHAIROJ,
VEERAVAT, MD**

Provider ID: N/A
 850 E LATHAM AVE STE
205
HEMET, CA 92543
Effective as of 01-MAR-24


HOSPITALIST MD/DO

TUN, TIN, MD†


Provider ID: N/A
 1850 W FLORIDA AVE
HEMET, CA 92545
Effective as of 01-APR-23

INTERNAL MEDICINE


DHIMAN, DARSHAN, MD†

Provider ID: N/A
 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-DEC-23


DHIMAN, DARSHAN, MD†

Provider ID: N/A
 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-DEC-23


MATHIAS, HERMAN, MD†

Provider ID: N/A
 391 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-DEC-23


NAGASUNDER, ARABHI, DO

Provider ID: N/A
 3989 W STETSON AVE STE
202
HEMET, CA 92545
Teleservice
Effective as of 01-SEP-23


NAGASUNDER, ARABHI, DO

Provider ID: N/A
 3989 W STETSON AVE STE
202
HEMET, CA 92545
Teleservice
Effective as of 01-SEP-23


NAGASUNDER, ARABHI, DO

Provider ID: N/A
 3989 W STETSON AVE STE
202
HEMET, CA 92545
Teleservice
Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A
 3989 W STETSON AVE STE
202
HEMET, CA 92545
Teleservice
Effective as of 01-SEP-23

PEARCE, DANIEL, DO

Provider ID: N/A
 1030 E FLORIDA AVE
HEMET, CA 92543
Effective as of 01-OCT-23

RIVA, GREGORY, MD†

Provider ID: N/A

1275 E LATHAM AVE STE C
HEMET, CA 92543
Effective as of 01-APR-21

**TAECHARVONGPHAIROJ,
VEERAVAT, MD**

Provider ID: N/A

1030 E FLORIDA AVE
HEMET, CA 92543
Effective as of 01-JUL-23

**INTERNAL MEDICINE
GERIATRIC MEDICINE**

MATHIAS, HERMAN, MD†

Provider ID: N/A

391 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-AUG-95

**INTERVENTIONAL
CARDIOLOGY**

GOKHROO, RAHUL, MD†

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-DEC-22

PAREKH, NIRAJ, MD†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Teleservice
Effective as of 01-JAN-19

RASTOGI, ANISHA, MD†

Provider ID: N/A

1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-AUG-20

**LICENSED CLINICAL
SOCIAL WORKER**

**ARIAS-ALISHAHI, ELIZABETH,
LCSW**

Provider ID: N/A

903 E DEVONSHIRE AVE
STE D
HEMET, CA 92543
Effective as of 01-JAN-21

BRINSON, CIRSTEN, LCSW†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-22

BRINSON, CIRSTEN, LCSW†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-22

GRANDISON, BROOKE, LCSW

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-FEB-24

GRANDISON, BROOKE, LCSW

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-FEB-24

HERSH, LINDSEY, LCSW†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-AUG-22

HERSH, LINDSEY, LCSW†

Provider ID: N/A

162 N SANTA FE ST

HEMET, CA 92543
Effective as of 01-JUL-23

HERSH, LINDSEY, LCSW†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23

JONES, VALORIA, LCSW†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23

JONES, VALORIA, LCSW†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23

JONES, VALORIA, LCSW†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23

JONES, VALORIA, LCSW†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JAN-23

**PIDDINGTON, CHRISTINE,
LCSW†**

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23

**PIDDINGTON, CHRISTINE,
LCSW†**

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-DEC-22

**PIDDINGTON, CHRISTINE,
LCSW†**

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-DEC-22

**PIDDINGTON, CHRISTINE,
LCSW†**

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-MAR-21

**TABIL-GALAPON, BERNICE,
LCSW**

Provider ID: N/A

1030 E FLORIDA AVE
HEMET, CA 92543

Effective as of 01-JUL-23

**VALDEZ-HERNANDEZ, ISRAEL,
LCSW†**

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

**VALDEZ-HERNANDEZ, ISRAEL,
LCSW†**

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

**VALDEZ-HERNANDEZ, ISRAEL,
LCSW†**

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-JAN-23

**VALDEZ-HERNANDEZ, ISRAEL, CHANG, DAVID, MD†
LCSW†**

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-JAN-23

**MARRIAGE FAMILY
THERAPIST**

POOR, PATRICK, MFT†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-DEC-22

POOR, PATRICK, MFT†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-DEC-22

MEDICAL ONCOLOGY

PARSI, HOOMAN, MD

Provider ID: N/A

1001 S STATE ST STE A
HEMET, CA 92543

Effective as of 01-APR-23

SHAIKH, ANWER, MD

Provider ID: N/A

1001 S STATE ST STE A
HEMET, CA 92543

Effective as of 01-APR-23

NEPHROLOGY

CHANG, DAVID, MD†

Provider ID: N/A

1011 E DEVONSHIRE AVE
STE 201
HEMET, CA 92543

Effective as of 01-SEP-09

Provider ID: N/A

1011 E DEVONSHIRE AVE
STE 201
HEMET, CA 92543

Effective as of 01-SEP-09

CHANG, DAVID, MD†

Provider ID: N/A

850 E LATHAM AVE STE D
HEMET, CA 92543

Effective as of 01-NOV-06

**CHARLES COWAN, TRICIA,
DO†**

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-APR-23

**CHARLES COWAN, TRICIA,
DO†**

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-AUG-17

**CHARLES COWAN, TRICIA,
DO†**

Provider ID: N/A

3989 W STETSON AVE
HEMET, CA 92545

Effective as of 01-AUG-17

**CHARLES COWAN, TRICIA,
DO†**

Provider ID: N/A

3989 W STETSON AVE
HEMET, CA 92545

Effective as of 01-AUG-17

CHARLES COWAN, TRICIA,

<p>DO† Provider ID: N/A ☒ 3989 W STETSON AVE STE 202 HEMET, CA 92545 Effective as of 01-OCT-20</p>	<p>Effective as of 01-MAR-21 DHIMAN, DARSHAN, MD† Provider ID: N/A ☒ 3989 W STETSON AVE STE 202 HEMET, CA 92545 Effective as of 01-APR-18</p>	<p>Provider ID: N/A ☒ 3989 W STETSON AVE STE 202 HEMET, CA 92545 Teleservice Effective as of 01-OCT-23</p>
<p>CHARLES COWAN, TRICIA, DO† Provider ID: N/A ☒ 3989 W STETSON AVE STE 202 HEMET, CA 92545 Effective as of 01-OCT-17</p>	<p>DHIMAN, DARSHAN, MD† Provider ID: N/A ☒ 3989 W STETSON AVE STE 202 HEMET, CA 92545 Effective as of 01-DEC-15</p>	<p>NAGASUNDER, ARABHI, DO Provider ID: N/A ☒ 3989 W STETSON AVE STE 202 HEMET, CA 92545 Teleservice Effective as of 01-OCT-23</p>
<p>CHARLES COWAN, TRICIA, DO† Provider ID: N/A ☒ 3989 W STETSON AVE STE 202 HEMET, CA 92545 Effective as of 01-MAR-18</p>	<p>DHIMAN, DARSHAN, MD† Provider ID: N/A ☒ 3989 W STETSON AVE STE 202 HEMET, CA 92545 Effective as of 01-DEC-15</p>	<p>NAGASUNDER, ARABHI, DO Provider ID: N/A ☒ 3989 W STETSON AVE STE 202 HEMET, CA 92545 Teleservice Effective as of 01-NOV-23</p>
<p>CHARLES COWAN, TRICIA, DO† Provider ID: N/A ☒ 3989 W STETSON AVE STE 202 HEMET, CA 92545 Effective as of 01-SEP-17</p>	<p>DHIMAN, DARSHAN, MD† Provider ID: N/A ☒ 3989 W STETSON AVE STE 202 HEMET, CA 92545 Effective as of 01-DEC-15</p>	<p>NAGASUNDER, ARABHI, DO Provider ID: N/A ☒ 3989 W STETSON AVE STE 202 HEMET, CA 92545 Teleservice Effective as of 01-FEB-24</p>
<p>CHARLES COWAN, TRICIA, DO† Provider ID: N/A ☒ 3989 W STETSON AVE STE 202 HEMET, CA 92545 Effective as of 01-SEP-17</p>	<p>DHIMAN, DARSHAN, MD† Provider ID: N/A ☒ 3989 W STETSON AVE STE 202 HEMET, CA 92545 Effective as of 01-DEC-15</p>	<p>NATH, ASHOK, MD† Provider ID: N/A ☒ 3889 W STETSON AVE STE 100 HEMET, CA 92545 Effective as of 01-FEB-21</p>
<p>DHIMAN, DARSHAN, MD† Provider ID: N/A ☒ 3989 W STETSON AVE STE 202 HEMET, CA 92545</p>	<p>ISHAK, SALAM, MD† Provider ID: N/A ☒ 3989 W STETSON AVE STE 202 HEMET, CA 92545 Effective as of 01-AUG-20</p>	<p>NATH, ASHOK, MD† Provider ID: N/A ☒ 3989 W STETSON AVE STE 202 HEMET, CA 92545 Effective as of 01-APR-20</p>

YAN, ERIC, MD

Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545

Effective as of 01-JUN-23

YAN, ERIC, MD

Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545

Effective as of 01-JUN-23

YAN, ERIC, MD

Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545

Effective as of 01-JUN-23

YOUSSEF, AMR, DO†

Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545

Effective as of 01-SEP-22

YOUSSEF, AMR, DO†

Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545

Effective as of 01-SEP-22

YOUSSEF, AMR, DO†

Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545

Effective as of 01-JUN-22

**OBSTETRICS /
GYNECOLOGY**

NIHIRA, MIKIO, MD†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-NOV-20

NIHIRA, MIKIO, MD†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-NOV-20

NIHIRA, MIKIO, MD†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-NOV-20

REY, RODOLFO, MD†

Provider ID: N/A

903 E DEVONSHIRE AVE
STE D
HEMET, CA 92543

Effective as of 01-JUL-22

RIZVI, SYED, MD†

Provider ID: N/A

1600 E FLORIDA AVE STE 315
HEMET, CA 92544

Effective as of 01-FEB-17

RIZVI, SYED, MD†

Provider ID: N/A

1600 E FLORIDA AVE STE 315
HEMET, CA 92544

Effective as of 01-MAR-22

URSO, MARY JO, DO†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-DEC-20

URSO, MARY JO, DO†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-DEC-20

URSO, MARY JO, DO†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-DEC-20

URSO, MARY JO, DO†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-DEC-20

URSO, MARY JO, DO†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-DEC-20

URSO, MARY JO, DO†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-DEC-20

URSO, MARY JO, DO†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-JUL-23

**OCCUPATIONAL
THERAPIST**

BONILLA, EDWARD, OT

Provider ID: N/A

3989 W STETSON AVE STE 105
HEMET, CA 92545

Effective as of 01-DEC-23

BONILLA, EDWARD, OT

Provider ID: N/A

3989 W STETSON AVE STE 105
HEMET, CA 92545

Effective as of 01-DEC-23

JENSEN, BROOKE, OT†

Provider ID: N/A

3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-MAY-21

JENSEN, BROOKE, OT†

Provider ID: N/A

3889 W STETSON AVE STE 150
HEMET, CA 92545

Effective as of 01-JAN-20

OPHTHALMOLOGY

CARLSON, JOHN, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-FEB-22

CARLSON, JOHN, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-AUG-20

CARLSON, JOHN, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JAN-22

CARLSON, JOHN, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-MAY-14

CHOW, JASON, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-SEP-22

CHOW, JASON, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JUL-23

CHOW, JASON, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-OCT-22

CHOW, JASON, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-FEB-24

DONALDSON, JARED, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-DEC-22

DONALDSON, JARED, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-SEP-22

DONALDSON, JARED, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JAN-23

DONALDSON, JARED, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-MAY-21

JACOBS, JEFFREY, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE 207
HEMET, CA 92544

Effective as of 01-NOV-08

JACOBS, JEFFREY, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE 207
HEMET, CA 92544

Effective as of 01-JUL-18

JACOBS, JEFFREY, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE 207
HEMET, CA 92544

Effective as of 01-JUL-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE 207
HEMET, CA 92544

Effective as of 01-SEP-09

JACOBSON, ARTHUR, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE 207
HEMET, CA 92544

Effective as of 01-SEP-09

JACOBSON, ARTHUR, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE

207
HEMET, CA 92544
Effective as of 01-JUL-23

JACOBSON, ARTHUR, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-MAR-98

JOHNSON, ROGER, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JUL-23

JOSEPH, JEFFREY, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-DEC-21

JOSEPH, JEFFREY, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-AUG-20

JOSEPH, JEFFREY, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-AUG-19

LEE, JOHN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-JAN-11

LEE, JOHN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE

207
HEMET, CA 92544
Effective as of 01-FEB-11

LEE, JOHN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-MAR-14

LEE, JOHN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-JUL-23

NAMBIAR, MARGARET, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-FEB-20

PHILLIPS, BARRATT, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-SEP-09

PHILLIPS, BARRATT, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-MAY-14

SHELTON, RAYMOND, MD

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-MAY-23

SORENSEN, ROBERT, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JUL-23

SORENSEN, ROBERT, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-SEP-09

SORENSEN, ROBERT, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-DEC-21

SORENSEN, ROBERT, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JAN-22

VIDOR, IRA, MD†

Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-JUL-19

WARNER, MICHAEL, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207

HEMET, CA 92544
Teleservice
Effective as of 01-JUL-23

WARNER, MICHAEL, MD†

Provider ID: N/A
2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Teleservice
Effective as of 01-MAR-14

WARNER, MICHAEL, MD†

Provider ID: N/A
2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Teleservice
Effective as of 01-MAR-14

WARNER, MICHAEL, MD†

Provider ID: N/A
2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Teleservice
Effective as of 01-SEP-09

OPTOMETRIST

ARCHIBALD, JOHN, OD†

Provider ID: N/A
3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A
3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-DEC-23

BARR, AUSTIN, OD

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-MAR-23

BARR, AUSTIN, OD

Provider ID: N/A
2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A
2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A
2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-NOV-22

COLEMAN, BROOKE, OD†

Provider ID: N/A
3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-AUG-20

COLEMAN, BROOKE, OD†

Provider ID: N/A
3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-11

COLEMAN, BROOKE, OD†

Provider ID: N/A
3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-23

FENNEMA, ERIC, OD†

Provider ID: N/A
3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-SEP-22

FENNEMA, ERIC, OD†

Provider ID: N/A
3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-FEB-22

LANE, KEVIN, OD†

Provider ID: N/A
2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-FEB-11

LANE, KEVIN, OD†

Provider ID: N/A
2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-SEP-09

LANE, KEVIN, OD†

Provider ID: N/A
2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-JUL-23

LARSON, BRETT, OD†

Provider ID: N/A
3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-23

LARSON, BRETT, OD†

Provider ID: N/A
3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-AUG-20

LARSON, BRETT, OD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-FEB-22

LARSON, BRETT, OD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-SEP-10

MC CLEARY, DAVID, OD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-AUG-18

MC CLEARY, DAVID, OD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-DEC-21

MC CLEARY, DAVID, OD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-23

TADROS, JESSICA, OD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-JUL-23

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-JUL-23

**PEDIATRIC
ENDOCRINOLOGY**

SEYED, KAZEM, MD†

Provider ID: N/A

750 E LATHAM AVE STE 1
HEMET, CA 92543
Effective as of 01-MAY-15

SEYED, KAZEM, MD†

Provider ID: N/A

750 E LATHAM AVE STE 1
HEMET, CA 92543
Effective as of 01-MAY-15

SEYED, KAZEM, MD†

Provider ID: N/A

750 E LATHAM AVE STE 1
HEMET, CA 92543
Effective as of 01-OCT-10

**PHYSICAL MEDICINE /
REHABILITATION**

AILINANI, HARY, MD

Provider ID: N/A

1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-MAY-21

CHEN, HAMILTON, MD†

Provider ID: N/A

3989 W STETSON AVE STE
102
HEMET, CA 92545
Effective as of 01-MAR-24

LEE, JONATHAN KWANG, MD†

Provider ID: N/A

3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-JUL-15

NIKACHINA, ANNA, MD†

Provider ID: N/A

3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-MAY-21

PHYSICIANS ASSISTANT

ANDERSON, MATTHEW, PA†

Provider ID: N/A

3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-AUG-21

BAKER, ROBERT, PA

Provider ID: N/A

1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

1011 E DEVONSHIRE AVE

STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

CAGATAY, HARRIER, PA†
Provider ID: N/A

422 N SAN JACINTO ST STE
B-C
HEMET, CA 92543
Effective as of 01-AUG-20

CAGATAY, HARRIER, PA†
Provider ID: N/A

1011 E DEVONSHIRE AVE
HEMET, CA 92543
Effective as of 01-AUG-20

CERALDE, ALAN, PA†
Provider ID: N/A

3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-NOV-16

CERALDE, ALAN, PA†
Provider ID: N/A

3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-AUG-16

CERALDE, ALAN, PA†
Provider ID: N/A

3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-AUG-16

CERALDE, ALAN, PA†
Provider ID: N/A

3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-AUG-16

CURTIS, DANIEL, PA†
Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-MAY-23

CURTIS, DANIEL, PA†
Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-DEC-22

CURTIS, DANIEL, PA†
Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-DEC-22

DE CARO, ROBERT, PA†
Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-OCT-19

DIETZLER, MARQUE, PA†
Provider ID: N/A

4020 W FLORIDA AVE
HEMET, CA 92545
Effective as of 01-JUL-19

FELIX, FRANCISCO, PA
Provider ID: N/A

1011 E DEVONSHIRE AVE
HEMET, CA 92543
Effective as of 01-AUG-23

FELIX, FRANCISCO, PA
Provider ID: N/A

1011 E DEVONSHIRE AVE
HEMET, CA 92543
Effective as of 01-AUG-23

GONZALEZ, KEVIN, PA
Provider ID: N/A

3989 W STETSON AVE STE

201
HEMET, CA 92545
Effective as of 01-DEC-23

GONZALEZ, KEVIN, PA
Provider ID: N/A

3989 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-DEC-23

GONZALEZ, KEVIN, PA
Provider ID: N/A

3989 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-DEC-23

GONZALEZ, KEVIN, PA
Provider ID: N/A

3989 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-DEC-23

HUNSAKER, NALANI, PA†
Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-NOV-23

HUNSAKER, NALANI, PA†
Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-DEC-20

HUNSAKER, NALANI, PA†
Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-DEC-20

LANIER, JAME, PA†
Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-OCT-19

LANIER, JAME, PA†

Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-JUL-17

MACHO, DANIELLA, PA†

Provider ID: N/A

1701 E FLORIDA AVE
HEMET, CA 92544
Effective as of 01-FEB-17

MITCHELL, PAUL, PA

Provider ID: N/A

422 N SAN JACINTO ST STE
B
HEMET, CA 92543
Effective as of 01-JUN-18

MITCHELL, PAUL, PA

Provider ID: N/A

1011 E DEVONSHIRE AVE
STE 101
HEMET, CA 92543
Effective as of 01-FEB-24

MOORE, PAMELA, PA†

Provider ID: N/A

3889 W STETSON AVE STE
120
HEMET, CA 92545
Effective as of 01-DEC-17

RODDICK, JASON, PA†

Provider ID: N/A

3853 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-JUL-23

RODDICK, JASON, PA

Provider ID: N/A

3989 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-DEC-23

RODDICK, JASON, PA

Provider ID: N/A

3989 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-DEC-23

RODDICK, JASON, PA

Provider ID: N/A

3989 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-DEC-23

RODDICK, JASON, PA

Provider ID: N/A

3989 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-DEC-23

SHORES, CLORINDA, PA†

Provider ID: N/A

255 N GILBERT ST BLDG B4
HEMET, CA 92543
Effective as of 01-OCT-17

SMITH, ANTHONY, PA†

Provider ID: N/A

3889 W STETSON AVE STE
200
HEMET, CA 92545
Effective as of 01-JUN-18

SMITH, ANTHONY, PA†

Provider ID: N/A

3889 W STETSON AVE STE
200
HEMET, CA 92545

Effective as of 01-JUN-18

SZCZESIK, KRYSTIAN, PA†

Provider ID: N/A

3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-MAY-18

SZCZESIK, KRYSTIAN, PA†

Provider ID: N/A

3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-MAY-18

SZCZESIK, KRYSTIAN, PA†

Provider ID: N/A

3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-MAY-18

PODIATRIST

BRAHM, STEPHEN, DPM†

Provider ID: N/A

995 SAINT JOHN PL STE B
HEMET, CA 92543
Effective as of 01-MAY-17

HAAS, RICHARD, DPM†

Provider ID: N/A

760 W ACACIA AVE STE 117
HEMET, CA 92543
Effective as of 01-JUL-23

PAOLERCIO, NANCY, DPM

Provider ID: N/A

255 N GILBERT ST STE B1
HEMET, CA 92543
Effective as of 01-MAR-17

PAOLERCIO, NANCY, DPM

Provider ID: N/A

☐ 255 N GILBERT ST STE B1
HEMET, CA 92543
Effective as of 01-MAR-17

PAOLERCIO, NANCY, DPM

Provider ID: N/A

☐ 255 N GILBERT ST STE B1
HEMET, CA 92543
Effective as of 01-MAR-17

PSYCHIATRY

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

☐ 361 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-SEP-17

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

☐ 361 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-MAR-15

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

☐ 361 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-JUN-17

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

☐ 361 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-SEP-17

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

☐ 361 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-MAR-15

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

☐ 361 N SAN JACINTO ST

HEMET, CA 92543
Effective as of 01-JUN-17

JAKKULA, JAGAN, MD†

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-NOV-23

JAKKULA, JAGAN, MD†

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-20

JAKKULA, JAGAN, MD†

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-AUG-22

JAKKULA, JAGAN, MD†

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-AUG-22

JAKKULA, JAGAN, MD†

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-NOV-23

JAKKULA, JAGAN, MD†

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-20

JAKKULA, JAGAN, MD†

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-AUG-22

JAKKULA, JAGAN, MD†

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-AUG-22

KUNAM, SYAM, MD

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAR-24

KUNAM, SYAM, MD

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAR-24

PERSAUD, PRIA, MD

Provider ID: N/A

☐ 903 E DEVONSHIRE AVE
STE D
HEMET, CA 92543
Effective as of 01-AUG-20

PERSAUD, PRIA, MD

Provider ID: N/A

☐ 903 E DEVONSHIRE AVE
STE D
HEMET, CA 92543
Effective as of 01-AUG-20

**PUCHAKAYALA, NANDITA,
MD†**

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-SEP-23

**PUCHAKAYALA, NANDITA,
MD†**

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-JUN-21

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-SEP-23

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-JUN-21

PSYCHOLOGIST

DUNN, JOSEPH, PhD

Provider ID: N/A

1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543

Effective as of 01-JUN-23

DUNN, JOSEPH, PhD

Provider ID: N/A

1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543

Effective as of 01-JUN-23

PULMONARY DISEASES

DHANANI, YURZUL, MD†

Provider ID: N/A

1275 E LATHAM AVE STE C
HEMET, CA 92543

Effective as of 01-SEP-09

DHANANI, YURZUL, MD†

Provider ID: N/A

1275 E LATHAM AVE STE C
HEMET, CA 92543

Effective as of 01-MAR-14

DHANANI, YURZUL, MD†

Provider ID: N/A

1275 E LATHAM AVE STE C
HEMET, CA 92543

Effective as of 01-JUL-23

LU, CHONG PING, MD†

Provider ID: N/A

1000 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-SEP-00

LU, CHONG PING, MD†

Provider ID: N/A

1000 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-SEP-09

LU, CHONG PING, MD†

Provider ID: N/A

1000 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-JUL-23

LU, CHONG PING, MD†

Provider ID: N/A

1000 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-SEP-09

RADIATION ONCOLOGY

BELL, DAVID, MD†

Provider ID: N/A

430 W STETSON AVE
HEMET, CA 92543

Effective as of 01-OCT-21

RHA, JANICE, MD†

Provider ID: N/A

430 W STETSON AVE
HEMET, CA 92543

Effective as of 01-DEC-21

RADIOLOGY DIAGNOSTIC

BURROUGHS, GLORIA, MD†

Provider ID: N/A

850 E LATHAM AVE STE 101
HEMET, CA 92543

Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD†

Provider ID: N/A

540 N JACINTO ST
HEMET, CA 92543

Effective as of 01-MAR-07

BURROUGHS, GLORIA, MD†

Provider ID: N/A

850 E LATHAM AVE STE 101
HEMET, CA 92543

Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD†

Provider ID: N/A

850 E LATHAM AVE STE 101
HEMET, CA 92543

Effective as of 01-OCT-17

REGISTERED PHYSICAL THERAPIST

MONTERO, MARIA, PT

Provider ID: N/A

1515 W FLORIDA AVE STE E
HEMET, CA 92543

Effective as of 01-APR-23

MONTERO, MARIA, PT

Provider ID: N/A

1515 W FLORIDA AVE STE E
HEMET, CA 92543

Effective as of 01-APR-23

SMITH, DIANNE, PT†


Provider ID: N/A

1515 W FLORIDA AVE STE E


HEMET, CA 92543
Effective as of 01-JUN-17

RHEUMATOLOGY


COLBURN, KEITH, MD†

Provider ID: N/A
 949 CALHOUN PL STE F
HEMET, CA 92543
Effective as of 01-MAR-21


MEHTA, AMAL, MD†

Provider ID: N/A
 949 CALHOUN PL STE F
HEMET, CA 92543
Effective as of 01-SEP-18


MEHTA, AMAL, MD†

Provider ID: N/A
 949 CALHOUN PL STE F
HEMET, CA 92543
Effective as of 01-JUL-23

RAMASWAMY, DHARMARAJAN, MD†


Provider ID: N/A
 949 CALHOUN PL STE F
HEMET, CA 92543
Effective as of 01-JUL-23

RAMASWAMY, DHARMARAJAN, MD†

Provider ID: N/A
 949 CALHOUN PL STE F
HEMET, CA 92543
Effective as of 01-SEP-18


SURGERY COLON SURGERY

GORSKI, TITO, MD†

Provider ID: N/A
 3853 W STETSON AVE STE
105


HEMET, CA 92545
Effective as of 01-MAY-22

GORSKI, TITO, MD†


Provider ID: N/A
 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

SURGERY GENERAL


ATCHISON, MARVIN, MD†

Provider ID: N/A
 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-SEP-22


ATCHISON, MARVIN, MD†

Provider ID: N/A
 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22


ATCHISON, MARVIN, MD†

Provider ID: N/A
 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

ATCHISON, MARVIN, MD†


Provider ID: N/A
 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-DEC-20

ATCHISON, MARVIN, MD†


Provider ID: N/A
 3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-DEC-21


ATCHISON, MARVIN, MD†

Provider ID: N/A
 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-JUL-21


ATCHISON, MARVIN, MD†

Provider ID: N/A
 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-JUL-21


BARRERA, KAYLENE, MD†

Provider ID: N/A
 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22


BARRERA, KAYLENE, MD†

Provider ID: N/A
 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-APR-22

BARRERA, KAYLENE, MD†

Provider ID: N/A
 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

BARRERA, KAYLENE, MD†

Provider ID: N/A
 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-SEP-22

GORSKI, TITO, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-SEP-22

GORSKI, YARA, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-SEP-22

GORSKI, TITO, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-APR-22

GORSKI, TITO, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-FEB-24

IGWE, DANIEL, MD†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-JUL-18

IGWE, DANIEL, MD†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-JUL-18

IGWE, DANIEL, MD†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-JUL-18

JOHNSEN, HEGE, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-SEP-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-MAY-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-MAY-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-APR-22

MAC, OLIVIA, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-DEC-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-APR-20

NAFIU, BOLAJI, MD†

Provider ID: N/A

3853 W STETSON AVE STE

105

HEMET, CA 92545

Effective as of 01-SEP-22

NOURI, SARVENAZ, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-NOV-22

SHARMA, SURENDRA, MD†

Provider ID: N/A

4020 W FLORIDA AVE
HEMET, CA 92545

Effective as of 01-SEP-00

SHARMA, SURENDRA, MD†

Provider ID: N/A

4020 W FLORIDA AVE
HEMET, CA 92545

Effective as of 01-SEP-09

SHARMA, SURENDRA, MD†

Provider ID: N/A

4020 W FLORIDA AVE
HEMET, CA 92545

Effective as of 01-SEP-09

TIU, BRIAN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-SEP-22

WANG, XIUJIE, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-SEP-19

WANG, XIUJIE, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-DEC-21

**SURGERY GENERAL
VASCULAR**

GORSKI, YARA, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-MAY-22

GORSKI, YARA, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-MAY-22

KARMUR, AMIT, DO†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-JAN-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-DEC-21

NAFIU, BOLAJI, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-MAY-22

TIU, BRIAN, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-APR-22

WANG, XIUJIE, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-OCT-20

WANG, XIUJIE, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-MAY-22

WANG, XIUJIE, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-MAY-22

WANG, XIUJIE, MD†

Provider ID: N/A

3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-OCT-20

SURGERY HEAD

LE, SANG, MD†

Provider ID: N/A

3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-JUL-15

SURGERY ORTHOPEDIC

ALLEN, JONATHAN, MD†

Provider ID: N/A

3889 W STETSON AVE STE 100
HEMET, CA 92545
Teleservice
Effective as of 01-JUL-15

ALLEN, JONATHAN, MD†

Provider ID: N/A

3889 W STETSON AVE STE 100
HEMET, CA 92545
Teleservice
Effective as of 01-DEC-21

ALLEN, JONATHAN, MD†

Provider ID: N/A

3889 W STETSON AVE STE 100
HEMET, CA 92545
Teleservice
Effective as of 01-DEC-21

BURTON, PAUL, DO†

Provider ID: N/A

3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-DEC-21

BURTON, PAUL, DO†

Provider ID: N/A

3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-DEC-21

BURTON, PAUL, DO†

Provider ID: N/A

3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAR-21

BURTON, PAUL, DO†

Provider ID: N/A

☐ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-JUL-15

ELSISSY, PETER, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-MAY-16

ELSISSY, PETER, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-AUG-21

ELSISSY, PETER, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-AUG-21

GRAMES, BARRY, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-MAY-16

GRAMES, BARRY, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE 200
HEMET, CA 92545

Effective as of 01-MAR-21

GUSTAFSON, GEORGE, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE 100

HEMET, CA 92545

Effective as of 01-AUG-15

HADLEY, ZACHARY, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE
HEMET, CA 92545

Teleservice

Effective as of 01-AUG-20

HADLEY, ZACHARY, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-MAY-21

HADLEY, ZACHARY, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-MAR-19

LAROSE, CONNOR, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-MAR-21

LE, SANG, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-MAR-21

LE, SANG, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-NOV-16

LE, SANG, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-JUL-15

LE, SANG, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-JUL-15

PANSE, MILIND, MD†

Provider ID: N/A

☐ 1225 E LATHAM AVE STE A
HEMET, CA 92543*

Effective as of 01-JUL-23

PATTON, DANIEL, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-JUL-21

PATTON, DANIEL, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-JAN-20

WONG, ANDREW, MD†

Provider ID: N/A

☐ 1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543

Effective as of 01-NOV-09

UROLOGY

NIHIRA, MIKIO, MD†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-OCT-21

NIHIRA, MIKIO, MD†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-OCT-21

FAMILY PRACTICE

CHISUM, FAITH, MD

Provider ID: N/A

949 PALM AVE
IMPERIAL BEACH, CA 91932
Effective as of 01-FEB-23

LARA, LESLEY, MD†

Provider ID: N/A

949 PALM AVE
IMPERIAL BEACH, CA
91932*
Effective as of 01-OCT-22

**SUMMERS-DAY, COURTNEY,
MD†**

Provider ID: N/A

949 PALM AVE
IMPERIAL BEACH, CA 91932
Effective as of 01-JUL-22

INTERNAL MEDICINE

RYAN, DANA, MD

Provider ID: N/A

949 PALM AVE
IMPERIAL BEACH, CA 91932
Effective as of 01-APR-23

**REGISTERED PHYSICAL
THERAPIST**

CHENG, BRANDON, PT

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-FEB-24

DORSEY, KYLE, PT

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-FEB-24

HERMAN, RACHEL, PT

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-FEB-24

KARANDE, PRACHI, PT†

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-JAN-22

NGUYEN, TIA, PT

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-MAR-24

NOVENCIDO, ANDREW, PT†

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-SEP-22

SUGGS, SARAH, PT

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-MAY-23

VILLANUEVA, GIOVANNI, PT†

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-JAN-21

ALLERGY IMMUNOLOGY

CARR, WARNER, MD

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-JUL-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-JUL-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-DEC-21

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-DEC-21

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-DEC-21

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-DEC-21

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-DEC-21

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-JUL-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23

LEE-KIM, CHRISTINE, DO

Provider ID: N/A

15785 LAGUNA CANYON

RD STE 100

IRVINE, CA 92618

Effective as of 01-FEB-23

LEE-KIM, CHRISTINE, DO

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-FEB-23

MEHTA, VINAY, MD

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23

VENKAT, GEETA, MD†

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-OCT-17

VENKAT, GEETA, MD†

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-OCT-17

ANESTHESIOLOGY

HO, LARRY, MD

Provider ID: N/A

15701 ROCKFIELD BLVD
IRVINE, CA 92618
Effective as of 01-SEP-10

PERERA-THANGARATNAM, D, MD†

Provider ID: N/A

5 HOLLAND STE 101
IRVINE, CA 92618
Effective as of 01-SEP-19

ANESTHESIOLOGY PAIN MANAGEMENT

BESHAI, ALFRED, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 210
IRVINE, CA 92618
Effective as of 01-JUN-22

BESHAI, ALFRED, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 210
IRVINE, CA 92618

Effective as of 01-DEC-23

HO, LARRY, MD

Provider ID: N/A

15701 ROCKFIELD BLVD
IRVINE, CA 92618

Effective as of 01-OCT-01

HO, LARRY, MD

Provider ID: N/A

15701 ROCKFIELD BLVD
IRVINE, CA 92618

Effective as of 01-APR-11

JILLANI, ASIF, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-NOV-17

JILLANI, ASIF, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-NOV-17

MAHROU, REZA, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 345
IRVINE, CA 92618

Effective as of 01-JAN-15

MAHROU, REZA, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 345
IRVINE, CA 92618

Effective as of 01-JAN-15

RAFIZAD, AMIR, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 345
IRVINE, CA 92618

Effective as of 01-JAN-15

RAFIZAD, AMIR, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 345
IRVINE, CA 92618

Effective as of 01-JAN-15

AUDIOLOGIST

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-NOV-22

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-NOV-22

PANEK, KRISTI, AuD

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-NOV-22

PANEK, KRISTI, AuD

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-NOV-22

CARDIAC

ELECTROPHYSIOLOGY

BURRIS, RYAN, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-NOV-22

BURRIS, RYAN, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-NOV-22

MITIKU, TEFERI, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-FEB-22

MITIKU, TEFERI, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-FEB-22

WARRIER, NIKHIL, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-OCT-23

CARDIOLOGY

BERG, CHRISTOPHER, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

BERG, CHRISTOPHER, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

BERG, CHRISTOPHER, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

BERG, CHRISTOPHER, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

BERG, CHRISTOPHER, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

ESLAMI-FARSANI, MAHMOUD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

ESLAMI-FARSANI, MAHMOUD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

HOWELL, STACEY, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

HOWELL, STACEY, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

HOWELL, STACEY, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

HOWELL, STACEY, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

HOWELL, STACEY, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

KAZEMI, SEPIDEH, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 601
IRVINE, CA 92618

Effective as of 01-JAN-21

NGUYEN, HUY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-SEP-17

NGUYEN, HUY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-SEP-17

NGUYEN, HUY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-JAN-21

SCHACHTER, JESSICA, DO

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

SCHACHTER, JESSICA, DO

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

SCHACHTER, JESSICA, DO

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

SCHACHTER, JESSICA, DO

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

SCHACHTER, JESSICA, DO

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 708
 IRVINE, CA 92618
 Effective as of 01-NOV-23

WERTMAN, BRETT, MD

Provider ID: N/A
 16305 SAND CANYON AVE
 STE 255
 IRVINE, CA 92618
 Effective as of 01-SEP-17

WERTMAN, BRETT, MD

Provider ID: N/A
 16305 SAND CANYON AVE
 STE 255
 IRVINE, CA 92618
 Effective as of 01-JAN-21

WERTMAN, BRETT, MD

Provider ID: N/A
 16305 SAND CANYON AVE
 STE 255
 IRVINE, CA 92618
 Effective as of 01-SEP-17

YALVAC, ETHAN, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 201
 IRVINE, CA 92618
 Effective as of 01-APR-18

YALVAC, ETHAN, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 201
 IRVINE, CA 92618
 Effective as of 01-JAN-21

YALVAC, ETHAN, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 201

IRVINE, CA 92618
 Effective as of 01-APR-18

**CARDIOVASCULAR
DISEASE**

ASHTIANI, ALI, MD

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 201
 IRVINE, CA 92618
 Effective as of 01-OCT-23

ASHTIANI, ALI, MD

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 201
 IRVINE, CA 92618
 Effective as of 01-MAY-22

ASHTIANI, ALI, MD

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 201
 IRVINE, CA 92618
 Effective as of 01-FEB-22

ASHTIANI, ALI, MD

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 201
 IRVINE, CA 92618
 Effective as of 01-FEB-22

COHEN, STEPHEN, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 201
 IRVINE, CA 92618
 Effective as of 01-APR-18

COHEN, STEPHEN, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 201

IRVINE, CA 92618
 Effective as of 01-APR-18

COHEN, STEPHEN, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 201
 IRVINE, CA 92618
 Effective as of 01-MAY-22

COHEN, STEPHEN, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 201
 IRVINE, CA 92618
 Effective as of 01-APR-18

COHEN, STEPHEN, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 201
 IRVINE, CA 92618
 Effective as of 01-OCT-23

DOAN VAN, NICOLAS, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 708
 IRVINE, CA 92618
 Effective as of 01-DEC-21

DOAN VAN, NICOLAS, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 708
 IRVINE, CA 92618
 Effective as of 01-OCT-23

ELSAYED, SARAH SABRY, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
 STE 708
 IRVINE, CA 92618
 Effective as of 01-OCT-23

ELSAYED, SARAH SABRY, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-APR-22

ELSAYED, SARAH SABRY, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-JAN-22

ESLAMI, BAHRAM, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

ESLAMI, BAHRAM, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

ESLAMI, BAHRAM, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

ESLAMI, BAHRAM, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

ESLAMI, BAHRAM, MD†

Provider ID: N/A

16300 SAND CANYON AVE

STE 201

IRVINE, CA 92618

Effective as of 01-OCT-23

ESLAMI-FARSANI, MAHMOUD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-OCT-23

ESLAMI-FARSANI, MAHMOUD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

MELTZER, PAUL, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

MELTZER, PAUL, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-MAY-22

MELTZER, PAUL, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

MELTZER, PAUL, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201

IRVINE, CA 92618

Effective as of 01-APR-18

MELTZER, PAUL, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-JAN-20

MELTZER, PAUL, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-OCT-23

NGUYEN, HOANG, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-DEC-21

NGUYEN, HOANG, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-OCT-23

NGUYEN, HUY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-JAN-20

NI, YU-MING, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-OCT-23

NI, YU-MING, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-AUG-22

PAGANO, JAMES, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

PATEL, SANJIV, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-JAN-22

PATEL, SANJIV, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-OCT-23

WARRIER, NIKHIL, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-DEC-21

WERTMAN, BRETT, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-JAN-20

WONG, JENNIFER, MD†

Provider ID: N/A

16300 SAND CANYON AVE

STE 708

IRVINE, CA 92618

Effective as of 01-JAN-22

WONG, JENNIFER, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-OCT-23

YALVAC, ETHAN, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-MAY-22

YALVAC, ETHAN, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-JAN-20

YALVAC, ETHAN, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-OCT-23

YANG, TAE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-OCT-23

YANG, TAE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-JAN-22

CERTIFIED

ACUPUNCTURIST

CHOI, JI, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-FEB-23

CHOI, JI, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-OCT-22

CHOI, JI, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-OCT-22

CHOI, JI, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-OCT-22

CHOI, JI, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-OCT-22

CHOI, JI, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-MAR-22

HONG, HEE, LAC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-AUG-22

HONG, HEE, LAC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-AUG-22

KIM, LAUREN SOOJIN, LAC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-MAY-21

KIM, CHEL, LAC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-MAY-21

KIM, LAUREN SOOJIN, LAC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-MAY-21

LEE, BRIAN, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-MAY-21

LEE, BRIAN, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-MAY-21

LEE, BRIAN, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-MAY-21

LEE, BRIAN, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-MAY-21

LEE, BRIAN, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-MAY-21

LEE, SEMI, LAC

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-JUL-23

LEE, SEMI, LAC

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-JUL-23

LEE, SEMI, LAC

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-JUL-23

LEE, SEMI, LAC

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-JUL-23

LEE, SEMI, LAC

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-JUN-23

LEE, BRIAN, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-FEB-23

LEE, BRIAN, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-AUG-22

PARSI KANEMOTO, MARYAM, LAC†

Provider ID: N/A

22 ODYSSEY STE 165
IRVINE, CA 92618
Effective as of 01-SEP-21

**CERTIFIED NURSE
PRACTITIONER**

CARR, CHERYL, NP

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618

Effective as of 01-APR-23

CARR, CHERYL, NP

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618

Effective as of 01-APR-23

CARR, CHERYL, NP

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618

Effective as of 01-APR-23

CARR, CHERYL, NP

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618

Effective as of 01-MAY-23

CARR, CHERYL, NP

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618

Effective as of 01-MAY-23

CHOI, RANA, NP†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 210
IRVINE, CA 92618

Effective as of 01-SEP-19

DESAI, SONAM, NPF†

Provider ID: N/A

16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618*

Effective as of 01-OCT-22

FERRANTE, JADE, NP

Provider ID: N/A

8607 IRVINE CENTER DR
IRVINE, CA 92618

Effective as of 01-NOV-23

LIU, GRACE, NP

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-MAY-23

LIU, GRACE, NP

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-MAY-23

**MANALESE, MARIA THERESA,
NPF**

Provider ID: N/A

16100 SAND CANYON AVE
STE 240
IRVINE, CA 92618

Effective as of 01-APR-23

PARK, SE, NP

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

16305 SAND CANYON AVE
STE 200

IRVINE, CA 92618

Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUL-23

SHIRKHANI, PARISA, NPF

Provider ID: N/A

8607 IRVINE CENTER DR
IRVINE, CA 92618

Effective as of 01-NOV-23

WU, JENNY, NP

Provider ID: N/A

16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618

Effective as of 01-DEC-23

**CERTIFIED REGISTERED
NURSE MIDWIFE**

SAJADI, ALISA, CRNM

Provider ID: N/A

16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618

Effective as of 01-DEC-23

CHIROPRACTOR

KANG, KYUNG, DC

Provider ID: N/A

14875 JEFFREY RD STE 210

IRVINE, CA 92618
Effective as of 01-OCT-23

KIM, SEON-HOON SEAN, DC

Provider ID: N/A

113 WATERWORKS WAY
STE 205

IRVINE, CA 92618
Effective as of 01-OCT-23

KIM, SEON-HOON SEAN, DC

Provider ID: N/A

113 WATERWORKS WAY
STE 205

IRVINE, CA 92618
Effective as of 01-MAR-22

KIM, SEON-HOON SEAN, DC

Provider ID: N/A

113 WATERWORKS WAY
STE 205

IRVINE, CA 92618
Effective as of 01-MAR-22

KIM, SEON-HOON SEAN, DC

Provider ID: N/A

113 WATERWORKS WAY
STE 205

IRVINE, CA 92618
Effective as of 01-JAN-23

WEDDLE, DIRK, DC

Provider ID: N/A

15375 BARRANCA PKWY
STE J104

IRVINE, CA 92618
Effective as of 01-JAN-18

CLINICAL

NEUROPSYCHOLOGIST

BENNETT, LAUREN, PhD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220

IRVINE, CA 92618*
Effective as of 01-OCT-22

BENNETT, LAUREN, PhD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220

IRVINE, CA 92618*
Effective as of 01-OCT-22

HAMILTON, ANITA, PhD

Provider ID: N/A

300 SPECTRUM CENTER
DR STE 400

IRVINE, CA 92618
Effective as of 01-DEC-23

HAMILTON, ANITA, PhD

Provider ID: N/A

300 SPECTRUM CENTER
DR STE 400

IRVINE, CA 92618
Effective as of 01-DEC-23

DERMATOLOGY

WANG, STEVEN, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230

IRVINE, CA 92618
Effective as of 01-JUL-22

WANG, STEVEN, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230

IRVINE, CA 92618
Effective as of 01-JUL-22

EMERGENCY MEDICINE

KADAKIA, AMAR, MD†

Provider ID: N/A

11 TECHNOLOGY DR

IRVINE, CA 92618
Effective as of 01-JAN-18

KARIMI, KAMBIZ, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

**ENDOCRINOLOGY
METABOLISM DIABETES**

CHAVEZ, BRIAN, MD†

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Teleservice

Effective as of 01-AUG-21

CHAVEZ, BRIAN, MD†

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Teleservice

Effective as of 01-OCT-23

FARJOUDI, FARHAD, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 108

IRVINE, CA 92618

Effective as of 01-MAY-22

FARJOUDI, FARHAD, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 108

IRVINE, CA 92618

Effective as of 01-MAY-22

FARJOUDI, FARHAD, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 108

IRVINE, CA 92618
Effective as of 01-MAY-22

FARJOUDI, FARHAD, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 250

IRVINE, CA 92618

Effective as of 01-JUN-22

FARJOUDI, FARHAD, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 250

IRVINE, CA 92618

Effective as of 01-JUN-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618

Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618

Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618

Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618

Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618

Effective as of 01-JUL-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618

Effective as of 01-JUL-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618

Effective as of 01-JUL-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618

Effective as of 01-JUL-22

MARKMAN, LISA, MD

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Effective as of 01-MAR-23

MEHTA, SHILPA, MD†

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Teleservice

Effective as of 01-JUN-19

MEHTA, SHILPA, MD†

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Teleservice

Effective as of 01-JAN-23

MEHTA, SHILPA, MD†

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Teleservice

Effective as of 01-JUN-19

MEHTA, SHILPA, MD†

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Teleservice

Effective as of 01-OCT-23

FAMILY PRACTICE

BURRIS, RYAN, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-FEB-23

BURRIS, RYAN, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-FEB-23

FAMILY PRACTICE

SPORTS MEDICINE

RIVADENEYRA, ADAM, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-JAN-19

RIVADENEYRA, ADAM, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-NOV-17

FEMALE PELVIC MED AND

RECONSTRUCTIVE SURG

MWESIGWA, PATRICIA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-MAR-22

SHOURESHI, POONE, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-23

SHOURESHI, POONE, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-23

GASTROENTEROLOGY

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-23

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-OCT-23

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-NOV-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-NOV-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-23

BABAKNIA, ARDALAN, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 240
IRVINE, CA 92618
Effective as of 01-MAY-12

BABAKNIA, ARDALAN, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 240
IRVINE, CA 92618
Effective as of 01-APR-11

BEMANIAN, SHAHROOZ, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618
Effective as of 01-MAY-16

BEMANIAN, SHAHROOZ, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-OCT-23

BEMANIAN, SHAHROOZ, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-MAY-16

BEMANIAN, SHAHROOZ, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-JAN-20

BEMANIAN, SHAHROOZ, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-JAN-21

BEMANIAN, SHAHROOZ, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-JAN-16

BEMANIAN, SHAHROOZ, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-JAN-18

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-AUG-22

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY

STE 155

IRVINE, CA 92618

Effective as of 01-MAY-23

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-MAY-22

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-MAY-22

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY
STE 155

IRVINE, CA 92618

Effective as of 01-OCT-23

HWANG, CAROLINE, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 280

IRVINE, CA 92618

Effective as of 01-JUN-23

HWANG, CAROLINE, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 280

IRVINE, CA 92618

Effective as of 01-JUN-23

HWANG, CAROLINE, MD

Provider ID: N/A

500 SUPERIOR AVE
STE 100

IRVINE, CA 92618

Effective as of 01-AUG-23

HWANG, CAROLINE, MD

Provider ID: N/A

500 SUPERIOR AVE
STE 100
IRVINE, CA 92618
Effective as of 01-AUG-23

KAUFMAN, DAVID, DO

Provider ID: N/A

18 ENDEAVOR STE 204
IRVINE, CA 92618
Effective as of 01-JUL-12

KUMAR, RASHMI, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618
Effective as of 01-OCT-23

KUMAR, RASHMI, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618
Effective as of 01-OCT-23

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-OCT-23

LEE, JAMES, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JUN-23

LEE, PAUL, MD

Provider ID: N/A

16105 SAND CANYON AVE

STE 230
IRVINE, CA 92618
Effective as of 01-OCT-23

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-20

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-16

LEE, PAUL, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JAN-23

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-16

LEE, JAMES, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JUN-23

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-18

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-23

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-21

OHARA, JUN ICHI, MD

Provider ID: N/A

22 ODYSSEY STE 170A
IRVINE, CA 92618
Effective as of 01-JUN-19

OMAN, MATTHEW, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JAN-23

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-OCT-23

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-21

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY

STE 155
IRVINE, CA 92618
Effective as of 01-JAN-20

OMAN, MATTHEW, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-OCT-23

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-18

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-AUG-18

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-AUG-18

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-AUG-18

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-FEB-18

SINGH, HARDEEP, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAY-17

SINGH, HARDEEP, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAY-17

SINGH, HARDEEP, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JUN-23

SINGH, HARDEEP, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-OCT-20

SINGH, HARDEEP, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JUN-23

YAP, KONG PENG, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 106
IRVINE, CA 92618

Effective as of 01-JAN-14

YU, FANG, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 106
IRVINE, CA 92618

Effective as of 01-JAN-18

YU, FANG, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 106
IRVINE, CA 92618

Effective as of 01-JAN-23

YU, VICTOR, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-18

YU, VICTOR, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-21

YU, VICTOR, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-23

YU, VICTOR, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-MAY-16

YU, VICTOR, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-OCT-23

YU, FANG, MD[†]

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 106
IRVINE, CA 92618

Effective as of 01-OCT-23

YU, VICTOR, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-20

YU, VICTOR, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-MAY-16

**GYNECOLOGIC
ONCOLOGY**

ABAID, LISA, MD[†]

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-NOV-18

BECK, TIFFANY, MD[†]

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-AUG-22

BECK, TIFFANY, MD[†]

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-AUG-22

LEVINE, MONICA, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-OCT-23

LEVINE, MONICA, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-OCT-23

MENDIVIL, ALBERTO, MD[†]

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-AUG-22

MENDIVIL, ALBERTO, MD[†]

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-FEB-23

MENDIVIL, ALBERTO, MD[†]

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-AUG-22

MENDIVIL, ALBERTO, MD[†]

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-FEB-23

MENDIVIL, ALBERTO, MD[†]

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-FEB-23

**HEMATOLOGY /
ONCOLOGY**

GOLDENSON, BENJAMIN, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-AUG-23

NANGIA, CHAITALI, MD[†]

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618*

Effective as of 01-OCT-22

NANGIA, CHAITALI, MD[†]

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618*

Effective as of 01-OCT-22

PANDIT, LALITA, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-OCT-19

PANDIT, LALITA, MD[†]

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-OCT-21

SEERY, TARA, MD[†]

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JAN-21

SEERY, TARA, MD†

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JAN-21

HEPATOLOGY

FONG, TSE LING, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618
Effective as of 01-JAN-24

FONG, TSE LING, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618
Effective as of 01-JAN-24

INFECTIOUS DISEASE

SARAFIAN, FARJAD, MD

Provider ID: N/A

16100 SAND CANYON AVE
STE 240
IRVINE, CA 92618
Effective as of 01-AUG-20

SARAFIAN, FARJAD, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-MAY-23

SARAFIAN, FARJAD, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-APR-23

SARAFIAN, FARJAD, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-APR-23

INTERNAL MEDICINE

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618
Effective as of 01-JAN-20

APPEL, RICHARD, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

BILLECI, BARTON, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 614
IRVINE, CA 92618*
Effective as of 01-OCT-15

CABRERA, JUAN, MD

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

CHENG, CATHY, MD

Provider ID: N/A

16305 SAND CANYON AVE

STE 230

IRVINE, CA 92618

Teleservice

Effective as of 01-JUL-23

CHENG, CATHY, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Teleservice
Effective as of 01-JUL-23

CHIEN, JOHN, MD†

Provider ID: N/A

16200 SAND CANYON AVE
IRVINE, CA 92618
Effective as of 01-JAN-18

DANESH, HOUMAN, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618*
Effective as of 01-JAN-18

DAVIS, BARBARA, DO†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

EL-BERSHAWI, AHMED, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 225
IRVINE, CA 92618
Effective as of 01-MAR-21

GEIGER, ERIK, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

GHOSH, SUBRATO, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

HUNG, JENNIFER, DO⁺

Provider ID: N/A
11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

LEE, RONALD, MD⁺

Provider ID: N/A
11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

LU, CHRISTIAN, MD⁺

Provider ID: N/A
11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

MIRSAEID GHAZI, POURYA, MD⁺

Provider ID: N/A
11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

NGUYEN, VIET, DO⁺

Provider ID: N/A
11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

NGUYEN, THUY, DO⁺

Provider ID: N/A
11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

PEREZ, FRANCISCO, MD⁺

Provider ID: N/A
11 TECHNOLOGY DR

IRVINE, CA 92618
Effective as of 01-JAN-18

SHAHAMIRI, SEAN, MD⁺

Provider ID: N/A
11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

SHUNE, HONG, MD⁺

Provider ID: N/A
16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618
Effective as of 01-JAN-20

SYCHANGCO, PAUL, MD⁺

Provider ID: N/A
11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

TAHERI, NIMA, MD⁺

Provider ID: N/A
11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

YAP, MICHAEL, MD⁺

Provider ID: N/A
11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

ZAHED, SHAHAB, MD⁺

Provider ID: N/A
11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

**LICENSED CLINICAL
SOCIAL WORKER**

BOODMAN, SANDRA, LCSW
Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

HUMPHRIES, CORINNE, LCSW

Provider ID: N/A
15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

HUMPHRIES, CORINNE, LCSW

Provider ID: N/A
15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

**MARRIAGE FAMILY
THERAPIST**

LIU, CHIA CHI, MFT

Provider ID: N/A
15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUL-23

LIU, CHIA CHI, MFT

Provider ID: N/A
15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUL-23

MAJDALANI, KAREN, MFT

Provider ID: N/A
60 STEPPING STONE
IRVINE, CA 92603
Effective as of 01-JUN-23

MAJDALANI, KAREN, MFT

Provider ID: N/A
60 STEPPING STONE

IRVINE, CA 92603
Effective as of 01-JUN-23

MCINTYRE, SUSAN, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350

IRVINE, CA 92618
Effective as of 01-DEC-23

MCINTYRE, SUSAN, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350

IRVINE, CA 92618
Effective as of 01-DEC-23

ONEILL, SEAN, MFT

Provider ID: N/A

60 STEPPING STONE
IRVINE, CA 92603

Effective as of 01-JUN-23

ONEILL, SEAN, MFT

Provider ID: N/A

60 STEPPING STONE
IRVINE, CA 92603

Effective as of 01-JUN-23

SHAH, SALMA, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350

IRVINE, CA 92618
Effective as of 01-DEC-23

SHAH, SALMA, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350

IRVINE, CA 92618
Effective as of 01-DEC-23

**MATERNAL AND FETAL
MEDICINE**

BUSH, MELISSA, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618
Effective as of 01-FEB-21

BUSH, MELISSA, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618
Effective as of 01-SEP-16

BUSH, MELISSA, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618
Effective as of 01-SEP-16

DAY, ROBERT, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618
Effective as of 01-MAY-22

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618
Effective as of 01-SEP-16

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618
Effective as of 01-JAN-23

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618
Effective as of 01-JAN-23

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618
Effective as of 01-JUN-19

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618
Effective as of 01-JAN-20

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618
Effective as of 01-JAN-23

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618
Effective as of 01-FEB-23

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618
Effective as of 01-DEC-23

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618

Effective as of 01-FEB-18

MASAKI, DAMON, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-DEC-19

MASAKI, DAMON, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-MAY-19

SHRIVASTAVA, VINEET, MD

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-MAR-23

MEDICAL ONCOLOGY

BECERRA, CARLOS, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-MAR-23

BECERRA, CARLOS, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-MAR-23

HAMOUI, NAHID, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618

Effective as of 01-SEP-13

KHAGI, SIMON, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-OCT-23

KHAGI, SIMON, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-OCT-23

PANDIT, LALITA, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-JAN-21

NEPHROLOGY

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618

Effective as of 01-JAN-18

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618

Effective as of 01-JAN-14

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618

Effective as of 01-JAN-20

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618

Effective as of 01-JAN-21

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618

Effective as of 01-MAY-12

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618

Effective as of 01-JUN-18

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618

Effective as of 01-OCT-23

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618

Effective as of 01-APR-11

JAMES, JOJI, MD

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Effective as of 01-AUG-23

MANSOURY, HADI, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

MESBAH, AZITA, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-MAY-23

SAWHNEY, SAJEET, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-APR-21

YANG, PHILIP, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618
Effective as of 01-OCT-23

YANG, PHILIP, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618
Effective as of 01-JUN-18

YANG, PHILIP, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618
Effective as of 01-JUL-17

YANG, PHILIP, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618
Effective as of 01-OCT-19

YANG, PHILIP, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618
Effective as of 01-MAY-20

NEUROLOGY

CLEEREMANS, BRUCE, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JAN-21

JANKOWSKI, PAWEL, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-MAY-23

MAHDAD, MEHRDAD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618
Effective as of 01-OCT-21

MAHDAD, MEHRDAD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618
Effective as of 01-OCT-21

MAHDAD, MEHRDAD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618
Effective as of 01-APR-08

MAHDAD, MEHRDAD, MD†

Provider ID: N/A

16300 SAND CANYON AVE

STE 609
IRVINE, CA 92618
Effective as of 01-JAN-17

MAHDAD, MEHRDAD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618
Effective as of 01-JAN-17

MAHDAD, MEHRDAD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618
Effective as of 01-JAN-14

PARK, JAMES, DO

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-22

PARK, JAMES, DO

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-22

PATEL, JAY, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-JAN-20

THAKKAR, SANDEEP, DO†

Provider ID: N/A

16405 SAND CANYON AVE
STE 265
IRVINE, CA 92618
Effective as of 01-AUG-22

THAKKAR, SANDEEP, DO†

Provider ID: N/A

16405 SAND CANYON AVE
STE 265
IRVINE, CA 92618

Effective as of 01-AUG-22

THAKKAR, SANDEEP, DO†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAR-19

THAKKAR, SANDEEP, DO†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAR-18

WHITMAN, GREGORY, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-20

WHITMAN, GREGORY, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-21

NEUROLOGY CHILD

ELBALALESY, NASER, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-JUN-19

ELBALALESY, NASER, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-AUG-23

ELBALALESY, NASER, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 350

IRVINE, CA 92618

Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-AUG-23

ELBALALESY, NASER, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-AUG-23

ELBALALESY, NASER, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-AUG-23

ELBALALESY, NASER, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-OCT-22

NUCLEAR MEDICINE

REDDY, RYAN, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 215
IRVINE, CA 92618

Effective as of 01-OCT-23

REDDY, RYAN, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 215
IRVINE, CA 92618

Effective as of 01-OCT-23

**OBSTETRICS /
GYNECOLOGY**

AHDOOT, MORRIS, MD†

Provider ID: N/A

☞ 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618

Effective as of 01-APR-11

AHDOOT, MORRIS, MD†

Provider ID: N/A

☞ 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618

Effective as of 01-APR-20

AHDOOT, MORRIS, MD†

Provider ID: N/A

☞ 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618

Effective as of 01-APR-20

AHDOOT, MORRIS, MD†

Provider ID: N/A

☞ 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618

Effective as of 01-MAY-12

AHDOOT, MORRIS, MD†

Provider ID: N/A

☞ 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618

Effective as of 01-JAN-21

AHDOOT, MORRIS, MD†

Provider ID: N/A

☞ 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618

Effective as of 01-JUL-12

AHDOOT, MORRIS, MD†

Provider ID: N/A

☞ 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618

Effective as of 01-JAN-18

AHDOOT, MORRIS, MD†

Provider ID: N/A

☞ 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618

Effective as of 01-FEB-21

AHDOOT, MORRIS, MD†

Provider ID: N/A

☞ 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618

Effective as of 01-FEB-21

BARR, JESSICA, DO

Provider ID: N/A

☞ 22 ODYSSEY STE 200
IRVINE, CA 92618

Effective as of 01-DEC-23

BARR, JESSICA, DO

Provider ID: N/A

☞ 22 ODYSSEY STE 200
IRVINE, CA 92618

Effective as of 01-DEC-23

COUGH, HEIDI, MD

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-22

DAVIS, STEPHANIE, MD

Provider ID: N/A

☞ 16105 SAND CANYON AVE

STE 200

IRVINE, CA 92618

Effective as of 01-OCT-22

HASHEMI, EMAD, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-NOV-20

HASHEMI, EMAD, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-NOV-20

KONG, GRACE, MD

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-22

LEE, KATHERINE, MD

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-23

LEE, KATHERINE, MD

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618

Effective as of 01-JUN-23

LIN, JAMES, MD

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 901
IRVINE, CA 92618

Effective as of 01-SEP-15

MARINESCU, CATALIN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 265
IRVINE, CA 92618
Effective as of 01-JAN-20

MARINESCU, CATALIN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 265
IRVINE, CA 92618
Effective as of 01-JAN-21

MASAKI, DAMON, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618
Effective as of 01-JAN-22

MASAKI, DAMON, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618
Effective as of 01-JAN-22

MENDELSON, SUSAN, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-NOV-23

MILLER, JAMIE, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-NOV-23

PERKINS, KENDRA, DO†

Provider ID: N/A

16305 SAND CANYON AVE
STE 265
IRVINE, CA 92618
Effective as of 01-JAN-21

PETERS, AMY, DO

Provider ID: N/A

16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-NOV-23

PETERS, AMY, DO

Provider ID: N/A

16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618
Effective as of 01-NOV-23

STERNFELD, DANIEL, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618
Effective as of 01-SEP-20

STERNFELD, DANIEL, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618
Effective as of 01-OCT-22

TANAMAI, VAYA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618
Effective as of 01-MAY-20

YAO, GRACE, MD†

Provider ID: N/A

22 ODYSSEY STE 155
IRVINE, CA 92618
Effective as of 01-JAN-21

YAO, GRACE, MD†

Provider ID: N/A

22 ODYSSEY STE 155
IRVINE, CA 92618
Effective as of 01-JAN-21

OPHTHALMOLOGY

GE, NENGJIE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618
Effective as of 01-JAN-17

GE, NENGJIE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618
Effective as of 01-JAN-18

GE, NENGJIE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618
Effective as of 01-OCT-23

GE, NENGJIE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618
Effective as of 01-JUL-12

GE, NENGJIE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618
Effective as of 01-MAR-23

GE, NENGJIE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618
Effective as of 01-MAR-23

GHIASI, ZAHRA, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 245
IRVINE, CA 92618
Effective as of 01-JAN-17

GWYNN, DAVID, MD

Provider ID: N/A

22 ODYSSEY STE 150
IRVINE, CA 92618
Effective as of 01-MAR-23

LEE, ANDREW, MD

Provider ID: N/A

18 ENDEAVOR STE 104
IRVINE, CA 92618
Effective as of 01-OCT-23

LEE, JIMMY, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618
Effective as of 01-OCT-23

LEE, JIMMY, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618
Effective as of 01-JUL-22

LEE, ANDREW, MD

Provider ID: N/A

18 ENDEAVOR STE 104
IRVINE, CA 92618
Effective as of 01-MAY-23

MARVASTI, AMIR, MD

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618
Effective as of 01-JAN-23

MARVASTI, AMIR, MD

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618
Effective as of 01-OCT-23

NGUYEN, BAO-THU, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618*
Effective as of 01-OCT-23

NGUYEN, BAO-THU, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618*
Effective as of 01-JAN-23

NGUYEN, BAO-THU, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618
Effective as of 01-MAY-19

NGUYEN, BAO-THU, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618
Effective as of 01-MAY-19

TAYANI, RAMIN, MD

Provider ID: N/A

22 ODYSSEY STE 150

IRVINE, CA 92618

Effective as of 01-MAR-23

VAIDYA, NADEEM, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 385
IRVINE, CA 92618
Effective as of 01-MAR-16

VAIDYA, NADEEM, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 385
IRVINE, CA 92618
Effective as of 01-OCT-23

VAIDYA, NADEEM, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 385
IRVINE, CA 92618
Effective as of 01-FEB-21

VAIDYA, NADEEM, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 385
IRVINE, CA 92618
Effective as of 01-FEB-21

VAIDYA, NADEEM, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 385
IRVINE, CA 92618
Effective as of 01-JAN-21

OPTOMETRIST

OWYANG, ASHLEY, OD

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-JAN-23

OWYANG, ASHLEY, OD

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-OCT-23

RUDE, LOREN, OD

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-JAN-23

RUDE, LOREN, OD

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-OCT-23

TRAN, STEPHANIE, OD

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-OCT-23

TRAN, STEPHANIE, OD

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-JAN-23

WANG, STEVEN, OD

Provider ID: N/A

22 ODYSSEY STE 150
IRVINE, CA 92618

Effective as of 01-OCT-23

WANG, MATTHEW, OD†

Provider ID: N/A

22 ODYSSEY STE 150
IRVINE, CA 92618

Effective as of 01-OCT-23

WANG, MATTHEW, OD†

Provider ID: N/A

22 ODYSSEY STE 150
IRVINE, CA 92618

Effective as of 01-JAN-18

WANG, MATTHEW, OD†

Provider ID: N/A

22 ODYSSEY STE 150
IRVINE, CA 92618

Effective as of 01-JAN-23

**ORAL MAXILLOFACIAL
SURGEON**

KALANTARI, OUZHAN, DMD

Provider ID: N/A

114 PACIFICA STE 420
IRVINE, CA 92618

Effective as of 01-NOV-23

OTOLARYNGOLOGY

BALAKER, ASHLEY, MD†

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-APR-23

BALAKER, ASHLEY, MD†

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-APR-23

BALAKER, ASHLEY, MD†

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-JUN-19

BALAKER, ASHLEY, MD†

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-MAY-19

BALAKER, ASHLEY, MD†

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-OCT-22

BUEN, FLOYD, MD†

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-NOV-20

BUEN, FLOYD, MD†

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-NOV-20

BUEN, FLOYD, MD†

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-DEC-20

BUEN, FLOYD, MD†

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-DEC-20

BUEN, FLOYD, MD†

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-DEC-20

BUEN, FLOYD, MD†

Provider ID: N/A

18 ENDEAVOR STE 208

IRVINE, CA 92618
Effective as of 01-DEC-20

CROCKETT, DENNIS, MD†

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JAN-18

GE, NORMAN, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-FEB-23

GE, NORMAN, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-FEB-23

GE, NORMAN, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-FEB-23

GE, NORMAN, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-JAN-23

LUU, QUANG, MD†

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-OCT-18

LUU, QUANG, MD†

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-OCT-18

MUNDI, JAGMEET, MD†

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-MAY-19

SUN, PAUL, MD†

Provider ID: N/A

22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-JAN-14

SUN, JOHN, MD†

Provider ID: N/A

22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-JAN-20

SUN, PAUL, MD†

Provider ID: N/A

22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-OCT-23

SUN, JOHN, MD†

Provider ID: N/A

22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-OCT-23

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-OCT-23

**OTOLARYNGOLOGY /
OTOLOGY /
LARYNGOLOGY /
RHINOLOGY**

CHO, MICHAEL, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-JAN-15

CHO, MICHAEL, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-JAN-15

CROCKETT, DENNIS, MD†

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JUL-19

CROCKETT, DENNIS, MD†

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JUL-19

GE, NORMAN, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-JAN-18

GE, NORMAN, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-OCT-12

MUNDI, JAGMEET, MD†

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-JUN-16

MUNDI, JAGMEET, MD†

Provider ID: N/A

☐ 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-JUN-16

PETTIS, ROBERT, MD†

Provider ID: N/A

☐ 16100 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-MAY-20

SUN, PAUL, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-NOV-17

SUN, JOHN, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-NOV-17

SUN, PAUL, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-NOV-17

SUN, PAUL, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-17

SUN, JOHN, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-17

SUN, JOHN, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-NOV-17

SUN, PAUL, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-21

SUN, JOHN, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-21

SUN, JOHN, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-MAR-16

SUN, JOHN, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-14

SUN, PAUL, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-FEB-16

**THOMPSON, CHRISTOPHER,
MD†**

Provider ID: N/A

☐ 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-AUG-16

**THOMPSON, CHRISTOPHER,
MD†**

Provider ID: N/A

☐ 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-AUG-16

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-FEB-16

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-14

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-21

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-NOV-17

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-NOV-17

***PHYSICAL MEDICINE /
REHABILITATION***

LAI, KHANG, DO

Provider ID: N/A

☐ 15701 ROCKFIELD BLVD
IRVINE, CA 92618

Effective as of 01-DEC-14

LAI, KHANG, DO

Provider ID: N/A

15701 ROCKFIELD BLVD
IRVINE, CA 92618
Effective as of 01-APR-11

LAI, KHANG, DO

Provider ID: N/A

15701 ROCKFIELD BLVD
IRVINE, CA 92618
Effective as of 01-NOV-14

SEKO, KYLE, DO

Provider ID: N/A

9080 IRVINE CENTER DR
IRVINE, CA 92618
Effective as of 01-FEB-22

PHYSICIANS ASSISTANT

BOW, LINDA, PA†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

CHRISTIE, CAMERON, PA

Provider ID: N/A

8607 IRVINE CENTER DR
IRVINE, CA 92618
Effective as of 01-DEC-23

KIM, MOSES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-APR-21

KISCADEN, LAUREN, PA

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-APR-23

KISCADEN, LAUREN, PA

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-APR-23

ROUGHLEY, MATTHEW, PA

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-DEC-23

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-NOV-22

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-NOV-22

STONE, MICHELLE, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JAN-23

STONE, MICHELLE, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JAN-23

STONE, MICHELLE, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-FEB-23

STONE, MICHELLE, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-FEB-23

STONE, MICHELLE, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JAN-23

WONG, POLLYANNA, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JAN-23

WONG, POLLYANNA, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JAN-23

WU, VANNA, PA

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-MAR-24

PODIATRIST

BATHAEE, FARSHAD, DPM

Provider ID: N/A

113 WATERWORKS WAY
STE 250
IRVINE, CA 92618

Effective as of 01-DEC-21

COYER, MICHAEL, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-JAN-20

COYER, MICHAEL, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-JUL-18

COYER, MICHAEL, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-JUL-18

KOLODENKER, GENNADY, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-JUL-18

KOLODENKER, GENNADY, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-JUL-18

LIN, PARKSON, DPM

Provider ID: N/A

2 HUGHES STE 150
IRVINE, CA 92618

Effective as of 01-JAN-17

ROOHIAN, ARSHIA, DPM

Provider ID: N/A

113 WATERWORKS WAY
STE 250
IRVINE, CA 92618

Effective as of 01-DEC-21

ROOHIAN, ARSHIA, DPM

Provider ID: N/A

113 WATERWORKS WAY
STE 250
IRVINE, CA 92618

Effective as of 01-JUL-20

SOLAR, SARA, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270

IRVINE, CA 92618

Effective as of 01-NOV-22

SOLAR, SARA, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-NOV-22

TIEN, AUDRIS, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-JUL-21

TIEN, AUDRIS, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-JUL-21

TIEN, AUDRIS, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-DEC-20

TIEN, AUDRIS, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-DEC-20

TIEN, AUDRIS, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-DEC-20

VINCENT, EBONIE, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-AUG-19

VINCENT, EBONIE, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-AUG-19

VINCENT, EBONIE, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-AUG-19

VINCENT, EBONIE, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-JAN-21

YANG, DAVID, DPM

Provider ID: N/A

18 ENDEAVOR STE 206
IRVINE, CA 92618

Effective as of 01-JAN-23

YANG, DAVID, DPM

Provider ID: N/A

18 ENDEAVOR STE 206
IRVINE, CA 92618

Effective as of 01-OCT-23

YANG, ANDREW, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-DEC-20

YANG, ANDREW, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-DEC-20

YANG, ANDREW, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618

Effective as of 01-DEC-20

PSYCHIATRY

RITTER, AARON, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-NOV-22

RITTER, AARON, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-NOV-22

RITTER, AARON, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-NOV-22

RITTER, AARON, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-NOV-22

SALO, CLINT, DO†

Provider ID: N/A

2 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-AUG-17

SALO, CLINT, DO†

Provider ID: N/A

2 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-NOV-16

SALO, CLINT, DO†

Provider ID: N/A

2 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-NOV-16

SALO, CLINT, DO†

Provider ID: N/A

2 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-AUG-17

SZPUNAR, MERCEDES, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-MAR-23

SZPUNAR, MERCEDES, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-MAR-23

SZPUNAR, MERCEDES, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-MAR-23

SZPUNAR, MERCEDES, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-MAR-23

PSYCHOLOGIST

ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

KANG, EILEEN, PhD

Provider ID: N/A

6 VENTURE
IRVINE, CA 92618
Effective as of 01-MAR-20

KANG, EILEEN, PhD

Provider ID: N/A

6 VENTURE
IRVINE, CA 92618
Effective as of 01-MAR-20

KANG, EILEEN, PhD

Provider ID: N/A

6 VENTURE
IRVINE, CA 92618
Effective as of 01-MAR-20

KANG, EILEEN, PhD

Provider ID: N/A

6 VENTURE
IRVINE, CA 92618
Effective as of 01-MAR-20

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JAN-24

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JAN-24

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JAN-24

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JAN-24

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

PETERSON, JENYFFER, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

PETERSON, JENYFFER, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

PETERSON, JENYFFER, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350

IRVINE, CA 92618
Effective as of 01-DEC-23

PETERSON, JENYFFER, PSYD

Provider ID: N/A
15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

PULMONARY DISEASES

EL-BERSHAWI, AHMED, MD†

Provider ID: N/A
4 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-JUN-22

EL-BERSHAWI, AHMED, MD†

Provider ID: N/A
4 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-JUN-22

GHAZARIAN, ZERON, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 225
IRVINE, CA 92618
Effective as of 01-MAR-21

GOZZO, YVETTE, MD

Provider ID: N/A
16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JAN-21

HARIANAWALA, SALIM, MD†

Provider ID: N/A
4 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-JUN-22

HARIANAWALA, SALIM, MD†

Provider ID: N/A
4 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-JUN-22

RADIATION ONCOLOGY

LIN, KEVIN, MD†

Provider ID: N/A
16105 SAND CANYON AVE
IRVINE, CA 92618
Effective as of 01-JAN-21

LIN, KEVIN, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 150
IRVINE, CA 92618
Effective as of 01-JAN-20

RADIOLOGY DIAGNOSTIC

ULANER, GARY, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 215
IRVINE, CA 92618
Effective as of 01-OCT-22

ULANER, GARY, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 215
IRVINE, CA 92618
Effective as of 01-OCT-22

SURGERY

CARDIOVASCULAR

**MARMUREANU, ALEXANDRU,
MD**

Provider ID: N/A
5 HOLLAND STE 101
IRVINE, CA 92618
Effective as of 01-NOV-23

**SURGERY COLON
SURGERY**

MILANCHI, SIAMAK, MD†

Provider ID: N/A
16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-APR-15

MILANCHI, SIAMAK, MD†

Provider ID: N/A
16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-APR-15

MILANCHI, SIAMAK, MD†

Provider ID: N/A
16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-JAN-21

SURGERY GENERAL

CHUNG, NATHAN, MD†

Provider ID: N/A
16405 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-MAR-21

CHUNG, NATHAN, MD†

Provider ID: N/A
16405 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-MAR-21

FORRESTER, JARED, MD

Provider ID: N/A
16105 SAND CANYON AVE
STE 230

IRVINE, CA 92618
Effective as of 01-OCT-23

FORRESTER, JARED, MD

Provider ID: N/A
16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-OCT-23

HAMOUI, NAHID, MD†

Provider ID: N/A
16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-DEC-19

HAMOUI, NAHID, MD†

Provider ID: N/A
16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-DEC-19

HAMOUI, NAHID, MD†

Provider ID: N/A
16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-DEC-19

HAMOUI, NAHID, MD†

Provider ID: N/A
16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-JAN-21

HAMOUI, NAHID, MD†

Provider ID: N/A
16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-JAN-23

HAMOUI, NAHID, MD†

Provider ID: N/A
16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-JAN-14

HURWITZ, MICHAEL, MD

Provider ID: N/A
16305 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JAN-20

JENSEN, NATISHA, MD

Provider ID: N/A
16305 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-AUG-23

KRAFT, ELIZABETH, MD

Provider ID: N/A
16305 SAND CANYON AVE
STE 160
IRVINE, CA 92618
Effective as of 01-OCT-23

KRAFT, ELIZABETH, MD

Provider ID: N/A
16305 SAND CANYON AVE
STE 160
IRVINE, CA 92618
Effective as of 01-OCT-23

MACDONALD, HEATHER, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 160
IRVINE, CA 92618
Effective as of 01-JAN-21

MILANCHI, SIAMAK, MD†

Provider ID: N/A
16300 SAND CANYON AVE

STE 604
IRVINE, CA 92618
Effective as of 01-JAN-18

NISHANIAN, GARABED, MD†

Provider ID: N/A
16100 SAND CANYON AVE
STE 350
IRVINE, CA 92618
Effective as of 01-JAN-20

NISHANIAN, GARABED, MD†

Provider ID: N/A
16100 SAND CANYON AVE
STE 350
IRVINE, CA 92618
Effective as of 01-NOV-15

SHAVER, JOHN, MD†

Provider ID: N/A
16305 SAND CANYON AVE
IRVINE, CA 92618
Effective as of 01-NOV-19

SHAVER, JOHN, MD†

Provider ID: N/A
16305 SAND CANYON AVE
IRVINE, CA 92618
Effective as of 01-NOV-19

SNYDER, LINCOLN, MD

Provider ID: N/A
16305 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JAN-20

WOLF, RONALD, MD

Provider ID: N/A
16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-NOV-23

SURGERY GENERAL

VASCULAR

NISHANIAN, GARABED, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 350
IRVINE, CA 92618

Effective as of 01-JAN-21

NISHANIAN, GARABED, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 350
IRVINE, CA 92618

Effective as of 01-NOV-15

SURGERY

NEUROLOGICAL

JANKOWSKI, PAWEL, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAY-23

MEHTA, VIVEK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-21

MEHTA, VIVEK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-21

MEHTA, VIVEK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-AUG-21

OZGUR, BURAK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-21

OZGUR, BURAK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-MAR-23

SURGERY ORTHOPEDIC

ALEXANDER, GERALD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-JAN-21

ALEXANDER, GERALD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-MAR-18

ALEXANDER, GERALD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-MAR-18

ALI, RAED, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 225
IRVINE, CA 92618

Effective as of 01-OCT-23

ALI, RAED, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 240
IRVINE, CA 92618

Effective as of 01-OCT-23

ALI, RAED, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 240
IRVINE, CA 92618

Effective as of 01-JAN-19

ALI, RAED, MD

Provider ID: N/A

113 WATERWORKS WAY

STE 225
IRVINE, CA 92618
Effective as of 01-JAN-23

ALI, RAED, MD†

Provider ID: N/A
113 WATERWORKS WAY
STE 240
IRVINE, CA 92618
Effective as of 01-JAN-23

AMINIAN, ARASH, MD†

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-DEC-21

AMINIAN, ARASH, MD†

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

AMINIAN, ARASH, MD†

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-FEB-23

AMINIAN, ARASH, MD†

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-NOV-21

AMINIAN, ARASH, MD†

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-NOV-21

AMINIAN, ARASH, MD†

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-NOV-21

AMINIAN, ARASH, MD†

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-MAR-21

DEBOTTIS, DANIEL, MD

Provider ID: N/A
16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-OCT-23

DEBOTTIS, DANIEL, MD

Provider ID: N/A
16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-OCT-23

DINH, PAUL, MD†

Provider ID: N/A
16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-JAN-20

DUNPHY, TAYLOR, MD†

Provider ID: N/A
16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618
Effective as of 01-JAN-21

FARRELLY, ERIN, MD

Provider ID: N/A
16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618
Effective as of 01-AUG-23

GITTINGS, DANIEL, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-NOV-21

GITTINGS, DANIEL, MD†

Provider ID: N/A
16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-NOV-21

GITTINGS, DANIEL, MD†

Provider ID: N/A
16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-FEB-22

GITTINGS, DANIEL, MD†

Provider ID: N/A
16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-FEB-22

GORDON, MICHAEL, MD

Provider ID: N/A
16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618
Effective as of 01-JAN-21

GRAHAM, SCOTT, MD

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

**HAGHVERDIAN, BRANDON,
MD**

Provider ID: N/A
16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-DEC-23

HAGHVERDIAN, BRANDON, MD

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-DEC-23

HUNTER, MICHAEL, MD

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-OCT-22

JOHNSON, BRYCE, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-FEB-21

JOHNSON, BRYCE, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-DEC-21

JOHNSON, BRYCE, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-MAR-21

JOHNSON, BRYCE, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-OCT-22

JOHNSON, BRYCE, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

KADAKIA, NIMISH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JUL-23

KADAKIA, NIMISH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-MAR-21

KADAKIA, NIMISH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JUL-23

KADAKIA, NIMISH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

KADAKIA, NIMISH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-DEC-21

KADAKIA, NIMISH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-FEB-21

KADAKIA, NIMISH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-FEB-17

KADAKIA, NIMISH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-FEB-17

KADAKIA, NIMISH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-FEB-21

KASSAM, HAFIZ, MD†

Provider ID: N/A

16300 SAND CANYON AVE
IRVINE, CA 92618

Effective as of 01-FEB-22

KIM, ABRAHAM, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-23

KIM, ABRAHAM, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-23

KIM, ABRAHAM, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-24

KIM, ABRAHAM, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-24

KIM, ABRAHAM, MD†

Provider ID: N/A

22 ODYSSEY STE 205

IRVINE, CA 92618
Effective as of 01-JAN-24

KIM, ABRAHAM, MD†

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

KIM, ABRAHAM, MD†

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JAN-24

KIM, ABRAHAM, MD†

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-OCT-23

LEE, RICHARD, MD

Provider ID: N/A
16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618
Effective as of 01-JAN-21

LIN, DARIUS, MD†

Provider ID: N/A
22 ODYSSEY STE 270B
IRVINE, CA 92618
Effective as of 01-JUN-17

MOLHO, DAVID, MD

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-DEC-23

MONTGOMERY, ROBERT, MD

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

MOSKOW, LONNIE, MD

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

NIETO, MICHAEL, MD

Provider ID: N/A
16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-JUN-21

NIETO, MICHAEL, MD

Provider ID: N/A
16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-JUN-21

NINH, CHRISTOPHER, MD†

Provider ID: N/A
113 WATERWORKS WAY
STE 240
IRVINE, CA 92618
Effective as of 01-JAN-23

NINH, CHRISTOPHER, MD†

Provider ID: N/A
113 WATERWORKS WAY
STE 240
IRVINE, CA 92618
Effective as of 01-DEC-23

NINH, CHRISTOPHER, MD†

Provider ID: N/A
113 WATERWORKS WAY
STE 240
IRVINE, CA 92618
Effective as of 01-DEC-23

NINH, CHRISTOPHER, MD†

Provider ID: N/A
113 WATERWORKS WAY
STE 240
IRVINE, CA 92618
Effective as of 01-OCT-23

NINH, CHRISTOPHER, MD†

Provider ID: N/A
113 WATERWORKS WAY
STE 240
IRVINE, CA 92618
Effective as of 01-MAY-21

PARVARESH, KEVIN, MD†

Provider ID: N/A
16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-DEC-20

PARVARESH, KEVIN, MD†

Provider ID: N/A
16300 SAND CANYON AVE

STE 511
IRVINE, CA 92618
Effective as of 01-DEC-20

PATEL, AMAR, MD†

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-DEC-21

PATEL, AMAR, MD†

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

PYRKO, PETER, MD

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-OCT-23

SCUDDAY, TRAVIS, MD†

Provider ID: N/A
16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-SEP-18

SCUDDAY, TRAVIS, MD†

Provider ID: N/A
16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-SEP-18

SCUDDAY, TRAVIS, MD†

Provider ID: N/A
16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-JAN-21

TING, JAMES, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618
Effective as of 01-JAN-21

VENEZIANO, CHRISTOPHER, MD

Provider ID: N/A
22 ODYSSEY STE 210
IRVINE, CA 92618
Effective as of 01-SEP-23

WANG, WILLIAM, MD†

Provider ID: N/A
16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618
Effective as of 01-AUG-22

WANG, WILLIAM, MD†

Provider ID: N/A
16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618
Effective as of 01-AUG-22

WONG, JEFFREY, MD†

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JAN-20

WONG, JEFFREY, MD†

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-FEB-20

WONG, JEFFREY, MD†

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-FEB-20

WONG, JEFFREY, MD†

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-FEB-20

WONG, JEFFREY, MD†

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

YOUDERIAN, ARI, MD†

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

YOUDERIAN, ARI, MD†

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-OCT-23

YOUDERIAN, ARI, MD†

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

YOUDERIAN, ARI, MD†

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

YOUDERIAN, ARI, MD†

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JAN-23

YOUDERIAN, ARI, MD†

Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-23

YOUDEIRIAN, ARI, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-DEC-21

ZHANG, JOANNE, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

Effective as of 01-NOV-22

ZHANG, JOANNE, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

Effective as of 01-NOV-22

SURGERY THORACIC

KANAAN, SAMER, MD†

Provider ID: N/A

4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-APR-22

KANAAN, SAMER, MD†

Provider ID: N/A

4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-APR-22

KANAAN, SAMER, MD†

Provider ID: N/A

4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-APR-22

KANAAN, SAMER, MD†

Provider ID: N/A

4 HUGHES STE 100

IRVINE, CA 92618

Effective as of 01-APR-22

KANAAN, SAMER, MD†

Provider ID: N/A

4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-DEC-23

KANAAN, SAMER, MD†

Provider ID: N/A

4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-APR-22

KANAAN, SAMER, MD†

Provider ID: N/A

4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-APR-22

KANAAN, SAMER, MD†

Provider ID: N/A

16105 SAND CANYON AVE
IRVINE, CA 92618

Effective as of 01-APR-19

UROLOGY

BUI, DON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

BUI, DON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

BUI, DON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-DEC-23

BUI, DON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-23

BUI, DON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-23

BUI, DON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618*

Effective as of 01-OCT-22

BUI, DON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

BUI, DON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

BUI, DON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

ELKHOURY, FUAD, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-23

ELKHOURY, FUAD, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-23

GRUENENFELDER, JENNIFER, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-21

HO, TAMMY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-21

HO, TAMMY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-AUG-19

HO, TAMMY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-AUG-19

HO, TAMMY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-AUG-19

HO, TAMMY, MD†

Provider ID: N/A

16305 SAND CANYON AVE

STE 200

IRVINE, CA 92618

Effective as of 01-AUG-19

HO, TAMMY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-AUG-19

HO, TAMMY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-DEC-20

HO, TAMMY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-FEB-22

HO, TAMMY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-MAY-19

HO, TAMMY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-19

HO, TAMMY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-19

HO, TAMMY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-23

KIM, MOSES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-23

KIM, MOSES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-SEP-18

KIM, MOSES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-SEP-18

KIM, MOSES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-23

KIM, MOSES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-DEC-23

KIM, MOSES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-DEC-19

Effective as of 01-JAN-21

KIM, MOSES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

MEAGLIA, JAMES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

MEAGLIA, JAMES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-21

MEAGLIA, JAMES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-DEC-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-DEC-19

MEAGLIA, JAMES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

MEAGLIA, JAMES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

MEAGLIA, JAMES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

MEAGLIA, JAMES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-22

MEAGLIA, JAMES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-23

NAKAMURA, LEAH, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-23

NAKAMURA, LEAH, MD†

Provider ID: N/A
 16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618
 Effective as of 01-OCT-22

NAKAMURA, LEAH, MD†

Provider ID: N/A
 16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618
 Effective as of 01-JAN-23

NAKAMURA, LEAH, MD†

Provider ID: N/A
 16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618
 Effective as of 01-APR-21

NAKAMURA, LEAH, MD†

Provider ID: N/A
 16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618
 Effective as of 01-JAN-21

NAKAMURA, LEAH, MD†

Provider ID: N/A
 16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618
 Effective as of 01-JUN-18

SHOURESHI, POONE, MD

Provider ID: N/A
 16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618
 Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A
 16305 SAND CANYON AVE
 STE 200

IRVINE, CA 92618
 Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A
 16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618
 Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A
 16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618
 Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A
 16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618
 Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A
 16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618
 Effective as of 01-AUG-23

SINGH, KARAN, MD†

Provider ID: N/A
 16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618
 Effective as of 01-DEC-19

SINGH, KARAN, MD†

Provider ID: N/A
 16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618
 Effective as of 01-JUN-18

SINGH, KARAN, MD†

Provider ID: N/A
 16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618
 Effective as of 01-JAN-21

SINGH, KARAN, MD†

Provider ID: N/A
 16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618
 Effective as of 01-DEC-19

SINGH, KARAN, MD†

Provider ID: N/A
 16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618
 Effective as of 01-JAN-23

SINGH, KARAN, MD†

Provider ID: N/A
 16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618
 Effective as of 01-OCT-22

SINGH, KARAN, MD†

Provider ID: N/A
 16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618
 Effective as of 01-JUN-18

SINGH, KARAN, MD†

Provider ID: N/A
 16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618
 Effective as of 01-JUN-18

SINGH, KARAN, MD†

Provider ID: N/A
 16305 SAND CANYON AVE

STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23

SPITZ, AARON, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23

SPITZ, AARON, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18

SPITZ, AARON, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-22

SPITZ, AARON, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-18

SPITZ, AARON, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-23

SPITZ, AARON, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-DEC-19

SPITZ, AARON, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-FEB-23

SPITZ, AARON, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-21

SPITZ, AARON, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18

SPITZ, AARON, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-DEC-19

SPITZ, AARON, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-APR-21

SU, DANIEL, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-DEC-19

SU, DANIEL, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-21

SU, DANIEL, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-23

SU, DANIEL, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-18

SU, DANIEL, MD†

Provider ID: N/A
16305 SAND CANYON AVE
IRVINE, CA 92618
Effective as of 01-SEP-18

SU, DANIEL, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23

TAKESITA, KEN, MD†

Provider ID: N/A
15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618
Effective as of 01-OCT-15

TEBYANI, NEYSSAN, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-21

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-23

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-MAY-21

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-SEP-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-SEP-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-23

ZHAO, HANSON, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-NOV-22

ZHAO, HANSON, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-NOV-22

ALLERGY IMMUNOLOGY

MODENA, BRIAN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-22

MODENA, BRIAN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-MAY-22

SHARMA, KUSUM, MD

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Effective as of 01-JAN-23

SHARMA, KUSUM, MD

Provider ID: N/A

9834 GENESEE AVE STE
400
LA JOLLA, CA 92037

Effective as of 01-JUL-21

SHARMA, KUSUM, MD

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Effective as of 01-JUN-22

ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

FILIPOVIC, MAYA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

FUNDINGSLAND, BRENT, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUL-21

GAYAM, SAJJAN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-22

NARLA, VINOD, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

NGO, DONALD, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

ROY, KEVIN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

SUYDAM, STEVEN, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-DEC-21

TULLY, JEFFREY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-21

TZENG, ERIC, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-21

VAUGHN, DOUGLAS, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

WANG, MICHELLE, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

**ANESTHESIOLOGY
CRITICAL CARE MEDICINE**

KRAUSE, MARTIN, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUL-21

**ANESTHESIOLOGY PAIN
MANAGEMENT**

MADHAV, SANDIP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-APR-21

MADHAV, SANDIP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-MAR-21

AUDIOLOGIST

BAXTER, STEPHANIE, AuD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

BAXTER, STEPHANIE, AuD

Provider ID: N/A

3855 HEALTH SCIENCES

DR

LA JOLLA, CA 92093

Effective as of 01-MAY-23

BAXTER, STEPHANIE, AuD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

BAXTER, STEPHANIE, AuD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

HARRIS, GENEVIEVE, AuD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

KING, JOHN, AuD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

RUBY, CHARLES, AuD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

SPRIGGS, MEGHAN, AuD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

TSANG, JOYCE, AuD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

WIAN, DEBORAH, AuD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

WILLIAMS, ALICIA, AuD†

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
Effective as of 01-JUL-21

ZETTNER, ERIKA, AuD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

**CARDIAC
ELECTROPHYSIOLOGY**

COHEN, DAVID, MD†

Provider ID: N/A

9850 GENESEE AVE STE
940
LA JOLLA, CA 92037
Effective as of 01-SEP-21

COHEN, DAVID, MD†

Provider ID: N/A

9850 GENESEE AVE STE
940
LA JOLLA, CA 92037
Effective as of 01-MAY-20

HAMZEI, ALI, MD†

Provider ID: N/A

9850 GENESEE AVE STE
780
LA JOLLA, CA 92037
Effective as of 01-JAN-21

MENDENHALL, GEORGE, MD†

Provider ID: N/A

9850 GENESEE AVE STE
940
LA JOLLA, CA 92037
Effective as of 01-JAN-23

MENDENHALL, GEORGE, MD†

Provider ID: N/A

9850 GENESEE AVE STE
940
LA JOLLA, CA 92037
Effective as of 01-JUL-18

PATEL, JIGAR, DO†

Provider ID: N/A

9850 GENESEE AVE STE
810
LA JOLLA, CA 92037
Effective as of 01-JAN-22

WHITWAM, WAYNE, MD†

Provider ID: N/A

9850 GENESEE AVE STE
780
LA JOLLA, CA 92037
Effective as of 01-JAN-21

CARDIOLOGY

AIZIN, VITALI, MD†

Provider ID: N/A

9834 GENESEE AVE STE 101
LA JOLLA, CA 92037
Effective as of 01-SEP-15

AL KHIAMI, BELAL, MD†

Provider ID: N/A

9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
Effective as of 01-JAN-21

CARAZO, MATTHEW, MD†

Provider ID: N/A

9434 MEDICAL CENTER DR

FL 1

LA JOLLA, CA 92037
Effective as of 01-NOV-21

CRUZ RODRIGUEZ, JOSE, MD

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

DAMANI, SAMIR, MD†

Provider ID: N/A

9850 GENESEE AVE STE
650
LA JOLLA, CA 92037
Effective as of 01-NOV-23

GOVEA, ALAYN, MD

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

WHITWAM, WAYNE, MD†

Provider ID: N/A

9850 GENESEE AVE STE
780
LA JOLLA, CA 92037
Effective as of 01-NOV-20

**CARDIOVASCULAR
DISEASE**

AIZIN, VITALI, MD†

Provider ID: N/A

9834 GENESEE AVE STE 101
LA JOLLA, CA 92037
Effective as of 01-JAN-23

AIZIN, VITALI, MD†

Provider ID: N/A

9834 GENESEE AVE STE 101
LA JOLLA, CA 92037
Effective as of 01-FEB-21

AVALOS, ROY, MD†

Provider ID: N/A

9850 GENESEE AVE STE
780
LA JOLLA, CA 92037
Effective as of 01-JAN-21

BERMAN, BRETT, MD†

Provider ID: N/A

9834 GENESEE AVE STE 101
LA JOLLA, CA 92037
Effective as of 01-FEB-21

CHARLAT, MARTIN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
780
LA JOLLA, CA 92037
Effective as of 01-JAN-21

COHEN, DAVID, MD†

Provider ID: N/A

9850 GENESEE AVE STE
940
LA JOLLA, CA 92037
Effective as of 01-JAN-21

COSTELLO, DENNIS, MD†

Provider ID: N/A

9850 GENESEE AVE STE
430
LA JOLLA, CA 92037
Effective as of 01-JAN-21

COSTELLO, DENNIS, MD†

Provider ID: N/A

9850 GENESEE AVE STE
430
LA JOLLA, CA 92037
Effective as of 01-JUL-20

DAMANI, SAMIR, MD†

Provider ID: N/A

9850 GENESEE AVE STE
650

LA JOLLA, CA 92037
Effective as of 01-JUN-22

DURAN, EDWARD, MD

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

HONG, ERIC, MD†

Provider ID: N/A

9850 GENESEE AVE STE
780
LA JOLLA, CA 92037
Effective as of 01-JAN-21

KARIMIAN, AMIR, MD

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

KEEN, WILLIAM, MD†

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

KULHANEK, JAN, MD

Provider ID: N/A

9850 GENESEE AVE STE
780
LA JOLLA, CA 92037
Effective as of 01-JUL-23

KUMAR, KRIS, DO

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

MENDENHALL, GEORGE, MD†

Provider ID: N/A

9850 GENESEE AVE STE
940

LA JOLLA, CA 92037
Effective as of 01-JAN-21

PATEL, JIGAR, DO†

Provider ID: N/A

9850 GENESEE AVE STE
810
LA JOLLA, CA 92037
Effective as of 01-MAR-24

RAPEPORT, KEVIN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
940B
LA JOLLA, CA 92037
Effective as of 01-MAR-16

RUSSO, ROBERT, MD†

Provider ID: N/A

9850 GENESEE AVE STE
350
LA JOLLA, CA 92037
Effective as of 01-JAN-21

SAB, SHIV, MD†

Provider ID: N/A

9850 GENESEE AVE STE
780
LA JOLLA, CA 92037
Effective as of 01-DEC-22

SHAPIRO, HILARY, MD

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

SHEREV, DIMITRI, MD

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-SEP-23

CERTIFIED

ACUPUNCTURIST

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-FEB-24

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

JULIAN, FIDES, LAC

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

JULIAN, FIDES, LAC

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

JULIAN, FIDES, LAC

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-FEB-24

MURRAY, STEVEN, LAC

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

MURRAY, STEVEN, LAC

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

MURRAY, STEVEN, LAC

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

CERTIFIED NURSE

PRACTITIONER

ASHMAN, ELLEN, NP†

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

ATILLO, RONALD MAR, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

BELL, ANDREA, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Teleservice

Effective as of 01-AUG-22

BIRD, JEREMY, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

BIRD, JEREMY, NP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

BISCHER, MARGARET, NP

Provider ID: N/A

7855 IVANHOE AVE STE 110
LA JOLLA, CA 92037
Effective as of 01-MAR-24

BURNEY, BRAEANNE, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

CAMAQUIN, MIA, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

CAMAQUIN, MIA, NP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

CONNER, PAMELA, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

CONNER, PAMELA, NP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

CONNOR, CAROLINE, NP†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-JUN-21

CZYPULL, MONICA, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-SEP-21

CZYPULL, MONICA, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-21

DE DIOS, SARAH, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

DRISCOLL, KARRIE, NP†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-DEC-21

GIOVANNETTI, ERIN, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-21

GOMEZ, LESLIE, NP

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GOMEZ, LESLIE, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GOMEZ, LESLIE, NP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GOMEZ, LESLIE, NP

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GOSHEN, KIRSTEN, NP†

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-SEP-22

GOSHEN, KIRSTEN, NP†

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-JAN-21

HADINGER, JANE, NP

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C129
LA JOLLA, CA 92037
Teleservice
Effective as of 01-DEC-23

HALPERN, DAVID, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-JAN-21

HANNA, LINDSAY, NP†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-OCT-21

HEURING, JULIE, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-DEC-21

JENKINS, ERIN, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

JENKINS, ERIN, NP

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

JONES, LAILA, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-JUN-23

JONES, CHRISTA, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-21

JORJADZE, KETEVAN, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Teleservice

Effective as of 01-AUG-22

KHUAT, LIEN, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

KORMANIK, PATRICIA, NP†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-JUL-21

LEE, MINDY, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

LEE, MINDY, NP

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

LEE, MINDY, NP

Provider ID: N/A

9400 CAMPUS POINT DR

LA JOLLA, CA 92093

Effective as of 01-MAY-23

LEE, MINDY, NP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

LOWE, ASHLEY, NP

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-23

MAROSOK, MICHELLE, NP

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Teleservice

Effective as of 01-NOV-23

MATTERA, BETH, NPF

Provider ID: N/A

9898 GENESEE AVE FL 4
LA JOLLA, CA 92037

Effective as of 01-MAY-16

MATTHESS, JANETTE, NP†

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-FEB-22

MATTHESS, JANETTE, NP†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Effective as of 01-FEB-22

MCCALLION, DANIELLE, NP†

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037

Effective as of 01-OCT-21

MCCALLION, DANIELLE, NP†

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037

Effective as of 01-SEP-22

MCCLAIN, MEGAN, NP†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-AUG-22

MCCLAIN, MEGAN, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

MCPHERSON, SAMANTHA, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Teleservice

Effective as of 01-AUG-21

MICHAEL, NICOLE, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-MAY-21

MICK, SHARON, NP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MOONEY, PATRICIA, NP†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-24

MOONEY, PATRICIA, NP†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Teleservice
Effective as of 01-MAY-21

MORENO, MANUEL, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-22

MULVEY, CAOILFHIONN, NP†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-AUG-22

MWAURA, WAIRIMU, NP†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-24

MWAURA, WAIRIMU, NP†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-21

PETREK, MEAGAN, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

RENFROE, ILANA, NP

Provider ID: N/A

7855 IVANHOE AVE STE 110
LA JOLLA, CA 92037
Teleservice
Effective as of 01-DEC-21

ROSSI, CATHERINE, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

SALINAS, NIECEL, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

SETIAWAN, EUGENIE, NPF†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-DEC-21

SILVESTRI, NICOLE, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-MAY-21

SOLOMON, AMANDA, NP

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SRILASAK, MICHELE, NP†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JUL-21

TOMICICH, STEPHANIE, NP†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-24

TOMICICH, STEPHANIE, NP†

Provider ID: N/A

9850 GENESEE AVE STE

440
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

TOMICICH, STEPHANIE, NP†
Provider ID: N/A
9834 GENESEE AVE STE
416
LA JOLLA, CA 92037
Effective as of 01-JAN-21

TRAN, TRAN, NP†
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

TRAN, TRAN, NP†
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

TRAN, RICHARD, NPF
Provider ID: N/A
9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUL-23

TRUJILLO, DALE, NP†
Provider ID: N/A
9350 CAMPUS POINT DR
STE 2B
LA JOLLA, CA 92037
Effective as of 01-APR-21

VIERRA, ERIN, NP†
Provider ID: N/A
9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-MAY-21

WARD, MICHAEL, NP
Provider ID: N/A
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

WEIDNER, ANNE, NP
Provider ID: N/A
9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-MAY-21

WILLEY, MARTI, NP†
Provider ID: N/A
9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-24

WILLEY, MARTI, NP†
Provider ID: N/A
9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-21

YEO, ALEXANDRIA, NP
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

ZUNIGA, VANIA, NP†
Provider ID: N/A
9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-MAY-21

**CERTIFIED REGISTERED
NURSE ANESTHETIST**

AMADOR, LINDSAY, CRNA†
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

CALABRIA, MEGAN, CRNA
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

CANTRELL, SARAH, CRNA
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

COLE, JASON, CRNA†
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-21

DOLLAND, STEVEN, CRNA†
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-21

DULAY, JOTI, CRNA
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

ESTABROOK, LARA, CRNA
Provider ID: N/A
9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JUL-23

EVANS, CATHERINE, CRNA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-23

FIEDLER, DEREK, CRNA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

GONZALEZ, LISA, CRNA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

GRIFFIN, SETH, CRNA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

JOHNSTON, RACHEL, CRNA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

LAZARUS, ELIZABETH, CRNA

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JUL-23

**POLIKOWSKI, SAMANTHA,
CRNA†**

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

POLLOM, JESSICA, CRNA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-21

RAMIREZ, NICOLE, CRNA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

ROADMAN, KEENE, CRNA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SACKS, BRENT, CRNA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-21

SNODGRASS, JULIE, CRNA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-21

SOTO, GILBERTO, CRNA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-22

**CERTIFIED REGISTERED
NURSE MIDWIFE**

CHOI, NATHALIE, CRNM

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

CORRY, ANDREA, CRNM

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

**ELY-KONOSKE, RACHEL,
CRNM**

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

**ELY-KONOSKE, RACHEL,
CRNM**

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

NATHAN, CARLY, CRNM

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-23

CHIROPRACTOR

BERKOFF, GREGORY, DC

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C129
LA JOLLA, CA 92037
Effective as of 01-MAY-21

**CLINICAL
NEUROPSYCHOLOGIST**

ALASANTRO, LORI, PhD†

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037
Effective as of 01-FEB-18

KAUP, ALLISON, PhD†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-MAR-21

DERMATOLOGY

CHANG, TIMOTHY, MD†

Provider ID: N/A

9850 GENESEE AVE STE
850
LA JOLLA, CA 92037

Teleservice

Effective as of 01-OCT-21

GONZALES, DARRELL, MD

Provider ID: N/A

9850 GENESEE AVE STE
850
LA JOLLA, CA 92037

Teleservice

Effective as of 01-OCT-21

NASH GOELITZ, ALYSSA, MD†

Provider ID: N/A

9850 GENESEE AVE STE
850
LA JOLLA, CA 92037

Teleservice

Effective as of 01-OCT-21

SIDDIQUI, FARYAL, MD

Provider ID: N/A

7720 FAY AVE
LA JOLLA, CA 92037

Effective as of 01-MAY-22

EMERGENCY MEDICINE

BLACK, NICHOLAS, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

Effective as of 01-SEP-21

CHEN, ALICE, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Effective as of 01-NOV-21

CHEN, ALICE, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

GALUST, HENRIK, MD

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

HARDIN, JEREMY, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

HERNANDEZ, CRISTINA, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Effective as of 01-MAY-21

HOGUE, BRENNIA, MD

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

HOGUE, BRENNIA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

KUTZ, CRAIG, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

Effective as of 01-AUG-21

KUTZ, CRAIG, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-21

LIOTTA, BENJAMIN, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Effective as of 01-AUG-21

MUELLER, MATTHEW, DO†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUL-21

MUELLER, MATTHEW, DO†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Effective as of 01-JUL-21

PARK, JAY, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Effective as of 01-NOV-21

PARK, JAY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-21

SELTZER, JUSTIN, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

Effective as of 01-AUG-21

SMITH, CASEY, MD

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

SUPAT, BENJAMIN, MD

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

YU, ELAINE, DO

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE A

LA JOLLA, CA 92037

Effective as of 01-JUN-23

YU, ELAINE, DO

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

ENDOCRINOLOGY

METABOLISM DIABETES

GUERIN, CHRIS, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-21

IYENGAR, RAVI, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

IYENGAR, RAVI, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

MBA, MBA UZOMA, MD

Provider ID: N/A

9850 GENESEE AVE STE
470

LA JOLLA, CA 92037

Effective as of 01-DEC-22

NAGELBERG, JODI, MD†

Provider ID: N/A

8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

PETTUS, JEREMY, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-24

SCHNEIDER, DARIUS, MD

Provider ID: N/A

9850 GENESEE AVE STE
470

LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-23

SCHNEIDER, DARIUS, MD

Provider ID: N/A

9850 GENESEE AVE STE
470

LA JOLLA, CA 92037

Teleservice

Effective as of 01-OCT-21

SHAH, NANDI, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-24

SHAH, NANDI, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-24

FAMILY PRACTICE

BOYD, JAMES, MD†

Provider ID: N/A

9850 GENESEE AVE STE
900

LA JOLLA, CA 92037*

Effective as of 01-JAN-21

JOLICOEUR, MEGAN, DO

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

GASTROENTEROLOGY

BORTNIKER, ETHAN, MD

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Effective as of 01-JUN-23

GOLDKLANG, ROBERT, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Effective as of 01-APR-23

GOLDKLANG, ROBERT, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-SEP-22

HASAN, AWS, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

HASAN, AWS, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

KLAPHEKE, ROBERT, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

LAJOIE, ADRIANNE, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-SEP-22

MAYER, ANDREW, MD†

Provider ID: N/A

9850 GENESEE AVE STE
820
LA JOLLA, CA 92037
Effective as of 01-SEP-22

MAYER, ANDREW, MD†

Provider ID: N/A

9850 GENESEE AVE STE
820
LA JOLLA, CA 92037*
Effective as of 01-NOV-14

MAYER, ANDREW, MD†

Provider ID: N/A

9850 GENESEE AVE STE
820
LA JOLLA, CA 92037
Effective as of 01-MAR-23

MAYER, ANDREW, MD†

Provider ID: N/A

9850 GENESEE AVE STE
820
LA JOLLA, CA 92037
Effective as of 01-JAN-21

PAREDEZ, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
820
LA JOLLA, CA 92037

Teleservice

Effective as of 01-NOV-14

PAREDEZ, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
820
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

PAREDEZ, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
820
LA JOLLA, CA 92037

Teleservice

Effective as of 01-SEP-22

PAREDEZ, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
820
LA JOLLA, CA 92037

Teleservice

Effective as of 01-FEB-05

SHAH, SHAILJA, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

SHAH, SHAILJA, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

SYAL, GAURAV, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SYAL, GAURAV, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

YOUSSEF, FADY, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

YOUSSEF, FADY, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

GENETICS MEDICAL

JONES, MARILYN, MD†

Provider ID: N/A

9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
Effective as of 01-JUN-21

**GYNECOLOGIC
ONCOLOGY**

ESKANDER, RAMEZ, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JUL-21

GYNECOLOGY

MARSHALL, CATHARINE, MD

Provider ID: N/A

7301 GIRARD AVE STE 300
LA JOLLA, CA 92037
Effective as of 01-NOV-18

**HEMATOLOGY /
ONCOLOGY**

BANERJEE, PUSHPENDU, MD†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

BANERJEE, PUSHPENDU, MD†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

CHEN, YU-WEI, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

CHEN, YU-WEI, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-DEC-23

SINCLAIR, JAMES, MD†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Effective as of 01-JAN-21

SINCLAIR, JAMES, MD†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Effective as of 01-JAN-21

SINCLAIR, JAMES, MD†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Effective as of 01-JUN-18

SULLIVAN, JESSICA, DO

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-SEP-23

WALLACH, SABINA, MD†

Provider ID: N/A

9850 GENESEE AVE STE
400
LA JOLLA, CA 92037
Effective as of 01-JAN-21

**HOSPICE AND PALLIATIVE
MEDICINE**

RUBENSIK, TAMARA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-FEB-21

SARWAR, NADIA, MD†

Provider ID: N/A

3252 HOLIDAY CT STE 113
LA JOLLA, CA 92037
Effective as of 01-APR-19

HOSPITALIST MD/DO

BADALYAN, SEDA, MD†

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-AUG-21

COFFLER, ELIANE, MD

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-MAR-23

DJEKIC, KRISTINA, DO†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

DOUGLAS, JASON, MD

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-JAN-23

FIRESTEIN, CATHERINE, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-21

HAMMOND, CHARLES, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-21

PAPP, STEPHAN, MD

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-NOV-22

SHINDO, YURI, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

TONG, ALEXANDER, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

WILLIAMS, BRANDON, MD†

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-SEP-21

YANG, BENJAMIN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

YASSIN, HAZEM, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

INFECTIOUS DISEASE

BARTHEL, ROBERT, MD†

Provider ID: N/A

9850 GENESEE AVE STE

900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

KUPPALLI, KRUTIKA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-23

KUPPALLI, KRUTIKA, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-23

MILLER, HOWARD, MD

Provider ID: N/A

9834 GENESEE AVE STE
310
LA JOLLA, CA 92037*
Effective as of 01-FEB-21

RAMIREZ SANCHEZ, CLAUDIA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

TANG, MICHAEL, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

INTERNAL MEDICINE

BORTZ, DAVID, MD†

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037*
Teleservice
Effective as of 01-OCT-22

BRAZEL, DANIELLE, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

CHETLAPALLI, SURYA, MD†

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

CROWLEY, DOUGLAS, MD†

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

DASHI, ARBEN, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

GADIYARAM, VARUNA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

GAN, TERENCE, MD†

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

GELBERG, ANNA, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

KATSNELSON, MARCELLA, DO

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

LAM, PAMELA, DO†

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

LAM, PAMELA, DO†

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

LEWIS, GREG, MD†

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

LEWIS, GREG, MD†

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

LIU, ANDREW, MD

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-SEP-23

LIU, ANDREW, MD

Provider ID: N/A

9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-SEP-23

LUGO, GUSTAVO, MD†

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

MARTINEZ, ARMANDO, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

MCCUTCHEON, CLAIRE, MD†

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-DEC-22

MIRZA, BASHAR, MD

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-MAR-24

MOOLANI, UJJALA, MD

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MOOLANI, UJJALA, MD

Provider ID: N/A

9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-MAY-23

NOKES, BRANDON, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21

PATEL, KRUTI, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

PATEL, KRUTI, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-21

RADWAN, MOHAMED, MD†

Provider ID: N/A

9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-JAN-21

RAMOS, JEFFREY, MD†

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

RAMOS, JEFFREY, MD†

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

SONG, ALEXANDER, MD

Provider ID: N/A


9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

STEVENS, KENNETH, MD†


Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21


STEVENS, KENNETH, MD†

Provider ID: N/A
 9888 GENESEE AVE
 LA JOLLA, CA 92037*
 Effective as of 01-JAN-21


TOPPEN, WILLIAM, MD†

Provider ID: N/A
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Effective as of 01-AUG-22


TOROSIAN, KARO, DO†

Provider ID: N/A
 9834 GENESEE AVE STE
 312
 LA JOLLA, CA 92037
 Effective as of 01-SEP-22


TRAN, PHI, DO†

Provider ID: N/A
 9888 GENESEE AVE
 LA JOLLA, CA 92037
 Effective as of 01-JAN-21


TRAN, PHI, DO†

Provider ID: N/A
 9850 GENESEE AVE STE
 900
 LA JOLLA, CA 92037*
 Effective as of 01-JAN-21


TRIVEDI, MEHUL, MD

Provider ID: N/A
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Effective as of 01-JAN-24

WALLACH, SABINA, MD†


Provider ID: N/A
 9850 GENESEE AVE STE
 400
 LA JOLLA, CA 92037
 Effective as of 01-JAN-24

YANG, JENNY, MD†


Provider ID: N/A
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Effective as of 01-AUG-21

**INTERNAL MEDICINE
CRITICAL CARE MEDICINE**


BOROK, ZEA, MD†

Provider ID: N/A
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Effective as of 01-SEP-21


JAFFE, GILAD, MD

Provider ID: N/A
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Effective as of 01-SEP-23

JONES, DANIEL, MD†


Provider ID: N/A
 9850 GENESEE AVE STE
 780
 LA JOLLA, CA 92037
 Effective as of 01-JAN-21

SULLIVAN, LAUREN, MD

Provider ID: N/A
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Effective as of 01-SEP-23


**INTERVENTIONAL
CARDIOLOGY**

RAPEPORT, KEVIN, MD†


Provider ID: N/A
 9850 GENESEE AVE STE
 940B
 LA JOLLA, CA 92037
 Effective as of 01-JAN-21

**LICENSED CLINICAL
SOCIAL WORKER**

ELLEGE, LINDSAY, LCSW


Provider ID: N/A
 8950 VILLA LA JOLLA DR
 STE 101
 LA JOLLA, CA 92037
 Effective as of 01-JUL-23

WISHNEK, HANNAH, LCSW†

Provider ID: N/A
 8910 VILLA LA JOLLA DR
 LA JOLLA, CA 92037
 Effective as of 01-AUG-22

**MARRIAGE FAMILY
THERAPIST**

POZUN, CARA, MFT

Provider ID: N/A
 8950 VILLA LA JOLLA DR
 STE C101
 LA JOLLA, CA 92037
 Effective as of 01-DEC-23


**MATERNAL AND FETAL
MEDICINE**

EMERUWA, UKACHI, MD

Provider ID: N/A
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Effective as of 01-JUN-23

MEDICAL ONCOLOGY

BANERJEE, PUSHPENDU, MD†

Provider ID: N/A
 9850 GENESEE AVE STE
 560
 LA JOLLA, CA 92037
 Teleservice
 Effective as of 01-JUN-18

FLORES, EDNA, MD†

Provider ID: N/A

9850 GENESEE AVE STE
560

LA JOLLA, CA 92037

Effective as of 01-JUN-18

NEPHROLOGY

AL-DAHHAN, ZAID, MD

Provider ID: N/A

4225 EXECUTIVE SQ STE
450

LA JOLLA, CA 92037

Effective as of 01-MAY-23

CRUZ WHITLEY, JESSICA, MD

Provider ID: N/A

4225 EXECUTIVE SQ STE
450

LA JOLLA, CA 92037

Effective as of 01-MAY-23

DAVIS, JASON, MD

Provider ID: N/A

4225 EXECUTIVE SQ STE
450

LA JOLLA, CA 92037

Effective as of 01-JUN-23

LAKHERA, YOGITA, MD†

Provider ID: N/A

9834 GENESEE AVE STE
312

LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-22

LAKHERA, YOGITA, MD†

Provider ID: N/A

9834 GENESEE AVE STE
312

LA JOLLA, CA 92037

Teleservice

Effective as of 01-MAR-17

LAKHERA, YOGITA, MD†

Provider ID: N/A

9834 GENESEE AVE STE
312

LA JOLLA, CA 92037

Teleservice

Effective as of 01-MAR-22

LAKHERA, YOGITA, MD†

Provider ID: N/A

9834 GENESEE AVE STE
312

LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

NAMAZY, DAVID, MD

Provider ID: N/A

4225 EXECUTIVE SQ STE
450

LA JOLLA, CA 92037

Effective as of 01-JUN-23

RANA, SHAUNAK, MD†

Provider ID: N/A

9850 GENESEE AVE STE
320

LA JOLLA, CA 92037*

Effective as of 01-NOV-21

STEER, DYLAN, MD†

Provider ID: N/A

9834 GENESEE AVE STE
312

LA JOLLA, CA 92037

Effective as of 01-SEP-15

STEER, DYLAN, MD†

Provider ID: N/A

9834 GENESEE AVE STE
312

LA JOLLA, CA 92037

Effective as of 01-JAN-21

STEER, DYLAN, MD†

Provider ID: N/A

9834 GENESEE AVE STE
312

LA JOLLA, CA 92037

Effective as of 01-JAN-21

STEER, DYLAN, MD†

Provider ID: N/A

9834 GENESEE AVE STE
312

LA JOLLA, CA 92037

Effective as of 01-FEB-05

STEER, DYLAN, MD†

Provider ID: N/A

9834 GENESEE AVE STE
312

LA JOLLA, CA 92037

Effective as of 01-JUL-22

TOROSIAN, KARO, DO†

Provider ID: N/A

9834 GENESEE AVE STE
312

LA JOLLA, CA 92037

Effective as of 01-JUL-22

TOROSIAN, KARO, DO†

Provider ID: N/A

9834 GENESEE AVE STE
312

LA JOLLA, CA 92037

Effective as of 01-JAN-21

TOROSIAN, KARO, DO†

Provider ID: N/A

9834 GENESEE AVE STE
312

LA JOLLA, CA 92037

Effective as of 01-DEC-17

TOROSIAN, KARO, DO†

Provider ID: N/A

9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-SEP-20

ZHONG, YAN, MD†

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-MAR-22

NEUROLOGY

ANSARI, HOSSEIN, MD†

Provider ID: N/A

4180 LA JOLLA VILLAGE
DR STE 240
LA JOLLA, CA 92037
Effective as of 01-MAY-22

CHOUDRY, BILAL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037
Effective as of 01-FEB-16

CHOUDRY, BILAL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037
Effective as of 01-FEB-16

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037
Effective as of 01-FEB-16

GUPTA, VISHAL, DO

Provider ID: N/A

9300 CAMPUS POINT DR

LA JOLLA, CA 92037
Effective as of 01-AUG-23

HAAS, RICHARD, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037
Effective as of 01-OCT-21

KARANJIA, NAVAZ, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-22

KOCHARIAN, NAIRA, MD†

Provider ID: N/A

9850 GENESEE AVE STE
340
LA JOLLA, CA 92037
Effective as of 01-JAN-21

LUHAR, RIYA, DO

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-23

NIELSEN, AMY, DO†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Teleservice
Effective as of 01-FEB-21

NIELSEN, AMY, DO†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Teleservice

Effective as of 01-FEB-21

NIELSEN, AMY, DO†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Teleservice
Effective as of 01-FEB-21

OH, IRENE, MD†

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037
Effective as of 01-FEB-16

PADUGA, REMIA, MD†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Effective as of 01-MAR-21

QAYOUMI, WALI, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037
Effective as of 01-OCT-21

QAYOUMI, WALI, MD†

Provider ID: N/A

9500 GILMAN DR STE 2069
LA JOLLA, CA 92093
Effective as of 01-OCT-21

SADOFF, MARK, MD†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Effective as of 01-FEB-21

SADOFF, MARK, MD†

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037
Effective as of 01-FEB-16

SCHIM, JACK, MD†

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037
Effective as of 01-FEB-16

SCHULTE, JESSICA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-SEP-21

WANG, CHUNYANG, MD†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Effective as of 01-SEP-22

WANG, CHUNYANG, MD†

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037
Effective as of 01-FEB-16

WANG, ANCHI, MD†

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037
Effective as of 01-FEB-16

WANG, CHUNYANG, MD†

Provider ID: N/A

9850 GENESEE AVE STE
470

LA JOLLA, CA 92037
Effective as of 01-FEB-16

WIEGAND, SARAH, DO†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

NUCLEAR MEDICINE

CHOI, ESTHER, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

KIPPER, MICHAEL, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SHARIF TABRIZI, AHMAD, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

**OBSTETRICS /
GYNECOLOGY**

BINDER, PRATIBHA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JUL-21

BONDRE, IOANA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-OCT-21

BONDRE, IOANA, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-OCT-21

CARDENAS, MICHAEL, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

CARDENAS, MICHAEL, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-NOV-21

DELCORE, LAURA, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

DELCORE, LAURA, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

HARVEY, SCOTT, MD†

Provider ID: N/A

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-MAY-21

HARVEY, SCOTT, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-21

HILL, KAITLYN, MD

Provider ID: N/A

9850 GENESEE AVE STE
820
LA JOLLA, CA 92037
Effective as of 01-JAN-24

KURTULUS, MEL, MD

Provider ID: N/A

9850 GENESEE AVE STE
820
LA JOLLA, CA 92037
Effective as of 01-JAN-24

MACKAY, GILLIAN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

MACKAY, GILLIAN, MD

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-DEC-23

MELENDEZ, ARIANA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

MEURICE, MARIELLE

ERENDIRA LUCILLE, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-SEP-21

PICKETT, CHARLOTTE, MD

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

PINSON, KELSEY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

SPRING ROBINSON,

CHANDRA, DO†

Provider ID: N/A

9850 GENESEE AVE STE
770
LA JOLLA, CA 92037
Effective as of 01-JAN-21

SPRING ROBINSON,

CHANDRA, DO†

Provider ID: N/A

9850 GENESEE AVE STE
770
LA JOLLA, CA 92037
Effective as of 01-JAN-23

THOMSON, SAMANTHA, MD†

Provider ID: N/A

9300 CAMPUS POINT DR

LA JOLLA, CA 92037

Effective as of 01-OCT-21

THOMSON, SAMANTHA, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-OCT-21

**OCCUPATIONAL
THERAPIST**

MUNCADA, CAESAR, OT†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-22

ONCOLOGY MEDICAL

FLORES, EDNA, MD†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Effective as of 01-JAN-21

OPHTHALMOLOGY

ARNETT, JUSTIN, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

ARNETT, JUSTIN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

ARNETT, JUSTIN, MD

Provider ID: N/A

9415 CAMPUS POINT DR

LA JOLLA, CA 92093
Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-DEC-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-NOV-21

BINDER, NICHOLAS, MD†

Provider ID: N/A

9850 GENESEE AVE STE

310
LA JOLLA, CA 92037
Effective as of 01-NOV-23

BOLO, KYLE, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

BOLO, KYLE, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

BOLO, KYLE, MD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-23

CHIU, STEPHAN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-JUN-23

CHIU, STEPHAN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-MAY-22

CHOPLIN, NEIL, MD†

Provider ID: N/A

9834 GENESEE AVE STE
428
LA JOLLA, CA 92037
Effective as of 01-JUL-21

CHOPLIN, NEIL, MD†

Provider ID: N/A

9834 GENESEE AVE STE
428
LA JOLLA, CA 92037
Effective as of 01-AUG-23

CULOTTA, ANTHONY, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-FEB-24

CULOTTA, ANTHONY, MD†

Provider ID: N/A

9834 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-JAN-21

ESLANI, MEDI, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

ESLANI, MEDI, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

ESLANI, MEDI, MD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-23

FISH, STEVEN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-NOV-22

GARFF, KEVIN, MD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAR-24

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-SEP-22

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-JAN-21

HENNEIN, LAUREN, MD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-23

HUANG, ALEX, MD†

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-DEC-21

HUDSON, HENRY, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-SEP-22

HUDSON, HENRY, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-MAY-21

HUDSON, HENRY, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-APR-23

HUDSON, HENRY, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-APR-22

JIN, MAN, MD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUN-23

JIN, MAN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

LANG, PAUL, MD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-23

LANG, PAUL, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

LANG, PAUL, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

MCGRAW, JOSEPH, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

9834 GENESEE AVE STE
428
LA JOLLA, CA 92037
Effective as of 01-NOV-21

**MORRISON-REYES, JOSHUA,
MD**

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-FEB-24

MORTON, ASA, MD

Provider ID: N/A

9834 GENESEE AVE STE
428

LA JOLLA, CA 92037
Effective as of 01-AUG-23

MORTON, ASA, MD

Provider ID: N/A
9834 GENESEE AVE STE
428

LA JOLLA, CA 92037
Effective as of 01-JUL-23

PERRY, ARTHUR, MD

Provider ID: N/A
9850 GENESEE AVE STE
310

LA JOLLA, CA 92037
Effective as of 01-OCT-95

PERRY, ARTHUR, MD

Provider ID: N/A
9850 GENESEE AVE STE
310

LA JOLLA, CA 92037
Effective as of 01-FEB-07

PERRY, ARTHUR, MD

Provider ID: N/A
9850 GENESEE AVE STE
310

LA JOLLA, CA 92037
Effective as of 01-JAN-21

PERRY, ARTHUR, MD

Provider ID: N/A
9850 GENESEE AVE STE
310

LA JOLLA, CA 92037
Effective as of 01-JAN-21

PRATT, STEVEN, MD†

Provider ID: N/A
9850 GENESEE AVE STE
310

LA JOLLA, CA 92037
Effective as of 01-JAN-21

PRATT, STEVEN, MD†

Provider ID: N/A
9850 GENESEE AVE STE
310

LA JOLLA, CA 92037
Effective as of 01-JAN-21

PRATT, STEVEN, MD†

Provider ID: N/A
9850 GENESEE AVE STE
310

LA JOLLA, CA 92037
Effective as of 01-OCT-12

PUIG LLANO, MANUEL, MD

Provider ID: N/A
9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-JUL-23

RAHMATNEJAD, KAMRAN, MD

Provider ID: N/A
9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-JUN-23

RAHMATNEJAD, KAMRAN, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

SAMUEL, MICHAEL, MD†

Provider ID: N/A
9850 GENESEE AVE STE
310

LA JOLLA, CA 92037
Effective as of 01-SEP-22

SATTERFIELD, KELLIE, MD

Provider ID: N/A
9834 GENESEE AVE STE
200

LA JOLLA, CA 92037
Effective as of 01-DEC-23

SCHONBACH, ETIENNE, MD†

Provider ID: N/A
9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-21

SHEILS, CATHERINE, MD

Provider ID: N/A
9834 GENESEE AVE STE
200

LA JOLLA, CA 92037
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

SHEILS, CATHERINE, MD

Provider ID: N/A
9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-JUN-23

SHOJI, MARISSA, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

SHOJI, MARISSA, MD

Provider ID: N/A
9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-23

SHOJI, MARISSA, MD

Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

SONG, DELU, MD†

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-21

SUK, KEVIN, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-FEB-24

WESTEREN, ALAN, MD

Provider ID: N/A

6529 LA JOLLA BLVD
LA JOLLA, CA 92037
Effective as of 01-JAN-23

ZHAO, TAILUN, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-JAN-24

ZHAO, TAILUN, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-JUL-23

ZHAO, TAILUN, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-NOV-23

OPTOMETRIST

GARDNER, KRISTA, OD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C130

LA JOLLA, CA 92037

Teleservice

Effective as of 01-MAY-22

HOO, PAMELA, OD†

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-22

JOMOC, CAITLIN, OD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

JOMOC, CAITLIN, OD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUL-23

JULAZADEH, SARA, OD

Provider ID: N/A

9834 GENESEE AVE STE
428
LA JOLLA, CA 92037
Effective as of 01-SEP-23

KHIEU, TINA, OD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-MAR-24

KHIEU, TINA, OD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-DEC-23

KHIEU, TINA, OD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-NOV-23

KIM, PHILIP, OD†

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAR-22

MCCLEAN, ESMERALDA, OD†

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-22

TAUNTON, PHILIP, OD†

Provider ID: N/A

9834 GENESEE AVE STE
428
LA JOLLA, CA 92037
Effective as of 01-SEP-21

TAUNTON, PHILIP, OD†

Provider ID: N/A

9834 GENESEE AVE STE
428
LA JOLLA, CA 92037
Effective as of 01-SEP-23

YU, CAROL, OD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

YU, CAROL, OD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

OTOLARYNGOLOGY

BAREISS, ANNA, MD

Provider ID: N/A

4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037

Teleservice

Effective as of 01-MAY-23

BAREISS, ANNA, MD

Provider ID: N/A

4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037

Teleservice

Effective as of 01-DEC-23

BRUMUND, KEVIN, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

BRUMUND, KEVIN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

BRUMUND, KEVIN, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A

3855 HEALTH SCIENCES

DR

LA JOLLA, CA 92093

Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

CHANG, ANGELA, MD[†]

Provider ID: N/A

9834 GENESEE AVE STE 112
LA JOLLA, CA 92037

Effective as of 01-OCT-21

CHANG, ANGELA, MD[†]

Provider ID: N/A

9834 GENESEE AVE STE 112
LA JOLLA, CA 92037

Effective as of 01-JAN-21

CHANG, ANGELA, MD[†]

Provider ID: N/A

9834 GENESEE AVE STE 112
LA JOLLA, CA 92037

Effective as of 01-JAN-23

CHANG, ANGELA, MD[†]

Provider ID: N/A

9834 GENESEE AVE STE 112
LA JOLLA, CA 92037

Effective as of 01-JUL-20

COFFEY, CHARLES, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

COFFEY, CHARLES, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

COFFEY, CHARLES, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Effective as of 01-MAY-23

COFFEY, CHARLES, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

DECONDE, ADAM, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

DECONDE, ADAM, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

DECONDE, ADAM, MD[†]

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

DECONDE, ADAM, MD[†]

Provider ID: N/A

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Effective as of 01-MAY-23

FRIEDMAN, RICK, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

FRIEDMAN, RICK, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

FRIEDMAN, RICK, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

FRIEDMAN, RICK, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GUO, THERESA, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GUO, THERESA, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GUO, THERESA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GUO, THERESA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HUSSEMAN, JACOB, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

KARI, ELINA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

KARI, ELINA, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

KARI, ELINA, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

KARI, ELINA, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

NGUYEN, QUYEN, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

NGUYEN, QUYEN, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

NGUYEN, QUYEN, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

NGUYEN, QUYEN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

REUTHER, MARSHA, MD†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037

Effective as of 01-AUG-23

REUTHER, MARSHA, MD†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 345

LA JOLLA, CA 92037

Effective as of 01-JAN-21

SCHALCH LEPE, PAUL, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Effective as of 01-MAY-23

**VAHABZADEH-HAGH,
ANDREW, MD**

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

**VAHABZADEH-HAGH,
ANDREW, MD**

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

**VAHABZADEH-HAGH,
ANDREW, MD**

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

**VAHABZADEH-HAGH,
ANDREW, MD†**

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

WATSON, DEBORAH, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

WATSON, DEBORAH, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

WATSON, DEBORAH, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD

Provider ID: N/A

9300 CAMPUS POINT DR

LA JOLLA, CA 92037
Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Effective as of 01-MAY-23

WOO, LINDA, MD†

Provider ID: N/A

9834 GENESEE AVE STE 101
LA JOLLA, CA 92037

Effective as of 01-JUL-22

WOO, LINDA, MD†

Provider ID: N/A

9834 GENESEE AVE STE 101
LA JOLLA, CA 92037

Effective as of 01-JAN-21

YAN, CAROL, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLA

LA JOLLA, CA 92037

Effective as of 01-MAY-23

YAN, CAROL, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

YAN, CAROL, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

YAN, CAROL, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Effective as of 01-MAY-23

**OTOLARYNGOLOGY /
OTOLOGY /
LARYNGOLOGY /
RHINOLOGY**

WATSON, DEBORAH, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

**PATHOLOGY ANATOMIC
CLINICAL**

LIN, GRACE, MD†

Provider ID: N/A

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-FEB-22

**PEDIATRIC
PULMONOLOGY**

ANBAR, RAN, MD

Provider ID: N/A

3252 HOLIDAY CT STE 113
LA JOLLA, CA 92037

Effective as of 01-NOV-18

PEDIATRIC RADIOLOGY

DWEK, JERRY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR

LA JOLLA, CA 92037

Effective as of 01-JAN-22

KONING, JEFFREY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-22

PUGMIRE, BRIAN, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-OCT-21

PEDIATRICS

GROBMAN, LILLIAN, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-DEC-21

KOOROS, KOOROSH, MD†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 345

LA JOLLA, CA 92037

Effective as of 01-FEB-22

**PHYSICAL MEDICINE /
REHABILITATION**

MADHAV, SANDIP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
530

LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

PHYSICIANS ASSISTANT

ABDELWAHHAB, EANAS, PA

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-JUN-23

ABRAHAMSEN, KELSEY, PA
Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-JAN-21

ALBRIGHT, KELSEY, PA†
Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

ALLERS, JENNA, PA
Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-23

ARMEEN, GARY, PA†
Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

BAKER, LINDZEE, PA
Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-NOV-22

BECKER, JANTIMA, PA
Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-DEC-21

CANDARE, VANESSA, PA
Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-FEB-21

CASO, STEPHEN, PA
Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-JAN-21

DOUGHERTY, CLARA, PA†
Provider ID: N/A

9850 GENESEE AVE STE
400
LA JOLLA, CA 92037
Effective as of 01-JAN-21

DOUGHERTY, CLARA, PA†
Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-SEP-22

FELLION, LAUREN, PA
Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-MAY-23

FLORENCE, BRYNA, PA†
Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-21

FREY, LAUREN, PA

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-OCT-22

GALDAMEZ, ANDREA, PA†
Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-DEC-21

GOTTESFELD, STEVEN, PA
Provider ID: N/A

9850 GENESEE AVE STE
650
LA JOLLA, CA 92037
Effective as of 01-DEC-23

HANSEN, CHRISTINA, PA
Provider ID: N/A

9850 GENESEE AVE STE
210
LA JOLLA, CA 92037
Teleservice
Effective as of 01-OCT-23

HIGGINS, JOSHUA, PA†
Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-JAN-22

HIGGINS, JOSHUA, PA†
Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-JAN-22

HUNTER, JACOB, PA†
Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
Effective as of 01-MAY-21

HUNTER, JACOB, PA

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HUNTER, JACOB, PA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HUNTER, JACOB, PA

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HUNTER, JACOB, PA†

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
Effective as of 01-FEB-22

MARTIN, HALEY, PA

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-MAR-24

MARTIN, HALEY, PA

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAR-24

MARTIN, HALEY, PA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAR-24

MATTIOLI, TAYLOR, PA

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-22

MORDEN, JACQUELINE, PA†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-22

MOTT, KRISTEN, PA

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-APR-22

OKADA, MICHELLE, PA†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-APR-21

OKADA, MICHELLE, PA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-21

PAAMONI, ARIELLE, PA

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-22

PELIO, DARREN, PA†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-SEP-22

PELIO, DARREN, PA†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-22

PERREAULT, MARK, PA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

PERREAULT, MARK, PA†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-AUG-21

RAHIM, ARIANNA, PA

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Effective as of 01-OCT-23

SAIKHON, TALIA, PA†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
Effective as of 01-SEP-22

SAINT, MEAGHAN, PA

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-DEC-21

SAUNDERS, SARA, PA†

Provider ID: N/A

9898 GENESEE AVE FL 4
LA JOLLA, CA 92037

Effective as of 01-MAY-16

SHARAF, KAREEM, PA†

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-DEC-21

SHARAF, KAREEM, PA†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-DEC-21

SHARAF, KAREEM, PA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-DEC-21

SNOWDEN, KELLY, PA

Provider ID: N/A

7855 IVANHOE AVE STE 110
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

SPEH, BRIAN, PA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAR-24

SZABO, HAYLIE, PA

Provider ID: N/A

9850 GENESEE AVE STE
210
LA JOLLA, CA 92037

Teleservice

Effective as of 01-OCT-22

WAHLIN, TAMARA, PA

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-JUN-23

WAHLIN, TAMARA, PA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

WAHLIN, TAMARA, PA

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

WAHLIN, TAMARA, PA

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-JUN-23

WEIR, JACQUELINE, PA†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-APR-21

WRITER, NICOLE, PA

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037*

Effective as of 01-FEB-21

PODIATRIST

BERENTER, JAY, DPM†

Provider ID: N/A

9850 GENESEE AVE STE
510
LA JOLLA, CA 92037

Effective as of 01-OCT-19

BERENTER, JAY, DPM†

Provider ID: N/A

9850 GENESEE AVE STE
510
LA JOLLA, CA 92037

Effective as of 01-JAN-21

BERGER, COLBY, DPM

Provider ID: N/A

9850 GENESEE AVE STE
510
LA JOLLA, CA 92037

Effective as of 01-APR-23

BERGER, COLBY, DPM

Provider ID: N/A

9850 GENESEE AVE STE
510
LA JOLLA, CA 92037

Effective as of 01-JUN-23

KREPS, CHRISTOPHER, DPM†

Provider ID: N/A

9850 GENESEE AVE STE
510
LA JOLLA, CA 92037

Effective as of 01-MAR-22

KREPS, CHRISTOPHER, DPM†

Provider ID: N/A

9850 GENESEE AVE STE
510
LA JOLLA, CA 92037

Effective as of 01-SEP-21

**PREVENTATIVE MEDICINE
GENERAL**

STERN, ANNA, MD

Provider ID: N/A

☒ 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Teleservice

Effective as of 01-FEB-24

PSYCHIATRY

BRAR, SIMERJEET, MD†

Provider ID: N/A

☒ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-21

BRAR, SIMERJEET, MD†

Provider ID: N/A

☒ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-21

FINN, DAPHNA, MD†

Provider ID: N/A

☒ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-SEP-21

FINN, DAPHNA, MD†

Provider ID: N/A

☒ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-SEP-21

JOSHI, YASH, MD

Provider ID: N/A

☒ 9300 CAMPUS POINT DR

LA JOLLA, CA 92037
Effective as of 01-JAN-24

JOSHI, YASH, MD

Provider ID: N/A

☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-24

KARANJIA, NAVAZ, MD†

Provider ID: N/A

☒ 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-FEB-22

KARANJIA, NAVAZ, MD†

Provider ID: N/A

☒ 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-FEB-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-22

LEDBETTER, ALEX, DO

Provider ID: N/A

☒ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-JAN-24

LEDBETTER, ALEX, DO

Provider ID: N/A

☒ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-JAN-24

LI, XIA, MD†

Provider ID: N/A

☒ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-21

LI, XIA, MD†

Provider ID: N/A

☒ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-21

LIU, FRED, MD†

Provider ID: N/A

☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

LIU, FRED, MD†

Provider ID: N/A

☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

MOORE, SHAVON, MD†

Provider ID: N/A

☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

MOORE, SHAVON, MD†

Provider ID: N/A

☒ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-NOV-21

MOORE, SHAVON, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

MOORE, SHAVON, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-NOV-21

NICHOLS, ALPHONSO, MD

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUL-22

QAYOUMI, WALI, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037
Effective as of 01-OCT-21

QAYOUMI, WALI, MD†

Provider ID: N/A

9500 GILMAN DR STE 2069
LA JOLLA, CA 92093
Effective as of 01-OCT-21

QAYOUMI, WALI, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037
Effective as of 01-OCT-21

QAYOUMI, WALI, MD†

Provider ID: N/A

9500 GILMAN DR STE 2069
LA JOLLA, CA 92093
Effective as of 01-OCT-21

REGO-KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037
Effective as of 01-OCT-23

REGO-KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037
Effective as of 01-OCT-23

REGO-KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037
Effective as of 01-SEP-22

REGO-KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037
Effective as of 01-OCT-23

REGO-KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037
Effective as of 01-OCT-23

REGO-KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037
Effective as of 01-SEP-22

SCHNEEBERGER, ANDRES, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-AUG-22

SCHNEEBERGER, ANDRES, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-AUG-22

TARVER, LESLIE, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-AUG-22

TARVER, LESLIE, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-AUG-22

PSYCHIATRY CHILD

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-23

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9834 GENESEE AVE STE
400
LA JOLLA, CA 92037

Effective as of 01-JUL-21

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9834 GENESEE AVE STE
400
LA JOLLA, CA 92037

Effective as of 01-JUL-21

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-23

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9834 GENESEE AVE STE
400
LA JOLLA, CA 92037

Effective as of 01-JUL-21

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9834 GENESEE AVE STE
400
LA JOLLA, CA 92037

Effective as of 01-JUL-21

NICHOLS, ALPHONSO, MD

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-22

REGO-KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

REGO-KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR

STE C217

LA JOLLA, CA 92037

Effective as of 01-OCT-23

REGO-KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-SEP-22

REGO-KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

REGO-KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

REGO-KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-SEP-22

**PSYCHIATRY SLEEP
MEDICINE**

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-23

PSYCHOLOGIST

BAILIS, JESSICA, PSYD

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-JUN-23

BAILIS, JESSICA, PSYD

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-JUN-23

BOUTELLE, KERRI, PhD

Provider ID: N/A

3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

BOUTELLE, KERRI, PhD

Provider ID: N/A

3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

CRANDAL, BRENT, PhD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-AUG-22

CRANDAL, BRENT, PhD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-AUG-22

CUSACK, ANNE, PSYD

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-DEC-23

CUSACK, ANNE, PSYD

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-DEC-23

EICHEN, DAWN, PhD

Provider ID: N/A

3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

EICHEN, DAWN, PhD

Provider ID: N/A

3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

KAUP, ALLISON, PhD†

Provider ID: N/A

9850 GENESEE AVE STE
530

LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

KAUP, ALLISON, PhD†

Provider ID: N/A

9850 GENESEE AVE STE
530

LA JOLLA, CA 92037

Teleservice

Effective as of 01-NOV-23

KAUP, ALLISON, PhD†

Provider ID: N/A

9850 GENESEE AVE STE
530

LA JOLLA, CA 92037

Teleservice

Effective as of 01-NOV-23

KAUP, ALLISON, PhD†

Provider ID: N/A

9850 GENESEE AVE STE
530

LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

MINASSIAN, ARPI, PhD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

MINASSIAN, ARPI, PhD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-NOV-21

MINASSIAN, ARPI, PhD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

MINASSIAN, ARPI, PhD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-NOV-21

PARK, JESSIE, PSYD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-DEC-21

PARK, JESSIE, PSYD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-DEC-21

REED, KRISTIE, PhD

Provider ID: N/A

3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

REED, KRISTIE, PhD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C212
LA JOLLA, CA 92037

Effective as of 01-AUG-22

REED, KRISTIE, PhD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C212
LA JOLLA, CA 92037

Effective as of 01-AUG-22

REED, KRISTIE, PhD

Provider ID: N/A

3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

TARLE, STEPHANIE, PhD

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-DEC-23

TARLE, STEPHANIE, PhD

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-DEC-23

**PUBLIC HEALTH
PREVENTATIVE MEDICINE**

PERLMAN, MONICA, MD

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-NOV-20

PULMONARY DISEASES

BAILEY, JACOB, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

CORATE, LALAINE, MD†

Provider ID: N/A

9850 GENESEE AVE STE
780
LA JOLLA, CA 92037

Effective as of 01-JAN-21

CORATE, LALAINE, MD†

Provider ID: N/A

9850 GENESEE AVE STE
370
LA JOLLA, CA 92037

Effective as of 01-JUL-20

CORATE, LALAINE, MD†

Provider ID: N/A

9850 GENESEE AVE STE
370
LA JOLLA, CA 92037

Effective as of 01-JAN-21

FE, ALEXANDER, MD†

Provider ID: N/A

9850 GENESEE AVE STE
370

LA JOLLA, CA 92037

Effective as of 01-SEP-21

FE, ALEXANDER, MD†

Provider ID: N/A

9850 GENESEE AVE STE
370
LA JOLLA, CA 92037

Effective as of 01-FEB-23

FRICKS, CARL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
370
LA JOLLA, CA 92037

Effective as of 01-JUL-20

FRICKS, CARL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
370
LA JOLLA, CA 92037

Effective as of 01-JAN-21

GLICKMAN, SAMUEL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
370
LA JOLLA, CA 92037

Effective as of 01-JAN-21

JONES, DANIEL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
370
LA JOLLA, CA 92037

Effective as of 01-JUL-20

MCCAUL, DAVID, MD†

Provider ID: N/A

9850 GENESEE AVE STE
370
LA JOLLA, CA 92037

Effective as of 01-JUL-20

MCCAUL, DAVID, MD†

Provider ID: N/A

9850 GENESEE AVE STE 370
LA JOLLA, CA 92037
Effective as of 01-JAN-21

MCGUIRE, WILLIAM, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

MUNOZ PINEDA, JORGE, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

PEARCE, ALEX, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

RADWAN, MOHAMED, MD†

Provider ID: N/A

9850 GENESEE AVE STE 370
LA JOLLA, CA 92037
Effective as of 01-JUL-20

RADIATION ONCOLOGY

BEAR, JONATHAN, MD

Provider ID: N/A

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-APR-23

BRUGGEMAN, ANDREW, MD†

Provider ID: N/A

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093
Effective as of 01-JAN-24

HATTANGADI GLUTH, JONA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-JAN-24

HORN, ADAM, MD

Provider ID: N/A

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-APR-23

MACEWAN, IAIN, MD†

Provider ID: N/A

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-JAN-21

MELL, LOREN, MD†

Provider ID: N/A

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-SEP-22

SANDHU, AJAY, MD†

Provider ID: N/A

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-JAN-24

SIMPSON, DANIEL, MD†

Provider ID: N/A

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-SEP-22

TRINGALE, KATHRYN, MD

Provider ID: N/A

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-DEC-23

TRINGALE, KATHRYN, MD

Provider ID: N/A

3960 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-DEC-23

TYE, KAREN, MD

Provider ID: N/A

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-JUN-23

YORK, JOHN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

RADIOLOGY DIAGNOSTIC

AGANOVIC, LEJLA, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

AMMIRATI, GUISEPPE, MD†

Provider ID: N/A

9834 GENESEE AVE STE 411
LA JOLLA, CA 92037
Effective as of 01-JAN-21

BOLAR, DIVYA, MD

Provider ID: N/A

9452 MEDICAL CENTER DR

LA JOLLA, CA 92037
Effective as of 01-APR-23

BOSWELL, GILBERT, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

BRANCH, CODY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-21

BROUHA, SHARON, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

BUI, KEVIN, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUL-21

CARSWELL, AIMEE, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

CHANG, JENNIFER, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

CHENG, KAREN, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

CHENG, KAREN, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-21

CHO, AARON, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

CHUNG, CHRISTINE, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

DORROS, STEPHEN, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

EAJAZI, ALIREZA, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-21

EGHTEDARI, MOHAMMAD, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

FARID, NIKDOKHT, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

FAZELI, SOUDABEH, MD

Provider ID: N/A

9300 CAMPUS POINT DR

LA JOLLA, CA 92037
Effective as of 01-JUL-23

FLISZAR, EVELYNE, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

FOWLER, KATHRYN, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

GENTILI, AMILCARE, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

HAHN, MICHAEL, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

HAHN, LEWIS, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

HANDWERKER, JASON, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

HAWLEY, DANIEL, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

HOROWITZ, MICHAEL, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

HSIAO, ALBERT, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

HUANG, BRADY, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

JACOBS, KATHLEEN, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

JACOBSON, JON, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

JAFFRAY, PAUL, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

KAROW, DAVID, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

KAROW, DAVID, MD

Provider ID: N/A

9452 MEDICAL CENTER DR

LA JOLLA, CA 92037
Effective as of 01-APR-23

KARUNAMUNI, JENNIFER, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

KIM, ERIC, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

KLIGERMAN, SETH, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

KONDILI, DHIMITER, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

LEE, ROLAND, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

LIM, VIVIAN, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

MAREK BYKOWSKI, JULIE, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

MARKS, ROBERT, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

MCDONALD, MARIN, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-22

MCDONALD, MARIN, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

MCNAMEE, CAIRINE, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

MCNAMEE, CAIRINE, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

NORBASH, ALEXANDER, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

OBOYLE, MARY, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

OBOYLE, MARY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR

LA JOLLA, CA 92037
Effective as of 01-FEB-22

OJEDA-FOURNIER, HAYDEE, MD

Provider ID: N/A
9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

PATHRIA, MINI, MD

Provider ID: N/A
9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

RAKOW-PENNER, REBECCA, MD

Provider ID: N/A
9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

RESNICK, DONALD, MD

Provider ID: N/A
9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

RITCHIE, DAVID, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SADAT, SAYED, DO

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SAMPATH, SRIHARI, MD

Provider ID: N/A
9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

SAMPATH, SRINATH, MD

Provider ID: N/A
9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

SANTILLAN, CYNTHIA, MD

Provider ID: N/A
9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

SEARLEMAN, ADAM, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SLATER, JERRY, MD†

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

SMITAMAN, EDWARD, MD

Provider ID: N/A
9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

SPENGLER, NATHAN, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

STEINBERGER, AMANDA, DO

Provider ID: N/A
9850 GENESEE AVE STE
410
LA JOLLA, CA 92037
Teleservice
Effective as of 01-OCT-23

STEINBERGER, AMANDA, DO

Provider ID: N/A
9850 GENESEE AVE STE
410
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-24

TAMAYO-MURILLO, DORATHY, MD

Provider ID: N/A
9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

THOMPSON, COLE, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

UNSDORFER, KYLE, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

VAHDOT, NOUSHIN, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

YORK, VINCENT, MD†

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

**REGISTERED DIETITIAN /
NUTRITIONIST**

SALCEDO, ALEXANDRA, RD
Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

**REGISTERED PHYSICAL
THERAPIST**

CAPONETTI, ELLIOTT, PT

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

CAPONETTI, ELLIOTT, PT

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JAN-24

FERRER, MIRON, PT

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

GILLILAND, TYLER, PT

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JAN-24

HOUSELY, ALEXIS, PT

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SHARP, SIMPSON, PT

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

TROYER, CORY, PT

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

RHEUMATOLOGY

KIM, JANET, MD

Provider ID: N/A

9850 GENESEE AVE STE
420
LA JOLLA, CA 92037
Effective as of 01-FEB-17

KIM, JANET, MD

Provider ID: N/A

9850 GENESEE AVE STE
420
LA JOLLA, CA 92037
Effective as of 01-SEP-18

SPEECH PATHOLOGIST

BLUMENFELD, LIZA, SP

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

**LINNEMEYER-RISSER,
KRISTEN, SP**

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

**LINNEMEYER-RISSER,
KRISTEN, SP**

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037
Effective as of 01-MAY-23

NEESE, SUSAN, SP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

**SCHIEDERMAYER, BENJAMIN,
SP†**

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-APR-22

**SCHIEDERMAYER, BENJAMIN,
SP†**

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-APR-22

THOMPSON, DANIELLE, SP

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JAN-24

**SURGERY COLON
SURGERY**

BEIERMEISTER, KEITH, MD†

Provider ID: N/A

9834 GENESEE AVE STE
201
LA JOLLA, CA 92037
Effective as of 01-AUG-13

BEIERMEISTER, KEITH, MD†

Provider ID: N/A

9834 GENESEE AVE STE
201
LA JOLLA, CA 92037
Effective as of 01-JAN-21

LOPEZ, NICOLE, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-DEC-21

PARRY, LISA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-APR-21

RAMAMOORTHY, SONIA, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21

SCHULTZEL, MATTHEW, DO†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Effective as of 01-JAN-21

WORSEY, MICHAEL, MD†

Provider ID: N/A

9834 GENESEE AVE STE
201
LA JOLLA, CA 92037
Effective as of 01-JAN-21

WORSEY, MICHAEL, MD†

Provider ID: N/A

9834 GENESEE AVE STE
201
LA JOLLA, CA 92037
Effective as of 01-AUG-12

SURGERY CRITICAL CARE

ADAMS, LAURA, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

VENTRO, GEORGE, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

SURGERY GENERAL

ARMANI, AVA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JUL-21

BHOYRUL, SUNIL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-JAN-21

BHOYRUL, SUNIL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-SEP-22

BORTZ, PASCAL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-SEP-22

BORTZ, PASCAL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037

Effective as of 01-AUG-23

BORTZ, PASCAL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-JAN-21

BURGESS, DANIEL, DO†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-21

BURGESS, DANIEL, DO†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Teleservice
Effective as of 01-OCT-23

HORGAN, SANTIAGO, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21

MORELL, MICHAEL, MD

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-DEC-23

MORELL, MICHAEL, MD

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-MAR-24

OLSON, CHERYL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
660
LA JOLLA, CA 92037
Effective as of 01-FEB-23

OLSON, CHERYL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
660
LA JOLLA, CA 92037
Effective as of 01-APR-17

SCHULTZEL, MATTHEW, DO†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Effective as of 01-JUL-20

SHAPER, EMANUEL, MD

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-MAY-23

SHAPER, EMANUEL, MD

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-FEB-24

SHERMAN, MARK, MD

Provider ID: N/A

9850 GENESEE AVE STE
660
LA JOLLA, CA 92037
Effective as of 01-FEB-23

**SURGERY GENERAL
VASCULAR**

BUNKE, NISHA, MD†

Provider ID: N/A

9850 GENESEE AVE STE
410
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

LUCAS, SARAH, MD

Provider ID: N/A

9850 GENESEE AVE STE
410
LA JOLLA, CA 92037
Effective as of 01-JAN-21

SURGERY HAND

BROWN, RICHARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
210
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

DOWNING, KRISTOPHER, MD†

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037
Effective as of 01-MAY-18

SURGERY HAND

ORTHOPEDIC

STEPHENSON, SAMUEL, MD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-OCT-21

STEPHENSON, SAMUEL, MD†

Provider ID: N/A

9300 CAMPUS POINT DR

LA JOLLA, CA 92037
Effective as of 01-OCT-21

SURGERY

NEUROLOGICAL

MURTHY, NIKHIL, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

MURTHY, NIKHIL, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUL-23

OSTRUP, RICHARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
770
LA JOLLA, CA 92037
Effective as of 01-JAN-13

SURGERY ORTHOPEDIC

ANDRY, JAMES, MD

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037
Effective as of 01-MAR-24

BLAIS, MICAH, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

BLAIS, MICAH, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUL-23

BUKATA, SUSAN, MD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAR-21

CHOI, JIHOON, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

CHOI, JIHOON, MD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-21

DOWNING, KRISTOPHER, MD†

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037
Effective as of 01-MAR-24

GOEB, YANNICK, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

GOEB, YANNICK, MD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-21

HACKLEY, DAVID, MD†

Provider ID: N/A

9850 GENESEE AVE STE
210
LA JOLLA, CA 92037
Effective as of 01-JAN-21

MARSHALL, STUART, MD

Provider ID: N/A

7301 GIRARD AVE STE 300
LA JOLLA, CA 92037
Effective as of 01-NOV-18

MOHLENBROCK, WILLIAM, MD

Provider ID: N/A

9850 GENESEE AVE STE
210
LA JOLLA, CA 92037
Effective as of 01-JAN-21

SWENSON, FRANK, MD†

Provider ID: N/A

9850 GENESEE AVE STE
210
LA JOLLA, CA 92037
Effective as of 01-JAN-21

TAYLOR, MARIO, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUN-23

TAYLOR, MARIO, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

THUNDER, RICHARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
210
LA JOLLA, CA 92037
Effective as of 01-JAN-21

WHEATLEY, BENJAMIN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SURGERY PLASTIC

GOSMAN, AMANDA, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

MOFID, MEHRDAD, MD†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 300
LA JOLLA, CA 92037
Effective as of 01-JUL-21

MOFID, MEHRDAD, MD†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 300
LA JOLLA, CA 92037
Effective as of 01-JUL-22

MOFID, MEHRDAD, MD†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 300
LA JOLLA, CA 92037
Effective as of 01-JAN-21

MOFID, MEHRDAD, MD†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 300
LA JOLLA, CA 92037
Effective as of 01-MAR-16

MOFID, MEHRDAD, MD†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 300
LA JOLLA, CA 92037
Effective as of 01-SEP-15

UMANSKY, JEFFREY, MD†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 260
LA JOLLA, CA 92037*
Effective as of 01-JAN-14

SURGERY THORACIC

BARADARIAN, SAM, MD†

Provider ID: N/A

9898 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-NOV-17

BARADARIAN, SAM, MD

Provider ID: N/A

9898 GENESEE AVE FL 3
LA JOLLA, CA 92037
Effective as of 01-JAN-24

HUDSON, JESSICA, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-DEC-23

HUDSON, JESSICA, MD

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

HUDSON, JESSICA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

MOASIS, GHASSAN, MD†

Provider ID: N/A

9898 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-MAY-17

TYNER, JOHN, MD†

Provider ID: N/A

10666 N TORREY PINES RD
STE 209
LA JOLLA, CA 92037
Effective as of 01-SEP-20

TYNER, JOHN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Effective as of 01-SEP-15

ZANDER, ASHLEY, DO†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

ZANDER, ASHLEY, DO†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-AUG-22

ZANDER, ASHLEY, DO†

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

SURGICAL ONCOLOGY

MEHTSUN, WINTA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JAN-22

UROLOGY

ANGER, JENNIFER, MD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-OCT-21

BAGRODIA, ADITYA, MD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-DEC-21

BASTUBA, MARTIN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
630
LA JOLLA, CA 92037
Effective as of 01-JAN-21

COHEN, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JUL-22

COHEN, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-21

COHEN, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-21

COHEN, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-SEP-21

COHEN, EDWARD, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-OCT-12

DATO, PAUL, MD

Provider ID: N/A

☐ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-24

DICKS, BRIAN, MD

Provider ID: N/A

☐ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-FEB-24

JUMA, SAAD, MD

Provider ID: N/A

☐ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-24

KATZ, JONATHAN, MD

Provider ID: N/A

☐ 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUN-23

KEILLER, DANNY, MD

Provider ID: N/A

☐ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-FEB-24

NAITOH, JOHN, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
440

LA JOLLA, CA 92037
Effective as of 01-JAN-21

NAITOH, JOHN, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JUL-22

NAITOH, JOHN, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-SEP-22

NAITOH, JOHN, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-21

NAITOH, JOHN, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-NOV-21

NAITOH, JOHN, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-NOV-98

NEUSTEIN, PAUL, MD

Provider ID: N/A

☐ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-24

NGUYEN, HUNG, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Teleservice
Effective as of 01-SEP-19

NGUYEN, HUNG, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

NGUYEN, HUNG, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

NGUYEN, HUNG, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Teleservice
Effective as of 01-SEP-21

PE, MARK-RALLY, MD

Provider ID: N/A

☐ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-FEB-24

ROBERTS, JAMES, MD

Provider ID: N/A

☐ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Effective as of 01-FEB-24

SALMASI, AMIRALI, MD

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Effective as of 01-JAN-24

SHEETZ, TYLER, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-23

SIMON, SCOTT, MD

Provider ID: N/A

9834 GENESEE AVE STE
224

LA JOLLA, CA 92037

Effective as of 01-JUN-23

VAPNEK, EVAN, MD

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Effective as of 01-JAN-24

WANG, LUKE, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-JUN-23

YUH, BENJAMIN, MD†

Provider ID: N/A

9850 GENESEE AVE STE

440

LA JOLLA, CA 92037

Effective as of 01-JAN-23

YUH, BENJAMIN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Effective as of 01-SEP-22

ALLERGY IMMUNOLOGY

REDDY, SUMANA, MD†

Provider ID: N/A

8860 CENTER DR STE 320
LA MESA, CA 91942

Effective as of 01-JUL-22

ANESTHESIOLOGY

CHIEN, SHELBY, MD†

Provider ID: N/A

5360 JACKSON DR STE 100
LA MESA, CA 91942

Effective as of 01-JAN-21

VERDOLIN, MICHAEL, MD

Provider ID: N/A

7051 ALVARADO RD STE 101
LA MESA, CA 91942

Effective as of 01-JAN-23

VERDOLIN, MICHAEL, MD

Provider ID: N/A

7051 ALVARADO RD STE 101
LA MESA, CA 91942

Effective as of 01-FEB-16

VERDOLIN, MICHAEL, MD

Provider ID: N/A

7051 ALVARADO RD STE 101
LA MESA, CA 91942

Effective as of 01-JAN-21

**ANESTHESIOLOGY PAIN
MANAGEMENT**

BAUMGARTL, WILLIAM, MD†

Provider ID: N/A

5360 JACKSON DR STE 100
LA MESA, CA 91942

Teleservice

Effective as of 01-JAN-23

COHEN, ZACHARY, MD

Provider ID: N/A

5360 JACKSON DR STE 100
LA MESA, CA 91942

Effective as of 01-FEB-24

VERDOLIN, MICHAEL, MD

Provider ID: N/A

7051 ALVARADO RD STE 101
LA MESA, CA 91942

Effective as of 01-MAR-22

AUDIOLOGIST

HORNER, HEATHER, AuD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 463
LA MESA, CA 91942

Teleservice

Effective as of 01-JUN-22

SHASKY, GARY, AuD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 153
LA MESA, CA 91942

Effective as of 01-JAN-21

SHASKY, GARY, AuD

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 463
LA MESA, CA 91942

Effective as of 01-FEB-24

**CARDIAC
ELECTROPHYSIOLOGY**

DAWOOD, FARAH, MD†

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942

Effective as of 01-DEC-20

CARDIOLOGY

MEHRANPOUR, PAYAM, MD†

Provider ID: N/A

8851 CENTER DR STE 405
LA MESA, CA 91942

Effective as of 01-JAN-19

NGUYEN, BRYANT, MD†

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942

Effective as of 01-JAN-21

REDDY, REDDIWANDLA, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 202
LA MESA, CA 91942

Effective as of 01-JAN-21

REDDY, REDDIWANDLA, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 202
LA MESA, CA 91942

Effective as of 01-SEP-22

TAGHIZADEH, BEHZAD, MD†

Provider ID: N/A

8851 CENTER DR STE 405
LA MESA, CA 91942

Effective as of 01-SEP-22

YELLEN, LAURENCE, MD†

Provider ID: N/A

8851 CENTER DR STE 405
LA MESA, CA 91942

Effective as of 01-SEP-22

**CARDIOVASCULAR
DISEASE**

AZIMI, NASSIR, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3 STE 444
LA MESA, CA 91942

Effective as of 01-SEP-22

AZIMI, NASSIR, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3 STE 444
LA MESA, CA 91942

Effective as of 01-JAN-21

BELOTT, PETER, MD†

Provider ID: N/A

8851 CENTER DR STE 305
LA MESA, CA 91942

Effective as of 01-APR-17

DAWOOD, FARAH, MD†

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942

Effective as of 01-AUG-21

FERNANDEZ, GENARO, MD†

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942

Effective as of 01-AUG-21

KIM, JAMES, MD

Provider ID: N/A

5358 JACKSON DR STE 1

LA MESA, CA 91942

Teleservice

Effective as of 01-JUN-23

KIM, JAMES, MD

Provider ID: N/A

5358 JACKSON DR STE 1
LA MESA, CA 91942

Teleservice

Effective as of 01-AUG-23

KOTHA, PURUSHOTHAM, MD†

Provider ID: N/A

8860 CENTER DR STE 400
LA MESA, CA 91942

Effective as of 01-JAN-21

MEHRANPOUR, PAYAM, MD†

Provider ID: N/A

8851 CENTER DR STE 405
LA MESA, CA 91942

Effective as of 01-JAN-21

SHEREV, DIMITRI, MD

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942

Effective as of 01-APR-23

**CERTIFIED NURSE
PRACTITIONER**

DWYER, ERIN, NP

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942

Effective as of 01-JAN-24

HALE, EMILY, NPF

Provider ID: N/A

5360 JACKSON DR STE 100
LA MESA, CA 91942

Teleservice

Effective as of 01-MAY-23

MCCALLION, DANIELLE, NP

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-AUG-23

MCCALLION, DANIELLE, NP

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-AUG-23

MEGERT, SONYA, NP†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-SEP-22

TOMICICH, STEPHANIE, NP

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942

Effective as of 01-JAN-24

WOLF, ELI, NP

Provider ID: N/A

7339 EL CAJON BLVD STE 1
LA MESA, CA 91942

Effective as of 01-OCT-23

**HEARING AID DEALER /
SUPPLIER**

ANDERSON, ELAINE, MA†

Provider ID: N/A

5565 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-SEP-22

**HEMATOLOGY /
ONCOLOGY**

BATRA, REEMA, MD†

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JAN-21

BATRA, REEMA, MD†

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942*

Effective as of 01-JAN-14

MEDIC, IGOR, MD†

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JAN-21

MEDIC, IGOR, MD†

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942*

Effective as of 01-FEB-18

ZU, KAI, MD†

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Teleservice

Effective as of 01-JAN-21

ZU, KAI, MD†

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942*

Teleservice

Effective as of 01-JAN-14

INFECTIOUS DISEASE

HADDAD, FADI, MD

Provider ID: N/A

8860 CENTER DR STE 320
LA MESA, CA 91942

Effective as of 01-JUN-23

MIRADI, MOHAMMED, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 1 STE 211
LA MESA, CA 91942

Effective as of 01-SEP-22

MIRADI, MOHAMMED, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 1 STE 211
LA MESA, CA 91942

Effective as of 01-APR-15

INTERNAL MEDICINE

FADDA, GEORGE, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-NOV-23

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-SEP-14

FERNANDEZ, GENARO, MD†

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942

Effective as of 01-SEP-22

KOTHA, ROSHAN, MD†

Provider ID: N/A

8860 CENTER DR STE 400
LA MESA, CA 91942

Effective as of 01-SEP-15

LEININGER, DANIEL, DO†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Teleservice

Effective as of 01-NOV-22

LIU, ANDREW, MD

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-SEP-23

MOOLANI, UJJALA, MD

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-MAY-23

POKALA, SATHYA, MD†

Provider ID: N/A

8860 CENTER DR STE 240
LA MESA, CA 91942

Effective as of 01-JAN-14

**INTERVENTIONAL
CARDIOLOGY**

FERNANDEZ, GENARO, MD†

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942

Effective as of 01-DEC-20

NAGHI, JESSE, MD†

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942

Effective as of 01-JAN-24

NAGHI, JESSE, MD†

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942

Effective as of 01-JUL-22

TAGHIZADEH, BEHZAD, MD†

Provider ID: N/A

8851 CENTER DR STE 405
LA MESA, CA 91942

Effective as of 01-SEP-22

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-MAY-23

DO, LUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JUL-22

DO, LUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-SEP-20

DO, LUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JAN-21

DO, LUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JAN-21

DO, LUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505

LA MESA, CA 91942

Effective as of 01-JAN-14

FADDA, GEORGE, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-AUG-16

FADDA, GEORGE, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-AUG-16

FADDA, GEORGE, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JAN-21

FADDA, GEORGE, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JUL-22

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-AUG-14

LEININGER, DANIEL, DO†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Teleservice

Effective as of 01-AUG-22

LEININGER, DANIEL, DO†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Teleservice

Effective as of 01-OCT-22

LEININGER, DANIEL, DO†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Teleservice

Effective as of 01-SEP-22

LEININGER, DANIEL, DO†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Teleservice

Effective as of 01-SEP-22

MILLER, LUCY, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-SEP-20

MILLER, LUCY, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JUL-22

MILLER, LUCY, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JAN-21

MILLER, LUCY, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JAN-21

MILLER, LUCY, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-APR-15

SAEED, ODAY, MD

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-MAR-24

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-MAY-15

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JUL-22

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JAN-21

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JAN-21

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JAN-21

NEUROLOGY

MOHAMMAD, AHMAD SHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942

Effective as of 01-SEP-22

MOHAMMAD, AHMAD SHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942

Effective as of 01-JAN-14

MOHAMMAD, AHMAD SHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942

Effective as of 01-JAN-21

MOHAMMAD, AHMAD SHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942*

Effective as of 01-JAN-21

MOHAMMAD, AHMAD SHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942

Effective as of 01-JAN-21

**OBSTETRICS /
GYNECOLOGY**

DAVIS, TRACIE, MD†

Provider ID: N/A

8851 CENTER DR STE 210
LA MESA, CA 91942

Effective as of 01-APR-21

PAPA, RHETT, DO†

Provider ID: N/A

8851 CENTER DR STE 210
LA MESA, CA 91942

Effective as of 01-APR-21

**OCCUPATIONAL
THERAPIST**

**BERNALES-MENDEZ,
DEZARINA, OT**

Provider ID: N/A

4700 SPRING ST STE 180
LA MESA, CA 91942
Effective as of 01-NOV-23

**BERNALES-MENDEZ,
DEZARINA, OT**

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-AUG-23

**BERNALES-MENDEZ,
DEZARINA, OT**

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-JAN-23

PORTER, EILEEN, OT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-AUG-23

PORTER, EILEEN, OT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-JAN-22

PORTER, EILEEN, OT

Provider ID: N/A

4700 SPRING ST STE 180
LA MESA, CA 91942
Effective as of 01-NOV-23

SHIH, LYNN, OT

Provider ID: N/A

4700 SPRING ST STE 180
LA MESA, CA 91942
Effective as of 01-DEC-23

SHIH, LYNN, OT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-DEC-23

ONCOLOGY MEDICAL

BODKIN, DAVID, MD†

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-21

OPHTHALMOLOGY

BINDER, NICHOLAS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3 BLDG 2
LA MESA, CA 91942
Effective as of 01-NOV-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3 BLDG 2
LA MESA, CA 91942
Effective as of 01-APR-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-DEC-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J

AND K

LA MESA, CA 91942

Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3 BLDG 2
LA MESA, CA 91942
Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

CARRABY, ARNETT, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-JUL-22

CARRABY, ARNETT, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

CHANG, TOM, MD

Provider ID: N/A

7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Effective as of 01-NOV-23

CHANG, TOM, MD

Provider ID: N/A

7339 EL CAJON BLVD STE
K
LA MESA, CA 91942
Effective as of 01-NOV-23

CHANG, TOM, MD

Provider ID: N/A

7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Effective as of 01-NOV-23

CHANG, TOM, MD

Provider ID: N/A

7339 EL CAJON BLVD STE
K
LA MESA, CA 91942
Effective as of 01-NOV-23

CHANG, TOM, MD

Provider ID: N/A

7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Effective as of 01-NOV-23

CHANG, TOM, MD

Provider ID: N/A

7339 EL CAJON BLVD STE
K
LA MESA, CA 91942
Effective as of 01-NOV-23

CHANG, TOM, MD

Provider ID: N/A

7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Effective as of 01-NOV-23

CHANG, TOM, MD

Provider ID: N/A

7339 EL CAJON BLVD STE
K
LA MESA, CA 91942
Effective as of 01-NOV-23

CHANG, TOM, MD

Provider ID: N/A

7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Effective as of 01-NOV-23

CHANG, TOM, MD

Provider ID: N/A

7339 EL CAJON BLVD STE
K
LA MESA, CA 91942
Effective as of 01-NOV-23

CHANG, TOM, MD

Provider ID: N/A

7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Effective as of 01-NOV-23

CHANG, TOM, MD

Provider ID: N/A

7339 EL CAJON BLVD STE
K
LA MESA, CA 91942
Effective as of 01-NOV-23

CHANG, TOM, MD

Provider ID: N/A

7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Effective as of 01-NOV-23

CHANG, TOM, MD

Provider ID: N/A

7339 EL CAJON BLVD STE
K
LA MESA, CA 91942
Effective as of 01-NOV-23

CHIU, STEPHAN, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-MAY-22

CHIU, STEPHAN, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-FEB-23

CHIU, STEPHAN, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-JUN-23

DELENGOCKY, TAYSON, DO†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-JUL-22

DELENGOCKY, TAYSON, DO†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

FISH, STEVEN, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 2 STE 3
LA MESA, CA 91942
Effective as of 01-JAN-22

FISH, STEVEN, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-JUN-22

FISH, STEVEN, MD

Provider ID: N/A

7339 EL CAJON BLVD STE
J-K
LA MESA, CA 91942
Effective as of 01-APR-23

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-APR-23

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-JUN-23

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3 BLDG 2
LA MESA, CA 91942

Effective as of 01-SEP-22

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-SEP-22

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-SEP-22

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-JAN-21

HAIGHT, BRUCE, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
551

LA MESA, CA 91942

Effective as of 01-JAN-21

HAIGHT, BRUCE, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-SEP-22

HAIGHT, BRUCE, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
551

LA MESA, CA 91942

Effective as of 01-SEP-22

HAIGHT, BRUCE, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 2-3
LA MESA, CA 91942

Effective as of 01-SEP-22

HAIGHT, BRUCE, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
551

LA MESA, CA 91942

Effective as of 01-JAN-22

HAIGHT, BRUCE, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

HSU, CHRISTOPHER, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

HSU, CHRISTOPHER, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-APR-22

HSU, CHRISTOPHER, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-MAY-22

HUDSON, HENRY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-APR-23

HUDSON, HENRY, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-APR-23

HUDSON, HENRY, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

HUDSON, HENRY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551

LA MESA, CA 91942
Effective as of 01-SEP-22

HUDSON, HENRY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-MAY-21

HUDSON, HENRY, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-23

HUDSON, HENRY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-MAR-23

KATZMAN, BARRY, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

KATZMAN, BARRY, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-APR-22

MANI, MAJID, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-JUL-22

MANI, MAJID, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

MANI, NASRIN, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 2 STE 3
LA MESA, CA 91942
Effective as of 01-JAN-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-APR-23

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 2 STE 3
LA MESA, CA 91942
Effective as of 01-APR-22

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551 BLDG
3
LA MESA, CA 91942
Effective as of 01-SEP-22

MORRISON-REYES, JOSHUA, MD

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-FEB-24

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551 BLDG
3
LA MESA, CA 91942
Effective as of 01-MAR-23

NAJAFI, DAVID, MD

Provider ID: N/A

8262 UNIVERSITY AVE
LA MESA, CA 91942
Effective as of 01-JAN-23

PAPASTERGIU, GEORGIOS, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

PAPASTERGIOU, GEORGIOS, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-JAN-21

PAPASTERGIOU, GEORGIOS, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-AUG-20

PATEL, GITANE, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-SEP-22

PATEL, SARJAN, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-SEP-22

PATEL, GITANE, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-DEC-23

PATEL, SARJAN, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-DEC-23

PATEL, GITANE, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

PATEL, SARJAN, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

PEAIRS, JAMES, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

PEAIRS, JAMES, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-AUG-20

PERRY, ARTHUR, MD

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-APR-23

PERRY, ARTHUR, MD

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-APR-22

PRABHU, SUJATA, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3 BLDG 2

LA MESA, CA 91942
Effective as of 01-APR-22

PRABHU, SUJATA, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
551
LA MESA, CA 91942
Effective as of 01-DEC-20

PRABHU, SUJATA, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-DEC-23

PRABHU, SUJATA, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-SEP-22

PRABHU, SUJATA, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

PRATT, STEVEN, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

RAJSBAUM, MARTIN, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-JUL-22

SAMUEL, MICHAEL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-MAR-21

SAMUEL, MICHAEL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-FEB-21

SASSANI, PATRICK, MD

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942

Effective as of 01-FEB-24

SCHER, BARRY, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942

Effective as of 01-SEP-22

SKAF, AYHAM, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942

Effective as of 01-SEP-22

SKAF, AYHAM, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942

Effective as of 01-JAN-21

SKAF, AYHAM, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942

Effective as of 01-AUG-20

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3
LA MESA, CA 91942

Effective as of 01-JAN-21

OPTOMETRIST

AOTO, KIM, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

AOTO, KIM, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-SEP-22

DEAN, MOENA, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-JAN-24

DEAN, MOENA, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

DYER, SHARON, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K

LA MESA, CA 91942

Effective as of 01-MAR-22

DYER, SHARON, OD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-SEP-22

HAN, SUL KI, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE
J/K
LA MESA, CA 91942

Effective as of 01-DEC-22

KHALIL, VADY, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE
J-K
LA MESA, CA 91942

Effective as of 01-NOV-22

KHALIL, VADY, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE
J-K
LA MESA, CA 91942

Effective as of 01-NOV-22

TONNU, ANH, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

VINH, JOHN, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

VINH, JOHN, OD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-SEP-20

VINH, JOHN, OD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-JAN-21

ZVANUT, DONALD, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-AUG-22

ZVANUT, DONALD, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

OTOLARYNGOLOGY

BUSINO, ROWLEY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942

Effective as of 01-JAN-21

BUSINO, ROWLEY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-JAN-21

BUSINO, ROWLEY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-DEC-15

BUSINO, ROWLEY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-APR-21

BUSINO, ROWLEY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-SEP-22

BUSINO, ROWLEY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-JAN-21

BUSINO, ROWLEY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-JUL-22

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT

CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-JUL-22

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-SEP-22

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-NOV-22

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-APR-21

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-JAN-21

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-JAN-21

MOSHTAGHI, OMID, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-OCT-23

MOSHTAGHI, OMID, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JAN-24

PATSIAS, ALEXIS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942

Effective as of 01-JAN-21

PATSIAS, ALEXIS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942

Effective as of 01-JUN-20

PATSIAS, ALEXIS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942

Effective as of 01-MAY-21

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-JAN-21

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-APR-21

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-JAN-21

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-JAN-21

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-NOV-22

SAEZ, NEIL, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3
LA MESA, CA 91942

Effective as of 01-NOV-23

SAEZ, NEIL, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JAN-24

SAEZ, NEIL, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-FEB-24

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3
LA MESA, CA 91942

Effective as of 01-JAN-21

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3
LA MESA, CA 91942

Effective as of 01-MAY-21

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-JUL-22

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-OCT-22

SKELTON, SEAN, DO†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-SEP-22

SKELTON, SEAN, DO†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-MAY-21

SKELTON, SEAN, DO†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-APR-21

**OTOLARYNGOLOGY /
OTOLOGY /
LARYNGOLOGY /
RHINOLOGY**

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-DEC-15

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-AUG-16

PEDIATRICS

SHAHBAZ, MAJID, MD

Provider ID: N/A

8851 CENTER DR STE 408
LA MESA, CA 91942

Effective as of 01-MAR-18

**PHYS MED/ REHAB PAIN
MEDICINE**

KATZEN, SETH, DO

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-MAY-23

**PHYSICAL MEDICINE /
REHABILITATION**

HURSCHMAN, ALAN, MD†

Provider ID: N/A

5360 JACKSON DR STE 100
LA MESA, CA 91942

Effective as of 01-JAN-23

KATZEN, SETH, DO

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-NOV-22

PHYSICIANS ASSISTANT

DOUGHERTY, CLARA, PA

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942

Effective as of 01-JAN-24

ELO, KRISTIN, PA†

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JAN-21

FERRARA, SAMANTHA, PA

Provider ID: N/A

7339 EL CAJON BLVD STE 1
LA MESA, CA 91942

Teleservice

Effective as of 01-JUL-23

GUTH, CARA, PA

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-24

HINKLE, CORINNE, PA

Provider ID: N/A

7339 EL CAJON BLVD STE 1
LA MESA, CA 91942

Teleservice

Effective as of 01-MAR-24

KHALEGHI, MANI, PA†

Provider ID: N/A

5360 JACKSON DR STE 100
LA MESA, CA 91942

Effective as of 01-JAN-21

MOORMAN, KRISTA, PA

Provider ID: N/A

7339 EL CAJON BLVD STE 1
LA MESA, CA 91942

Effective as of 01-MAY-22

PYLE, ALEXANDRA, PA

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-24

TAYLOR, RYAN, PA

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-24

WHITE, KYLE, PA

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3
LA MESA, CA 91942

Teleservice

Effective as of 01-MAR-23

WHITE, KYLE, PA

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-MAY-23

WHITE, KYLE, PA

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-NOV-23

PODIATRIST

CAINE, SAMUEL, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942

Teleservice

Effective as of 01-DEC-23

CAINE, SAMUEL, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942

Teleservice

Effective as of 01-DEC-23

COLLINS, MICHAEL, DPM†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-AUG-23

COLLINS, MICHAEL, DPM†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-21

COX, KEVIN, DPM

Provider ID: N/A

5129 GARFIELD ST
LA MESA, CA 91941

Effective as of 01-APR-23

KRIGER, STEPHEN, DPM†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Teleservice

Effective as of 01-JAN-22

NGUYEN, HAN, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-JUL-23

NGUYEN, HAN, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-JAN-24

NGUYEN, HAN, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-JUN-23

NGUYEN, HAN, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-DEC-23

TSAI, GRACE, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942

Effective as of 01-APR-23

TSAI, GRACE, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942

Effective as of 01-FEB-23

TSAI, GRACE, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942

Effective as of 01-SEP-23

XU, DIXON, DPM†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-MAR-24

XU, DIXON, DPM†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-SEP-22

PSYCHIATRY

MILLER, BRIAN, MD

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JUL-23

MILLER, BRIAN, MD

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JUL-23

PULMONARY DISEASES

AL-NASER, RAED, MD

Provider ID: N/A

5525 GROSSMONT
CENTER DR STE 609
LA MESA, CA 91942

Effective as of 01-AUG-23

RADIATION ONCOLOGY

BRUGGEMAN, ANDREW, MD

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JAN-24

CARMONA, RUBEN, MD

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JAN-24

COLEMAN, LORI, MD†

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JAN-21

JABBARI, SIAVASH, MD†

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-OCT-22

PEJAVAR, SUNANDA, MD†

Provider ID: N/A

5555 GROSSMONT
CENTER DR

LA MESA, CA 91942

Effective as of 01-JAN-21

UHL, BARRY, MD†

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JAN-21

VOLPP, PAUL, MD†

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JAN-21

WEINSTEIN, GEOFFREY, MD†

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JAN-21

RADIOLOGY DIAGNOSTIC

MOORE, BRIAN, MD†

Provider ID: N/A

8860 CENTER DR STE 100
LA MESA, CA 91942

Effective as of 01-JAN-21

MOORE, BRIAN, MD†

Provider ID: N/A

8881 FLETCHER PKWY STE
102
LA MESA, CA 91942

Effective as of 01-JAN-21

VENKATESH, VIJAY, MD†

Provider ID: N/A

8860 CENTER DR STE 100
LA MESA, CA 91942

Effective as of 01-SEP-22

VENKATESH, VIJAY, MD†

Provider ID: N/A

8881 FLETCHER PKWY STE
102
LA MESA, CA 91942

Effective as of 01-SEP-22

REGISTERED PHYSICAL THERAPIST

ALLOS, ALEXANDER, PT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942

Effective as of 01-NOV-23

CONCHA URDAY ZAA, JANNY, PT

Provider ID: N/A

5266 BALTIMORE DR
LA MESA, CA 91942

Effective as of 01-JAN-23

NGUYEN, STEVEN, PT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942

Effective as of 01-AUG-23

NGUYEN, STEVEN, PT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942

Effective as of 01-MAY-22

PAPA, AMY, PT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942

Effective as of 01-NOV-21

PAPA, AMY, PT

Provider ID: N/A

8388 PARKWAY DR

LA MESA, CA 91942
Effective as of 01-AUG-23

SAHATDJIAN, EVA, PT

Provider ID: N/A
8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-AUG-23

SAHATDJIAN, EVA, PT

Provider ID: N/A
8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-DEC-21

THOMAS, KAITLIN, PT

Provider ID: N/A
8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-NOV-23

RHEUMATOLOGY

KOTHA, AKTHER, MD†

Provider ID: N/A
8860 CENTER DR STE 400
LA MESA, CA 91942
Effective as of 01-SEP-15

KOTHA, ROSHAN, MD†

Provider ID: N/A
8860 CENTER DR STE 400
LA MESA, CA 91942
Effective as of 01-AUG-20

KOTHA, AKTHER, MD†

Provider ID: N/A
8860 CENTER DR STE 400
LA MESA, CA 91942
Effective as of 01-DEC-23

KOTHA, AKTHER, MD†

Provider ID: N/A
8860 CENTER DR STE 400
LA MESA, CA 91942

Effective as of 01-JAN-21

KOTHA, ROSHAN, MD†

Provider ID: N/A
8860 CENTER DR STE 400
LA MESA, CA 91942
Effective as of 01-JAN-21

SURGERY GENERAL

DICKINSON, PHILLIP, MD†

Provider ID: N/A
8554 LA MESA BLVD
LA MESA, CA 91942
Effective as of 01-JAN-14

DICKINSON, PHILLIP, MD†

Provider ID: N/A
8554 LA MESA BLVD
LA MESA, CA 91942
Effective as of 01-JAN-24

DICKINSON, PHILLIP, MD†

Provider ID: N/A
8554 LA MESA BLVD
LA MESA, CA 91942
Effective as of 01-JUL-22

KHARAZI, ALEXANDRA, MD

Provider ID: N/A
8851 CENTER DR STE 500
LA MESA, CA 91942
Effective as of 01-MAY-23

SURGERY HAND

RICKARDS, ENASS, MD†

Provider ID: N/A
8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-JAN-21

**SURGERY
NEUROLOGICAL**

KURESHI, SOHAIB, MD†

Provider ID: N/A
5565 GROSSMONT
CENTER DR STE 210
LA MESA, CA 91942
Effective as of 01-JAN-21

OSTRUP, RICHARD, MD†

Provider ID: N/A
5565 GROSSMONT
CENTER DR STE 210
LA MESA, CA 91942
Effective as of 01-JAN-21

OSTRUP, RICHARD, MD†

Provider ID: N/A
5565 GROSSMONT
CENTER DR STE 210
LA MESA, CA 91942
Effective as of 01-MAR-21

ZACHARIAH, MARCUS, MD

Provider ID: N/A
5565 GROSSMONT
CENTER DR BLDG 1 STE 210
LA MESA, CA 91942
Effective as of 01-MAY-23

SURGERY ORTHOPEDIC

HENDERSON, RODNEY, MD

Provider ID: N/A
8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-JAN-14

KIMBALL, MICHAEL, MD†

Provider ID: N/A
8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-OCT-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A
8851 CENTER DR STE 601

LA MESA, CA 91942
Effective as of 01-MAR-16

KIMBALL, MICHAEL, MD†

Provider ID: N/A
8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-JAN-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A
8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-JAN-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A
8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-JUL-23

RICKARDS, ENASS, MD†

Provider ID: N/A
8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-JAN-21

RICKARDS, ENASS, MD†

Provider ID: N/A
8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-JUL-23

RICKARDS, ENASS, MD†

Provider ID: N/A
8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-SEP-22

RICKARDS, ENASS, MD†

Provider ID: N/A
8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-APR-23

TAYYAB, NEIL, MD

Provider ID: N/A
8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-AUG-23

SURGERY THORACIC

KOUMJIAN, MICHAEL, MD†

Provider ID: N/A
5525 GROSSMONT
CENTER DR STE 609
LA MESA, CA 91942
Effective as of 01-FEB-07

KOUMJIAN, MICHAEL, MD†

Provider ID: N/A
5525 GROSSMONT
CENTER DR STE 609
LA MESA, CA 91942
Effective as of 01-JAN-21

UROLOGY

BUTLER, PHILIP, MD

Provider ID: N/A
8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

COHEN, EDWARD, MD

Provider ID: N/A
8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

DICKS, BRIAN, MD

Provider ID: N/A
8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

JAVIER DESLOGES, JUAN, MD†

Provider ID: N/A
8851 CENTER DR STE 501

LA MESA, CA 91942
Teleservice
Effective as of 01-JAN-23

JAVIER DESLOGES, JUAN, MD†

Provider ID: N/A
8851 CENTER DR STE 501
LA MESA, CA 91942
Teleservice
Effective as of 01-JUL-23

JAVIER DESLOGES, JUAN, MD†

Provider ID: N/A
8851 CENTER DR STE 501
LA MESA, CA 91942
Teleservice
Effective as of 01-DEC-22

JUMA, SAAD, MD

Provider ID: N/A
8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

KEARSE, WILFRED, MD†

Provider ID: N/A
8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-DEC-21

KEILLER, DANNY, MD

Provider ID: N/A
8850 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

NEUSTEIN, PAUL, MD

Provider ID: N/A
8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

NGUYEN, HUNG, MD

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

PE, MARK-RALLY, MD

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

ROBERTS, JAMES, MD

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

SALMASI, AMIRALI, MD†

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JUL-23

SALMASI, AMIRALI, MD†

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-21

VAPNEK, EVAN, MD

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

CARDIAC

ELECTROPHYSIOLOGY

MITIKU, TEFERI, MD†

Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-FEB-22

MITIKU, TEFERI, MD†

Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-FEB-22

CARDIOLOGY

NGUYEN, HUY, MD†

Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-DEC-17

NGUYEN, HUY, MD†

Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-DEC-17

NGUYEN, HUY, MD†

Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-JAN-21

WERTMAN, BRETT, MD

Provider ID: N/A

333 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-JAN-16

WERTMAN, BRETT, MD

Provider ID: N/A

333 CORPORATE DR STE

100
LADERA RANCH, CA 92694
Effective as of 01-DEC-15

**CARDIOVASCULAR
DISEASE**

NGUYEN, HUY, MD†

Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-JAN-20

WERTMAN, BRETT, MD

Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-JAN-20

WERTMAN, BRETT, MD

Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-JAN-21

**CERTIFIED NURSE
PRACTITIONER**

PASICOLAN, MARI, NP

Provider ID: N/A

25612 CROWN VALLEY
PKWY
LADERA RANCH, CA 92694
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

25612 CROWN VALLEY
PKWY
LADERA RANCH, CA 92694
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

25612 CROWN VALLEY
PKWY
LADERA RANCH, CA 92694
Effective as of 01-DEC-22

DERMATOLOGY

BINGHAM, LUCAS, MD

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-MAY-22

BINGHAM, LUCAS, MD

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-MAY-22

BINGHAM, LUCAS, MD

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-DEC-18

BINGHAM, LUCAS, MD

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-DEC-18

LANDER, JEFFREY, MD†

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-FEB-20

LANDER, JEFFREY, MD†

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-OCT-23

LANDER, JEFFREY, MD†

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-MAY-20

LANDER, JEFFREY, MD†

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-MAY-20

LANDER, JEFFREY, MD†

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-MAY-20

PETERSON, SAMUEL, MD†

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-DEC-21

PETERSON, SAMUEL, MD†

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-MAY-22

EMERGENCY MEDICINE

TIMBOE, JENNA, MD

Provider ID: N/A

777 CORPORATE DR
LADERA RANCH, CA 92694
Effective as of 01-OCT-23

WAINWRIGHT, MITCHELL, MD

Provider ID: N/A

800 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-SEP-18

NEUROLOGY

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-JUN-22

NEUROLOGY CHILD

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-OCT-19

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-OCT-19

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-DEC-20

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-DEC-20

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-JUL-21

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-JUL-21

**OTOLARYNGOLOGY /
OTOLOGY /
LARYNGOLOGY /
RHINOLOGY**

KAUFMAN, AVRUM, DO

Provider ID: N/A

800 CORPORATE DR STE
290
LADERA RANCH, CA 92694
Effective as of 01-JAN-18

PEDIATRICS

DWINELL, LAUREN, MD

Provider ID: N/A

777 CORPORATE DR STE
250
LADERA RANCH, CA 92694
Effective as of 01-JUL-23

PHYSICIANS ASSISTANT

RUMMEL, LAURA, PA†

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-DEC-22

RUMMEL, LAURA, PA†

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-DEC-22

PODIATRIST

RODRIGUEZ, NITZA, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694
Effective as of 01-NOV-19

RODRIGUEZ, NITZA, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694
Effective as of 01-NOV-19

RODRIGUEZ, NITZA, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694
Effective as of 01-SEP-19

SPENCER, ROBERT, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694
Effective as of 01-SEP-19

SPENCER, ROBERT, DPM†

Provider ID: N/A

333 CORPORATE DR STE

230
LADERA RANCH, CA 92694
Effective as of 01-SEP-19

SPENCER, ROBERT, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694
Effective as of 01-SEP-19

PSYCHIATRY

BORECKY, ADAM, MD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JAN-24

BORECKY, ADAM, MD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JAN-24

KINBACK, KEVIN, MD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JAN-19

KINBACK, KEVIN, MD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JAN-19

KINBACK, KEVIN, MD

Provider ID: N/A

333 CORPORATE DR STE
260

LADERA RANCH, CA 92694
Effective as of 01-JAN-19

KINBACK, KEVIN, MD

Provider ID: N/A
333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JAN-19

LAW, LINDSEY, MD

Provider ID: N/A
333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-DEC-20

LAW, LINDSEY, MD

Provider ID: N/A
333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-DEC-20

LAW, LINDSEY, MD

Provider ID: N/A
333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-DEC-20

LAW, LINDSEY, MD

Provider ID: N/A
333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-DEC-20

PSYCHOLOGIST

OKONSKI, MICHELE, PSYD

Provider ID: N/A
333 CORPORATE DR STE
260
LADERA RANCH, CA 92694

Effective as of 01-JUN-19

OKONSKI, MICHELE, PSYD

Provider ID: N/A
333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JUN-19

OKONSKI, MICHELE, PSYD

Provider ID: N/A
333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JUN-19

OKONSKI, MICHELE, PSYD

Provider ID: N/A
333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JUN-19

SURGERY GENERAL

QURESHI, ALI, MD

Provider ID: N/A
800 CORPORATE DR STE
280
LADERA RANCH, CA 92694
Effective as of 01-FEB-24

QURESHI, ALI, MD

Provider ID: N/A
800 CORPORATE DR STE
280
LADERA RANCH, CA 92694
Effective as of 01-FEB-24

SURGERY PLASTIC

DOEZIE, ALLEN, MD†

Provider ID: N/A
777 CORPORATE DR STE 110
LADERA RANCH, CA 92694

Effective as of 01-SEP-10

DOEZIE, ALLEN, MD†

Provider ID: N/A
777 CORPORATE DR STE 110
LADERA RANCH, CA 92694
Effective as of 01-SEP-10

**CERTIFIED NURSE
PRACTITIONER**

BINAVI, HOWNAZ, NP†

Provider ID: N/A
30201 GOLDEN LANTERN
STE B
LAGUNA BEACH, CA 92677
Effective as of 01-JUL-21

DERMATOLOGY

AWADALLA, FARAH, MD†

Provider ID: N/A
31852 COAST HWY STE 300
LAGUNA BEACH, CA 92651
Effective as of 01-MAR-23

AWADALLA, FARAH, MD†

Provider ID: N/A
31852 COAST HWY STE 300
LAGUNA BEACH, CA 92651
Effective as of 01-MAR-23

AWADALLA, FARAH, MD†

Provider ID: N/A
31852 COAST HWY STE 300
LAGUNA BEACH, CA 92651
Effective as of 01-MAR-23

FAMILY PRACTICE

SANGUEDOLCE, JOHN, MD†

Provider ID: N/A
333 THALIA ST
LAGUNA BEACH, CA 92651
Effective as of 01-FEB-21

**HEMATOLOGY /
ONCOLOGY**

VU, COLLIN, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 320
LAGUNA BEACH, CA 92653
Effective as of 01-JAN-18

INFECTIOUS DISEASE

HAMIDI ASL, KAMRAN, MD

Provider ID: N/A

☒ 31852 COAST HWY STE 302
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

OPHTHALMOLOGY

HENRICK, ANDREW, MD

Provider ID: N/A

☒ 31852 COAST HWY
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-23

HENRICK, ANDREW, MD

Provider ID: N/A

☒ 31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-23

PRENDIVILLE, PAUL, MD

Provider ID: N/A

☒ 31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-23

PRENDIVILLE, PAUL, MD

Provider ID: N/A

☒ 31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-23

SPANGGORD, HOLLY, MD†

Provider ID: N/A

☒ 31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-23

SPANGGORD, HOLLY, MD†

Provider ID: N/A

☒ 31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-19

**PEDIATRIC CRITICAL
CARE MEDICINE**

REDA, ZACHARIA, MD†

Provider ID: N/A

☒ 31862 COAST HWY STE 302
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-23

**PEDIATRIC
PULMONOLOGY**

REDA, ZACHARIA, MD†

Provider ID: N/A

☒ 31862 COAST HWY STE 203
LAGUNA BEACH, CA 92651
Effective as of 01-JUN-22

REDA, ZACHARIA, MD†

Provider ID: N/A

☒ 31862 COAST HWY STE 203
LAGUNA BEACH, CA 92651
Effective as of 01-JUN-22

REDA, ZACHARIA, MD†

Provider ID: N/A

☒ 31862 COAST HWY STE 203
LAGUNA BEACH, CA 92651
Effective as of 01-JUN-22

PODIATRIST

YETTER, MARCUS, DPM†

Provider ID: N/A

☒ 31852 COAST HWY STE 105
LAGUNA BEACH, CA 92651
Effective as of 01-JUL-19

YETTER, MARCUS, DPM†

Provider ID: N/A

☒ 31852 COAST HWY STE 105
LAGUNA BEACH, CA 92651
Effective as of 01-MAR-20

YETTER, MARCUS, DPM†

Provider ID: N/A

☒ 31852 COAST HWY STE 105
LAGUNA BEACH, CA 92651
Effective as of 01-MAR-20

PULMONARY DISEASES

SHAHINIAN, GEORGE, MD†

Provider ID: N/A

☒ 31852 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-JUL-23

SHAHINIAN, GEORGE, MD†

Provider ID: N/A

☒ 31852 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-15

SHAHINIAN, GEORGE, MD†

Provider ID: N/A

☒ 31852 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-NOV-23

SURGERY GENERAL

CHANG, STEVEN, MD

Provider ID: N/A

☒ 31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

CHANG, STEVEN, MD

Provider ID: N/A

31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-DEC-11

CHANG, STEVEN, MD

Provider ID: N/A

31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-APR-12

CHANG, STEVEN, MD

Provider ID: N/A

31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-SEP-13

COCCIA, MICHAEL, MD

Provider ID: N/A

31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-NOV-14

COCCIA, MICHAEL, MD

Provider ID: N/A

31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-APR-12

COCCIA, MICHAEL, MD

Provider ID: N/A

31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

SURGERY ORTHOPEDIC

ABDOLLAHI, KARIM, MD

Provider ID: N/A

31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

ABDOLLAHI, KARIM, MD

Provider ID: N/A

31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-NOV-14

ABDOLLAHI, KARIM, MD

Provider ID: N/A

31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-SEP-10

ASHKENAZE, DAVID, MD†

Provider ID: N/A

31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

ASHKENAZE, DAVID, MD†

Provider ID: N/A

31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-13

ASHKENAZE, DAVID, MD†

Provider ID: N/A

31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-13

GILLMAN, MICHAEL, MD

Provider ID: N/A

31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

GILLMAN, MICHAEL, MD

Provider ID: N/A

31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-APR-16

GILLMAN, MICHAEL, MD

Provider ID: N/A

31862 COAST HWY STE 400

LAGUNA BEACH, CA 92651
Effective as of 01-NOV-14

GILLMAN, MICHAEL, MD

Provider ID: N/A

31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-SEP-10

ALLERGY IMMUNOLOGY

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-21

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-17

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-22

ANESTHESIOLOGY

ALIKHANI, SHAHRIAR, MD†

Provider ID: N/A

23025 MILL CREEK DR
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-20

BARNHILL, JOSHUA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 204
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-24

BARNHILL, JOSHUA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 204
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-24

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE

VALENCIA STE 5A
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-22

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-22

HO, ALAN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 7A
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-14

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

**ANESTHESIOLOGY PAIN
MANAGEMENT**

ALSHARIF, KAIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-18

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE

VALENCIA STE 5A
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-15

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-24

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653

Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653

Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653

Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 7A
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-19

HO, ALAN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 7A
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-17

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653

Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653

Effective as of 01-APR-22

KUO, DENNIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-19

KUO, DENNIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-21

KUO, DENNIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-21

KUO, DENNIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-21

MESSIHA, ANDREW, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 204
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

☑ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

☑ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

☑ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-22

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

☑ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-16

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

☑ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-16

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

☑ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-16

POURADIB, AMIR, MD†

Provider ID: N/A

☑ 24012 CALLE DE LA PLATA
STE 120

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

POURADIB, AMIR, MD†

Provider ID: N/A

☑ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-18

POURADIB, AMIR, MD†

Provider ID: N/A

☑ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

☑ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

☑ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-16

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

☑ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-22

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

☑ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-20

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

☑ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

☑ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

AUDIOLOGIST

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

☑ 24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

☑ 24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

PANEK, KRISTI, AuD

Provider ID: N/A

☑ 24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

PANEK, KRISTI, AuD

Provider ID: N/A

☑ 24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CARDIAC

ELECTROPHYSIOLOGY

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

GUJRAL, INDERPAL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 30A
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

GUJRAL, INDERPAL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 30A
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

CARDIOLOGY

ALLAM, SHAMILI, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

ALLAM, SHAMILI, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

ALLAM, SHAMILI, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

FEINER, JEFFREY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

FRUMIN, HOWARD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

GAULT, MICHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

GIM, RONALD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

GUJRAL, INDERPAL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 30A
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-11

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

LAMONT, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

LYLE, DOUGLAS, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

MASTERS, ROBERT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

PARISE, CHARLES, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

PARISE, CHARLES, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

PARISE, CHARLES, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

PARISE, CHARLES, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

PARISE, CHARLES, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

PATEL, MILAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

PATEL, MILAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500

LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

PATEL, MILAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-20

PATEL, MILAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-20

TURIY, YULIYA, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-21

TURIY, YULIYA, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-21

TURIY, YULIYA, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-21

VAN, HO HAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-20

VAN, HO HAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

VAN, HO HAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

VAN, HO HAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

VAN, HO HAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

WALTERS, DANIEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

**CARDIOVASCULAR
DISEASE**

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice

Effective as of 01-SEP-23

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JAN-24

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-AUG-23

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-AUG-23

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-SEP-23

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-SEP-23

BAHADORANI, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-19

FEINER, JEFFREY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-12

GIM, RONALD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-12

GUJRAL, INDERPAL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 30A
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-17

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-17

LAMONT, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-12

LE, DAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-21

LE, DAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-21

LE, DAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500

LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

LE, DAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

LYLE, DOUGLAS, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-12

PARISE, CHARLES, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-APR-20

PATEL, MILAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-APR-19

PATEL, MILAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-19

PATEL, MILAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-19

ROSANIO, SALVATORE, MD

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-AUG-23

ROSANIO, SALVATORE, MD

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-AUG-23

ROSANIO, SALVATORE, MD

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-SEP-23

ROSANIO, SALVATORE, MD

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-SEP-23

ROSANIO, SALVATORE, MD

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-SEP-23

RUGGIO, JOSEPH, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500

LAGUNA HILLS, CA 92653

Effective as of 01-JUL-21

RUGGIO, JOSEPH, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-21

RUGGIO, JOSEPH, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-21

RUGGIO, JOSEPH, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

VAN, HO HAI, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

VAN, HO HAI, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-22

VAN, HO HAI, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-APR-20

VAN, HO HAI, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

ZAREMBA, MARK, MD†

Provider ID: N/A

☐ 25401 CABOT RD STE 107
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-13

ZAREMBA, MARK, MD†

Provider ID: N/A

☐ 25401 CABOT RD STE 107
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-14

ZAREMBA, MARK, MD†

Provider ID: N/A

☐ 25401 CABOT RD STE 107
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-14

**CERTIFIED
ACUPUNCTURIST**

OMIDI, SHOHREH, LAC

Provider ID: N/A

☐ 24422 AVENIDA DE LA
CARLOTA STE 105
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-23

OMIDI, SHOHREH, LAC

Provider ID: N/A

☐ 24422 AVENIDA DE LA
CARLOTA STE 105
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-23

OMIDI, SHOHREH, LAC

Provider ID: N/A

24422 AVENIDA DE LA CARLOTA STE 105
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

SHE, WU, LAC†

Provider ID: N/A

24953 PASEO DE VALENCIA STE 7C
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

**CERTIFIED NURSE
PRACTITIONER**

CARASQUERO, ANDREA, NP

Provider ID: N/A

23121 PLAZA POINTE DR
STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

CHANG KIMES, AUDREY, NP†

Provider ID: N/A

24422 AVENIDA DE LA CARLOTA STE 130
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CHANG KIMES, AUDREY, NP†

Provider ID: N/A

24422 AVENIDA DE LA CARLOTA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CHANG KIMES, AUDREY, NP†

Provider ID: N/A

24422 AVENIDA DE LA CARLOTA STE 130
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

NGUYEN, MARICEL, NP

Provider ID: N/A

23181 VERDUGO DR STE 103A
LAGUNA HILLS, CA 92653*
Effective as of 01-APR-23

NGUYEN, MARICEL, NP

Provider ID: N/A

23181 VERDUGO DR STE 103A
LAGUNA HILLS, CA 92653*
Effective as of 01-APR-23

PARK, NURI, NP

Provider ID: N/A

23181 VERDUGO DR STE 103A
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-15

PARK, SE, NP

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

**CERTIFIED REGISTERED
NURSE MIDWIFE**

GABEL, CHRISTINA, CRNM

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-24

MOLINSKI, ALLISON, CRNM

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-24

MOLINSKI, ALLISON, CRNM

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-24

SAJADI, ALISA, CRNM

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

CHIROPRACTOR

COSTALES, STEPHEN, DC

Provider ID: N/A

24741 ALICIA PKWY STE D

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

COSTALES, STEPHEN, DC

Provider ID: N/A

24741 ALICIA PKWY STE D
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LANIER, TIMOTHY, DC†

Provider ID: N/A

23412 MOULTON PKWY
STE 100
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

MCHONE, PATRICIA, DC†

Provider ID: N/A

24741 ALICIA PKWY STE D
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

MCHONE, PATRICIA, DC†

Provider ID: N/A

24741 ALICIA PKWY STE D
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

DERMATOLOGY

LANDER, JEFFREY, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LANDER, JEFFREY, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-19

LANDER, JEFFREY, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

LANDER, JEFFREY, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-16

LANDER, JEFFREY, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

LEE, KATHERINE, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

LEE, KATHERINE, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-14

LEE, KATHERINE, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-14

LEE, KATHERINE, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

LEE, KATHERINE, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LEE, KATHERINE, MD

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

EMERGENCY MEDICINE

BLAND, HOWARD, MD

Provider ID: N/A

23595 MOULTON PKWY
STE E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

GEE, KELLY, DO†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 311
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-22

ENDOCRINOLOGY

METABOLISM DIABETES

BANDUKWALA, RAHIL, DO†

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

BANDUKWALA, RAHIL, DO†

Provider ID: N/A

<p>☐ 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-23</p> <p>BANDUKWALA, RAHIL, DO† Provider ID: N/A</p> <p>☐ 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-JUL-16</p> <p>BANDUKWALA, RAHIL, DO† Provider ID: N/A</p> <p>☐ 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-22</p> <p>BANDUKWALA, RAHIL, DO† Provider ID: N/A</p> <p>☐ 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-23</p> <p>CHAN, JESSICA, MD† Provider ID: N/A</p> <p>☐ 24321 AVENIDA DE LA CARLOTA LAGUNA HILLS, CA 92653 Effective as of 01-NOV-22</p> <p>CHAN, JESSICA, MD† Provider ID: N/A</p> <p>☐ 24321 AVENIDA DE LA CARLOTA LAGUNA HILLS, CA 92653 Effective as of 01-APR-23</p> <p>CHANG, KU JUEY, MD Provider ID: N/A</p> <p>☐ 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653</p>	<p>Effective as of 01-NOV-16</p> <p>CHANG, KU JUEY, MD Provider ID: N/A</p> <p>☐ 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-JUN-19</p> <p>CHANG, KU JUEY, MD Provider ID: N/A</p> <p>☐ 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-AUG-21</p> <p>CHANG, KU JUEY, MD Provider ID: N/A</p> <p>☐ 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-OCT-23</p> <p>FARJOUDI, FARHAD, MD† Provider ID: N/A</p> <p>☐ 23521 PASEO DE VALENCIA STE 108 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-MAY-22</p> <p>FARJOUDI, FARHAD, MD† Provider ID: N/A</p> <p>☐ 23521 PASEO DE VALENCIA STE 108 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-MAY-22</p> <p>FARJOUDI, FARHAD, MD† Provider ID: N/A</p> <p>☐ 23521 PASEO DE VALENCIA STE 108 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-MAY-22</p> <p>FARJOUDI, FARHAD, MD†</p>	<p>Provider ID: N/A</p> <p>☐ 23521 PASEO DE VALENCIA STE 106 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-JUN-22</p> <p>FARJOUDI, FARHAD, MD† Provider ID: N/A</p> <p>☐ 23521 PASEO DE VALENCIA STE 106 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-JUN-22</p> <p>KRISHNAN, PRIYANKA, MD Provider ID: N/A</p> <p>☐ 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653</p> <p>Teleservice Effective as of 01-APR-18</p> <p>KRISHNAN, PRIYANKA, MD Provider ID: N/A</p> <p>☐ 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653</p> <p>Teleservice Effective as of 01-FEB-16</p> <p>KRISHNAN, PRIYANKA, MD Provider ID: N/A</p> <p>☐ 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653</p> <p>Teleservice Effective as of 01-JUL-16</p> <p>KRISHNAN, PRIYANKA, MD Provider ID: N/A</p> <p>☐ 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653</p> <p>Teleservice Effective as of 01-OCT-22</p>
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KRISHNAN, PRIYANKA, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-OCT-23

KRISHNAN, PRIYANKA, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JUN-19

KRISHNAN, PRIYANKA, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-AUG-21

MARKMAN, LISA, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

MARKMAN, LISA, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

MARKMAN, LISA, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-23

MEHTA, SHILPA, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-OCT-22

MEHTA, SHILPA, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JAN-23

MEHTA, SHILPA, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-NOV-19

MEHTA, SHILPA, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-NOV-19

MEHTA, SHILPA, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-NOV-19

MEHTA, SHILPA, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-NOV-19

MEHTA, SHILPA, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JUN-19

MEHTA, SHILPA, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Teleservice
Effective as of 01-OCT-23

MEHTA, SHILPA, MD†

Provider ID: N/A
23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653

Teleservice
Effective as of 01-JUN-19

POURBABAK, SAM, MD

Provider ID: N/A
23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653

Teleservice
Effective as of 01-OCT-23

TRAN, NEIL, MD

Provider ID: N/A
24321 AVENIDA DE LA CARLOTA
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

ENDOCRINOLOGY

REPRODUCTIVE

FREDERICK, JANE, MD†

Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 541
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-13

FREDERICK, JANE, MD†

Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 541
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-13

FREDERICK, JANE, MD†

Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 503
LAGUNA HILLS, CA 92653*
Effective as of 01-JUN-19

FAMILY PRACTICE

LEISH, BRIAN, MD

Provider ID: N/A
24411 HEALTH CENTER DR STE 460
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

RIZNIS, TENGIS, MD†

Provider ID: N/A
24451 HEALTH CENTER DR STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

FAMILY PRACTICE

GERIATRIC MEDICINE

PATEL, NEHAL, MD†

Provider ID: N/A
23141 VERDUGO DR STE 201
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

PATEL, NEHAL, MD†

Provider ID: N/A
23141 VERDUGO DR STE 201
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

FEMALE PELVIC MED AND RECONSTRUCTIVE SURG

MWESIGWA, PATRICIA, MD†

Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500

LAGUNA HILLS, CA 92653
Effective as of 01-MAR-22

SHOURESHI, POONE, MD

Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

SHOURESHI, POONE, MD

Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

GASTROENTEROLOGY

JALALI, FARID, MD†

Provider ID: N/A
24221 CALLE DE LA LOUISA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-19

JALALI, FARID, MD†

Provider ID: N/A
24221 CALLE DE LA LOUISA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-19

JALALI, FARID, MD†

Provider ID: N/A
24221 CALLE DE LA LOUISA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-19

NGO, CATHERINE, MD

Provider ID: N/A
26671 ALISO CREEK RD STE 301
LAGUNA HILLS, CA 92656

Effective as of 01-DEC-22

NGO, CATHERINE, MD

Provider ID: N/A

26671 ALISO CREEK RD STE 301
LAGUNA HILLS, CA 92656

Effective as of 01-DEC-22

SHAH, KETAN, MD

Provider ID: N/A

24221 CALLE DE LA LOUISA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-16

SHAH, KETAN, MD

Provider ID: N/A

24221 CALLE DE LA LOUISA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-16

SHAH, KETAN, MD

Provider ID: N/A

24221 CALLE DE LA LOUISA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-16

SHAH, KETAN, MD

Provider ID: N/A

24221 CALLE DE LA LOUISA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

SY, THEODORE, MD†

Provider ID: N/A

26538 MOULTON PKWY STE 38E
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-21

SY, THEODORE, MD†

Provider ID: N/A

26538 MOULTON PKWY STE 38E
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-21

SY, THEODORE, MD†

Provider ID: N/A

26538 MOULTON PKWY STE 38E
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-21

SY, THEODORE, MD†

Provider ID: N/A

26538 MOULTON PKWY STE 38E
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-18

SY, THEODORE, MD†

Provider ID: N/A

26538 MOULTON PKWY STE 38E
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-18

GENERAL PRACTICE

SHAW, BRIAN, DO†

Provider ID: N/A

23265 S POINTE DR STE 100
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-15

**HEMATOLOGY /
ONCOLOGY**

CHENG, HOWARD, MD†

Provider ID: N/A

24953 PASEO DE VALENCIA STE 25B
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-14

CHENG, HOWARD, MD†

Provider ID: N/A

24953 PASEO DE VALENCIA STE 25B
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-08

CHENG, HOWARD, MD†

Provider ID: N/A

24953 PASEO DE VALENCIA STE 25B
LAGUNA HILLS, CA 92653

Effective as of 01-APR-11

HASSAN, SARAH, MD

Provider ID: N/A

24411 HEALTH CENTER DR STE 320
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-21

**MALEKIRAD, JACQUELINE,
MD†**

Provider ID: N/A

24411 HEALTH CENTER DR STE 320
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-22

**MALEKIRAD, JACQUELINE,
MD†**

Provider ID: N/A

24411 HEALTH CENTER DR STE 320
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-22

**MALEKIRAD, JACQUELINE,
MD†**

Provider ID: N/A

24411 HEALTH CENTER DR STE 320
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-22

MULTANI, GURPREET, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 420
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 420
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 420
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 420
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 501
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

RAO, AMOL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

SALIMI-TARI, PEYMAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 501
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

SU, DERRICK, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 501
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

VU, COLLIN, MD†

Provider ID: N/A

25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

VU, COLLIN, MD†

Provider ID: N/A

25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

VU, COLLIN, MD†

Provider ID: N/A

25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

VU, COLLIN, MD†

Provider ID: N/A

25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-22

VU, COLLIN, MD†

Provider ID: N/A

25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-22

VU, COLLIN, MD†

Provider ID: N/A

25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-22

HOSPITALIST MD/DO

ABCEDE, GAIL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 7C
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-SEP-22

INFECTIOUS DISEASE

KOPACZ, JOANNA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

KOPACZ, JOANNA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KOPACZ, JOANNA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

KOPACZ, JOANNA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

KOPACZ, JOANNA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KOPACZ, JOANNA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KOPACZ, JOANNA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KOPACZ, JOANNA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

WHITE, ALAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 460
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

INTERNAL MEDICINE

BAE, CHAY, DO†

Provider ID: N/A

26538 MOULTON PKWY

STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

BAE, CHAY, DO†

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

BAE, CHAY, DO†

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

BAE, CHAY, DO†

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

BAE, CHAY, DO†

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-24

LO, ALAN, MD

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653*
Effective as of 01-JAN-18

NGUYEN, AN, DO†

Provider ID: N/A

23181 VERDUGO DR STE
103A
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

POURBABAK, SAM, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JAN-23

SOONG, YEN-HUI, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

SOONG, YEN-HUI, MD†

Provider ID: N/A

23141 MOULTON PKWY STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-22

**INTERNAL MEDICINE
CRITICAL CARE MEDICINE**

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

VOVAN, THOMAS, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

**INTERVENTIONAL
CARDIOLOGY**

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-APR-20

KARROWNI, WASSEF, MD

Provider ID: N/A

24022 CALLE DE LA PLATA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-23

WALTERS, DANIEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR

STE 550

LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

WALTERS, DANIEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

WALTERS, DANIEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

WALTERS, DANIEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

**LICENSED CLINICAL
SOCIAL WORKER**

DOWNS, SAIGE, LCSW

Provider ID: N/A

23461 S POINTE DR STE 240
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-22

DOWNS, SAIGE, LCSW

Provider ID: N/A

23461 S POINTE DR STE 240
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-22

MACIEL, MARLA, LCSW

Provider ID: N/A

23121 PLAZA POINTE DR STE 107
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-24

ZARGARBASHI, STEFANIE, LCSW†

Provider ID: N/A

24321 AVENIDA DE LA CARLOTA
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

**MARRIAGE FAMILY
THERAPIST**

MOORE, CANDACE, MFT

Provider ID: N/A

23461 S POINTE DR
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-22

MOORE, CANDACE, MFT

Provider ID: N/A

23461 S POINTE DR
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-22

**MATERNAL AND FETAL
MEDICINE**

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 260
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-11

BUSH, MELISSA, MD†

Provider ID: N/A

<p>☐ 24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-AUG-20</p> <p>BUSH, MELISSA, MD† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 260 LAGUNA HILLS, CA 92653 Effective as of 01-FEB-23</p> <p>BUSH, MELISSA, MD† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-20</p> <p>BUSH, MELISSA, MD† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 260 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-23</p> <p>BUSH, MELISSA, MD† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 260 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-23</p> <p>BUSH, MELISSA, MD† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-JUL-04</p> <p>BUSH, MELISSA, MD† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653</p>	<p>Effective as of 01-NOV-11</p> <p>BUSH, MELISSA, MD† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-22</p> <p>BUSH, MELISSA, MD† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-SEP-16</p> <p>BUSH, MELISSA, MD† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 260 LAGUNA HILLS, CA 92653 Effective as of 01-SEP-19</p> <p>BUSH, MELISSA, MD† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-23</p> <p>BUSH, MELISSA, MD† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-23</p> <p>BUSH, MELISSA, MD† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-SEP-16</p> <p>CHAU, CINDY, MD†</p>	<p>Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-SEP-19</p> <p>CHAU, CINDY, MD† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-JUN-19</p> <p>CHAU, CINDY, MD† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-23</p> <p>CHAU, CINDY, MD† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-23</p> <p>CHAU, CINDY, MD† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-23</p> <p>CHAU, CINDY, MD† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-FEB-23</p> <p>DAY, ROBERT, MD† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-MAY-22</p> <p>KFIR, MENASHE, MD† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 300</p>
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LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

KFIR, MENASHE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KFIR, MENASHE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KFIR, MENASHE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

MASAKI, DAMON, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-DEC-19

MASAKI, DAMON, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-MAY-19

MILLS, MARLIN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 540

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

MILLS, MARLIN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 540

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

MILLS, MARLIN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 540

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

MILLS, MARLIN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 540

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

SHRIVASTAVA, VINEET, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

SHRIVASTAVA, VINEET, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

**NEONATAL / PERINATAL
MEDICINE**

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

MASAKI, DAMON, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-JUL-19

NEPHROLOGY

HAFTBARADARAN

MOHAMMADI, AFSANEH, MD

Provider ID: N/A

25411 CABOT RD STE 105
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

HAFTBARADARAN

MOHAMMADI, AFSANEH, MD

Provider ID: N/A

25411 CABOT RD STE 105
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

JAMES, JOJI, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102

LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

MANSOURY, HADI, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

NEUROLOGY

BANDARI, DANIEL, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 210

LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

LOC, KIET, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LOC, KIET, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

LOC, KIET, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

MAASUMI, KASRA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

MAASUMI, KASRA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

MAASUMI, KASRA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

MAASUMI, KASRA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

MAASUMI, KASRA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

MAASUMI, KASRA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

RAPOPORT, ZHANNA, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 8A
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

RAPOPORT, ZHANNA, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 8A
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

RAPOPORT, ZHANNA, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 8A
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

RAPOPORT, ZHANNA, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 8A
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-19

RAPOPORT, ZHANNA, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 8A
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

SHEN, MICHAEL, MD

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-16

SHEN, MICHAEL, MD

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-16

SHEN, MICHAEL, MD

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-16

SHEN, MICHAEL, MD

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

**OBSTETRICS /
GYNECOLOGY**

AL-AZAWI, HIND, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-23

AL-AZAWI, HIND, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-23

CHUNG, LINDA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-APR-20

CHUNG, LINDA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

COUGH, HEIDI, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

COUGH, HEIDI, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-20

COUGH, HEIDI, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

DAVIS, STEPHANIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

DAVIS, STEPHANIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

DAY, ROBERT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

DEJBAKHS, SHEILA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-19

EDMUNDSON, MORIAH, DO†

Provider ID: N/A

24321 AVENIDA DE LA
CARLOTA
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-22

FREDERICK, JANE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 503
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

FREDERICK, JANE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 503

LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

JOHNSON, SUSAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

KONG, GRACE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-20

KONG, GRACE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

KONG, GRACE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

KRYCHMAN, MICHAEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-24

KRYCHMAN, MICHAEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-24

KRYCHMAN, MICHAEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

KRYCHMAN, MICHAEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

KRYCHMAN, MICHAEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

LAM, KIM, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LAM, KIM, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

LEE, KATHERINE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

LEE, KATHERINE, MD

Provider ID: N/A

24411 HEALTH CENTER DR

STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

LO, PATRICIA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

LOPEZ, RACHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

LOPEZ, RACHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

LOPEZ, RACHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

LOPEZ, RACHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

LOPEZ, RACHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

MASAKI, DAMON, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
LAGUNA HILLS, CA 92653
Effective as of 01-APR-19

MASAKI, DAMON, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
LAGUNA HILLS, CA 92653
Effective as of 01-APR-19

MASAKI, DAMON, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-22

MASAKI, DAMON, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-22

MENDELSON, SUSAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

MENDELSON, SUSAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

MENDELSON, SUSAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

MILLER, JAMIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

O TOOLE, MARY, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

O TOOLE, MARY, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

PATEL, MITA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-JUL-19

PETERS, AMY, DO†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

PETERS, AMY, DO

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

PRIESTLEY, ANGELIKA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

STERNFELD, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

STERNFELD, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

STERNFELD, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

STERNFELD, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-MAY-20

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR

STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-19

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

VICENS-VILLAFANA, JOSE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

VICENS-VILLAFANA, JOSE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

WINTER, MARC, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

YU, MIAO, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

YU, MIAO, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

YU, MIAO, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-20

ONCOLOGY MEDICAL

VU, COLLIN, MD†

Provider ID: N/A

25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

OPHTHALMOLOGY

AHMAD, ASHRAF, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

AHMAD, ASHRAF, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

AHMAD, ASHRAF, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

AHMAD, ASHRAF, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

BANUELOS, LYDIA, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-22

BANUELOS, LYDIA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 309
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

BROOKMAN, MYLES, MD

Provider ID: N/A

23521 PASEO DE VALENCIA

STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

BROOKMAN, MYLES, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

CHEN, SANFORD, MD†

Provider ID: N/A

23521 PASEO VALENCIA
309
LAGUNA HILLS, CA 92653
Effective as of 01-APR-13

CHOI, DAVID, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

CHOI, DAVID, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

CHOI, DAVID, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

DHOOT, SONIA, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-19

DHOOT, SONIA, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-19

DHOOT, SONIA, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

DHOOT, SONIA, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-18

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-18

GUJRAL, SATVINDER, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

GUJRAL, SATVINDER, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

GUJRAL, SATVINDER, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

GUJRAL, SATVINDER, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-20

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-20

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-20

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-20

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-22

GUPTA, MRINALI, MD†

Provider ID: N/A

<p>☐ 23521 PASEO DE VALENCIA STE 207 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-22</p> <p>GUPTA, MRINALI, MD† Provider ID: N/A</p> <p>☐ 23521 PASEO DE VALENCIA STE 207 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-20</p> <p>GUPTA, MRINALI, MD† Provider ID: N/A</p> <p>☐ 23521 PASEO DE VALENCIA STE 207 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-20</p> <p>GWYNN, DAVID, MD Provider ID: N/A</p> <p>☐ 23521 PASEO DE VALENCIA STE 305 LAGUNA HILLS, CA 92653 Effective as of 01-MAR-23</p> <p>HENRICK, ANDREW, MD Provider ID: N/A</p> <p>☐ 24022 CALLE DE LA PLATA STE 305 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-23</p> <p>HENRICK, ANDREW, MD Provider ID: N/A</p> <p>☐ 24022 CALLE DE LA PLATA STE 305 LAGUNA HILLS, CA 92653 Effective as of 01-FEB-14</p> <p>HENRICK, ANDREW, MD Provider ID: N/A</p> <p>☐ 24022 CALLE DE LA PLATA STE 305 LAGUNA HILLS, CA 92653</p>	<p>Effective as of 01-FEB-14</p> <p>HENRICK, ANDREW, MD Provider ID: N/A</p> <p>☐ 24022 CALLE DE LA PLATA STE 305 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-JAN-18</p> <p>HENRICK, ANDREW, MD Provider ID: N/A</p> <p>☐ 24022 CALLE DE LA PLATA STE 305 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-JAN-23</p> <p>HOVANESIAN, JOHN, MD Provider ID: N/A</p> <p>☐ 23961 CALLE DE LA MAGDALENA STE 300 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-JAN-23</p> <p>HOVANESIAN, JOHN, MD Provider ID: N/A</p> <p>☐ 23961 CALLE DE LA MAGDALENA STE 300 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-OCT-23</p> <p>HOVANESIAN, JOHN, MD Provider ID: N/A</p> <p>☐ 23961 CALLE DE LA MAGDALENA STE 300 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-APR-23</p> <p>HOVANESIAN, JOHN, MD Provider ID: N/A</p> <p>☐ 23961 CALLE DE LA MAGDALENA STE 300 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-APR-23</p> <p>HWANG, JOHN, MD†</p>	<p>Provider ID: N/A</p> <p>☐ 23521 PASEO DE VALENCIA STE 207 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-OCT-23</p> <p>HWANG, JOHN, MD† Provider ID: N/A</p> <p>☐ 23521 PASEO DE VALENCIA STE 207 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-OCT-20</p> <p>HWANG, JOHN, MD† Provider ID: N/A</p> <p>☐ 23521 PASEO DE VALENCIA STE 207 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-SEP-16</p> <p>HWANG, JOHN, MD† Provider ID: N/A</p> <p>☐ 23521 PASEO DE VALENCIA STE 207 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-JAN-18</p> <p>HWANG, JOHN, MD† Provider ID: N/A</p> <p>☐ 23521 PASEO DE VALENCIA STE 207 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-JUL-18</p> <p>JACOBS, JEFFREY, MD† Provider ID: N/A</p> <p>☐ 23961 CALLE DE LA MAGDALENA STE 300 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-AUG-22</p> <p>JACOBS, JEFFREY, MD† Provider ID: N/A</p> <p>☐ 23961 CALLE DE LA MAGDALENA STE 300</p>
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LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

JOSON, PETER, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 309
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-17

JOSON, PETER, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 309
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-22

JOSON, PETER, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 306
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

KELLER, CHARLES, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

KELLER, CHARLES, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

KERSTEN, DIANA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

KERSTEN, DIANA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

KERSTEN, DIANA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

KERSTEN, DIANA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

KHAN, SAMIRA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

KIM, JANET, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA

STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KIM, JANET, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KIM, JANET, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KIM, ESTHER, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 745
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-22

KIM, EDWARD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-22

KIM, EDWARD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

KIM, BRIAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

KIM, ESTHER, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 745
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

KIM, BRIAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

KIM, JANET, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

KIM, JANET, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

KIM, JANET, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

KIM, BRIAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

KIM, BRIAN, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-14

KIM, BRIAN, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

KNIGHT, DARREN, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

LOGAN, DWAYNE, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-SEP-22

LOGAN, DWAYNE, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-SEP-22

LOGAN, DWAYNE, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-SEP-22

LOGAN, DWAYNE, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-SEP-22

LOGAN, DWAYNE, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-MAR-18

LOGAN, DWAYNE, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JUN-21

LOGAN, DWAYNE, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JUN-21

LOGAN, DWAYNE, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JAN-18

LOGAN, DWAYNE, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-13

LOGAN, DWAYNE, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-13

MCGUIRE, DESMOND, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

NOGUCHI, JONATHAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

PATEL, ALPA, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

PATEL, ALPA, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-22

PERRY, ANGELA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

PERRY, ANGELA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-23

PERRY, ANGELA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

PRENDIVILLE, PAUL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-14

PRENDIVILLE, PAUL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-14

PRENDIVILLE, PAUL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

PRENDIVILLE, PAUL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

PRENDIVILLE, PAUL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

RATHOD, RAJIV, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

RATHOD, RAJIV, MD†

Provider ID: N/A

23521 PASEO VALENCIA
309
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-15

RATHOD, RAJIV, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

RATHOD, RAJIV, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

RATHOD, RAJIV, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

RATHOD, RAJIV, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

RATHOD, RAJIV, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

RATHOD, RAJIV, MD†

Provider ID: N/A

<p>24022 CALLE DE LA PLATA STE 475 LAGUNA HILLS, CA 92653 Effective as of 01-APR-22</p> <p>ROUHANI, BEHNAZ, MD Provider ID: N/A</p> <p>23961 CALLE DE LA MAGDALENA STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-APR-23</p> <p>ROUHANI, BEHNAZ, MD Provider ID: N/A</p> <p>24401 CALLE DE LA LOUISA STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-SEP-19</p> <p>ROUHANI, BEHNAZ, MD Provider ID: N/A</p> <p>24401 CALLE DE LA LOUISA STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-SEP-19</p> <p>ROUHANI, BEHNAZ, MD Provider ID: N/A</p> <p>23961 CALLE DE LA MAGDALENA STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-23</p> <p>ROUHANI, BEHNAZ, MD Provider ID: N/A</p> <p>23961 CALLE DE LA MAGDALENA STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-SEP-22</p> <p>SALEHI-HAD, HANI, MD† Provider ID: N/A</p> <p>23521 PASEO DE VALENCIA STE 309 LAGUNA HILLS, CA 92653</p>	<p>Effective as of 01-JUN-21</p> <p>SALEHI-HAD, HANI, MD† Provider ID: N/A</p> <p>23521 PASEO DE VALENCIA STE 309 LAGUNA HILLS, CA 92653 Effective as of 01-JUN-21</p> <p>SALEHI-HAD, HANI, MD† Provider ID: N/A</p> <p>23521 PASEO DE VALENCIA STE 309 LAGUNA HILLS, CA 92653 Effective as of 01-JUN-21</p> <p>SALIB, GEORGE, MD† Provider ID: N/A</p> <p>24422 AVENIDA DE LA CARLOTA STE 110 LAGUNA HILLS, CA 92653 Effective as of 01-JUN-21</p> <p>SALIB, GEORGE, MD† Provider ID: N/A</p> <p>24422 AVENIDA DE LA CARLOTA STE 110 LAGUNA HILLS, CA 92653 Effective as of 01-MAR-20</p> <p>SALIB, GEORGE, MD† Provider ID: N/A</p> <p>24422 AVENIDA DE LA CARLOTA STE 110 LAGUNA HILLS, CA 92653 Effective as of 01-SEP-18</p> <p>SPANGGORD, HOLLY, MD† Provider ID: N/A</p> <p>24022 CALLE DE LA PLATA STE 305 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-18</p> <p>SPANGGORD, HOLLY, MD†</p>	<p>Provider ID: N/A</p> <p>24022 CALLE DE LA PLATA STE 305 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-19</p> <p>SPANGGORD, HOLLY, MD† Provider ID: N/A</p> <p>24022 CALLE DE LA PLATA STE 305 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-23</p> <p>SPANGGORD, HOLLY, MD† Provider ID: N/A</p> <p>24022 CALLE DE LA PLATA STE 305 LAGUNA HILLS, CA 92653 Effective as of 01-DEC-14</p> <p>SPANGGORD, HOLLY, MD† Provider ID: N/A</p> <p>24022 CALLE DE LA PLATA STE 305 LAGUNA HILLS, CA 92653 Effective as of 01-NOV-14</p> <p>TAYANI, RAMIN, MD Provider ID: N/A</p> <p>23521 PASEO DE VALENCIA STE 305 LAGUNA HILLS, CA 92653 Effective as of 01-MAR-23</p> <p>TEYMOORIAN, SAVAK, MD† Provider ID: N/A</p> <p>23961 CALLE DE LA MAGDALENA STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-23</p> <p>TEYMOORIAN, SAVAK, MD† Provider ID: N/A</p> <p>23961 CALLE DE LA MAGDALENA STE 300</p>
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LAGUNA HILLS, CA 92653 Effective as of 01-OCT-22	 23521 PASEO DE VALENCIA STE 305 LAGUNA HILLS, CA 92653 Effective as of 01-DEC-23	Effective as of 01-JAN-24
TEYMOORIAN, SAVAK, MD† Provider ID: N/A	WANG, YE, MD† Provider ID: N/A	WILLIAMS, MARK, MD Provider ID: N/A
 24401 CALLE DE LA LOUISA LAGUNA HILLS, CA 92653 Effective as of 01-DEC-14	 23961 CALLE DE LA MAGDALENA STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-23	 24022 CALLE DE LA PLATA STE 475 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-24
TEYMOORIAN, SAVAK, MD† Provider ID: N/A	WANG, YE, MD† Provider ID: N/A	WILLIAMS, MARK, MD Provider ID: N/A
 23961 CALLE DE LA MAGDALENA STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-SEP-23	 23961 CALLE DE LA MAGDALENA STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-APR-23	 24022 CALLE DE LA PLATA STE 475 LAGUNA HILLS, CA 92653 Effective as of 01-DEC-23
TEYMOORIAN, SAVAK, MD† Provider ID: N/A	WANG, YE, MD† Provider ID: N/A	WILLIAMS, MARK, MD Provider ID: N/A
 24401 CALLE DE LA LOUISA LAGUNA HILLS, CA 92653 Effective as of 01-NOV-14	 23961 CALLE DE LA MAGDALENA STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-SEP-22	 24022 CALLE DE LA PLATA STE 475 LAGUNA HILLS, CA 92653 Effective as of 01-DEC-23
TEYMOORIAN, SAVAK, MD† Provider ID: N/A	WANG, YE, MD† Provider ID: N/A	WILLIAMS, MARK, MD Provider ID: N/A
 23961 CALLE DE LA MAGDALENA STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-APR-23	 24401 CALLE DE LA LOUISA STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-NOV-19	 24022 CALLE DE LA PLATA STE 475 LAGUNA HILLS, CA 92653 Effective as of 01-DEC-23
TOMPKINS, BRETT, DO Provider ID: N/A	WANG, YE, MD† Provider ID: N/A	YOU, TIMOTHY, MD† Provider ID: N/A
 23521 PASEO DE VALENCIA STE 305 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-24	 24401 CALLE DE LA LOUISA STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-NOV-19	 24022 CALLE DE LA PLATA STE 475 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-23
TOMPKINS, BRETT, DO Provider ID: N/A	WILLIAMS, MARK, MD Provider ID: N/A	YOU, TIMOTHY, MD† Provider ID: N/A
 23521 PASEO DE VALENCIA STE 305 LAGUNA HILLS, CA 92653 Effective as of 01-DEC-23	 24022 CALLE DE LA PLATA STE 475 LAGUNA HILLS, CA 92653	 23521 PASEO DE VALENCIA LAGUNA HILLS, CA 92653 Effective as of 01-OCT-05
TOMPKINS, BRETT, DO Provider ID: N/A		YOU, TIMOTHY, MD† Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

OPTOMETRIST

**CHOI-SIRITARATIWAT,
ISABELL, OD†**

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

**CHOI-SIRITARATIWAT,
ISABELL, OD†**

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

**CHOI-SIRITARATIWAT,
ISABELL, OD†**

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

**CHOI-SIRITARATIWAT,
ISABELL, OD†**

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

**CHOI-SIRITARATIWAT,
ISABELL, OD†**

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

GRATTAN, ANNE, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

GRATTAN, ANNE, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

GRATTAN, ANNE, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

GRATTAN, ANNE, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

GRATTAN, ANNE, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

HUYNH, ANTHONY, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

HUYNH, ANTHONY, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

HUYNH, ANTHONY, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

HUYNH, ANTHONY, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

HUYNH, ANTHONY, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

HUYNH, ANTHONY, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

LEI, SHARON, OD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 325
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

LEIGHT, TERRA, OD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

LEIGHT, TERRA, OD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

LEUNG, CHRISTINA, OD†

Provider ID: N/A

25260 LA PAZ RD STE G
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-16

**MONTANA-COLLINS,
CLAUDIA, OD†**

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 412
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

NG, REBECCA, OD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

PHAN, MIMI, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

PLECHOT, ERIQ, OD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653*
Effective as of 01-APR-24

PLECHOT, ERIQ, OD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653*
Effective as of 01-APR-24

SKVARNA, KAREN, OD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SKVARNA, KAREN, OD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

SKVARNA, KAREN, OD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

TERADA, SEIJU, OD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

TERADA, SEIJU, OD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

TERADA, SEIJU, OD

Provider ID: N/A

23961 CALLE DE LA

MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

OTOLARYNGOLOGY

ABEDI ASL, ESRAFIL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 430
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

BALAKER, ASHLEY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

BALAKER, ASHLEY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

BALAKER, ASHLEY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

BALAKER, ASHLEY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-19

BALAKER, ASHLEY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

BUEN, FLOYD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370

LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

BUEN, FLOYD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370

LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

BUEN, FLOYD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370

LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

BUEN, FLOYD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370

LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

CHO, MICHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370

LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-14

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

**OTOLARYNGOLOGY /
OTOLOGY /**

**LARYNGOLOGY /
RHINOLOGY**

ABEDI ASL, ESRAFIL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 430

LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

ABEDI ASL, ESRAFIL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 430

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

ABEDI ASL, ESRAFIL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 430

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-13

CHO, MICHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

MUNDI, JAGMEET, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-14

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR

STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-16

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-12

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-12

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-07

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-07

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-11

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-11

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-11

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-14

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-16

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-07

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-APR-11

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-12

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-17

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-14

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

PEDIATRIC CARDIOLOGY

DENNY-BROWN, SINAN, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

**PHYS MED/ REHAB PAIN
MEDICINE**

HANNA, ANDREW, DO

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

HANNA, ANDREW, DO

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

HANNA, ANDREW, DO

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

**PHYSICAL MEDICINE /
REHABILITATION**

ALSHARIF, KAIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

ALSHARIF, KAIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

ALSHARIF, KAIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

HILAL, TARIQ, DO†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

HILAL, TARIQ, DO†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

HILAL, TARIQ, DO†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

HILAL, TARIQ, DO†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

HILAL, TARIQ, DO†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

KUO, DENNIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-20

LYNN, KENNETH, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 460
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-19

POURADIB, AMIR, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

POURADIB, AMIR, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

POURADIB, AMIR, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-21

POURADIB, AMIR, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-22

POURADIB, AMIR, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-22

PHYSICIANS ASSISTANT

BYNON, KRISTEN, PA

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-23

BYNON, KRISTEN, PA

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-23

BYNON, KRISTEN, PA

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-23

BYNON, KRISTEN, PA

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-23

CARDENAS, RICARDO, PA†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 250
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-22

CARDENAS, RICARDO, PA†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 250
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-22

DINH, Y NHA THI, PA†

Provider ID: N/A

23181 VERDUGO DR STE
103A
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-15

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-APR-21

KISCADEN, LAUREN, PA

Provider ID: N/A

24411 HEALTH CENTER DR
STE 208
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

KISCADEN, LAUREN, PA

Provider ID: N/A

24411 HEALTH CENTER DR
STE 208
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

NAGEL, IRENE, PA†

Provider ID: N/A

24411 HEALTH CENTER DR

STE 680

LAGUNA HILLS, CA 92653

Effective as of 01-JUN-19

OWEN, LISA, PA

Provider ID: N/A

23181 VERDUGO DR STE
103A
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

PALMER, VIVIENNE, PA

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

PALMER, VIVIENNE, PA

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

PALMER, VIVIENNE, PA

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

PALMER, VIVIENNE, PA

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

PETERMAN, KYLIE, PA

Provider ID: N/A

23181 VERDUGO DR STE
103A
LAGUNA HILLS, CA 92653*

Effective as of 01-APR-23

PETERMAN, KYLIE, PA

Provider ID: N/A

23181 VERDUGO DR STE 103A
LAGUNA HILLS, CA 92653*

Effective as of 01-APR-23

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-22

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-22

TOWERY, BOBBY, PA†

Provider ID: N/A

24411 HEALTH CENTER DR STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-18

WANG, LILLIAN, PA†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637

Effective as of 01-FEB-22

PODIATRIST

ARJOMANDI, NEDA, DPM†

Provider ID: N/A

24022 CALLE DE LA PLATA STE 410
LAGUNA HILLS, CA 92653

Effective as of 01-APR-21

ARJOMANDI, NEDA, DPM†

Provider ID: N/A

24022 CALLE DE LA PLATA STE 410
LAGUNA HILLS, CA 92653

Effective as of 01-APR-21

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-19

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-19

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-20

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-20

LEAMING, ROBERT, DPM

Provider ID: N/A

23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-FEB-24

LEAMING, ROBERT, DPM

Provider ID: N/A

23141 MOULTON PKWY STE

109

LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-FEB-24

MCCANN, JAN, DPM

Provider ID: N/A

24012 CALLE DE LA PLATA STE 135
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-20

MCCANN, JAN, DPM

Provider ID: N/A

24012 CALLE DE LA PLATA STE 135
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-20

NOSRATI, SAM, DPM†

Provider ID: N/A

23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-19

NOSRATI, SAM, DPM†

Provider ID: N/A

23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-16

NOSRATI, SAM, DPM†

Provider ID: N/A

23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-16

POLISKIE, MICHAEL, DPM†

Provider ID: N/A

23521 PASEO DE VALENCIA STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-22

POLISKIE, MICHAEL, DPM†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-18

YETTER, MARCUS, DPM†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 143
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

**PSYCHIATRIC-MENTAL
HEALTH NURSE
PRACTITIONER**

CARASQUERO, ANDREA, NP

Provider ID: N/A

23121 PLAZA POINTE DR
STE 107
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

CARASQUERO, ANDREA, NP

Provider ID: N/A

23121 PLAZA POINTE DR
STE 107
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

PSYCHIATRY

CHU, WEIMING, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 7C
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-21

CHU, WEIMING, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 7C
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-21

EAGAN, TERRY, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 424
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

EAGAN, TERRY, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 424
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

PULMONARY DISEASES

CHANG, WILLIAM, DO†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-22

CHANG, WILLIAM, DO†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-22

CHANG, WILLIAM, DO†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-23

CHANG, WILLIAM, DO†

Provider ID: N/A

23141 MOULTON PKWY STE

108
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-23

CHANG, WILLIAM, DO†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-23

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-23

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-17

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-17

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-23

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-17

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-17

KOHLI, SANJIVAN, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KOHLI, SANJIVAN, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

KOHLI, SANJIVAN, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

SHAHINIAN, GEORGE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

SINGH, SAMARJIT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

SINGH, SAMARJIT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SINGH, SAMARJIT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-19

SINGH, SAMARJIT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-22

SOONG, YEN-HUI, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

VO, BRYAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-12

VO, BRYAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

VO, BRYAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

VO, BRYAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

VO, BRYAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-18

VO, BRYAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-18

VO, BRYAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

VOVAN, THOMAS, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

VOVAN, THOMAS, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

VOVAN, THOMAS, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

VOVAN, THOMAS, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

VOVAN, THOMAS, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

RADIATION ONCOLOGY

CHAN, LINDA, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

CHAN, LINDA, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

CHAN, LINDA, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

CHAN, LINDA, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

CHAN, LINDA, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

HARSOLIA, ASIF, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

HARSOLIA, ASIF, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

HARSOLIA, ASIF, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

HARSOLIA, ASIF, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

KABOLIZADEH, PEYMAN, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

LEE, SHARON, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

LEE, SHARON, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

LEE, SHARON, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

LEE, SHARON, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

LEE, SHARON, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

LEE, SHARON, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

ZHANG, ANDREW, MD

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

ZHANG, ANDREW, MD

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

ZHANG, ANDREW, MD

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

ZHANG, ANDREW, MD

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

ZHANG, ANDREW, MD

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

RHEUMATOLOGY

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

☐ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

☐ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-19

KHALEGHI DAMAVANDI, MIR

BEHNAM, MD

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-21

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-18

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-15

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-24

SURGERY

CARDIOVASCULAR

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

HARGROVE, RACHEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

HARGROVE, RACHEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-22

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

**SURGERY COLON
SURGERY**

BRADY, MATTHEW, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

BRADY, MATTHEW, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

BRADY, MATTHEW, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

BRADY, MATTHEW, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

BRADY, MATTHEW, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

SYN, GENE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

SYN, GENE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 231
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SURGERY GENERAL

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR

STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-14

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-19

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

BACON, LOUISE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

BACON, LOUISE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

DEARING, DAVID, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

DEARING, DAVID, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-18

DEARING, DAVID, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

DEARING, DAVID, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

DEARING, DAVID, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-23

Effective as of 01-NOV-19

HOLNESS, RONALD, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-19

KLAUSE, ELVIRA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-23

KLAUSE, ELVIRA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-23

KLAUSE, ELVIRA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-23

KLAUSE, ELVIRA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653*

Effective as of 01-JUN-23

KLAUSE, ELVIRA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653

KLAUSE, ELVIRA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-23

KLAUSE, ELVIRA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-23

KUSHNER, KENNETH, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KUSHNER, KENNETH, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

PHAM, ALEXANDER, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-24

PHAM, ALEXANDER, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-24

PHAM, ALEXANDER, MD

<p>Provider ID: N/A</p> <p>☐ 23521 PASEO DE VALENCIA STE 108 LAGUNA HILLS, CA 92653 Effective as of 01-MAR-24</p> <p>RAHNEMA, CYRUS, MD Provider ID: N/A</p> <p>☐ 23521 PASEO DE VALENCIA STE 108 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-24</p> <p>RAHNEMA, CYRUS, MD Provider ID: N/A</p> <p>☐ 23521 PASEO DE VALENCIA STE 108 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-24</p> <p>RAHNEMA, CYRUS, MD Provider ID: N/A</p> <p>☐ 23521 PASEO DE VALENCIA STE 108 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-24</p> <p>RAHNEMA, CYRUS, MD Provider ID: N/A</p> <p>☐ 23521 PASEO DE VALENCIA STE 108 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-24</p> <p>ROBERTSON, ELSIE, MD Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 350 LAGUNA HILLS, CA 92653 Effective as of 01-MAR-23</p> <p>ROBERTSON, ELSIE, MD Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 350</p>	<p>LAGUNA HILLS, CA 92653 Effective as of 01-OCT-23</p> <p>RONA, KAIS, MD Provider ID: N/A</p> <p>☐ 11 MAREBLU STE 200 LAGUNA HILLS, CA 92656* Effective as of 01-FEB-23</p> <p>SHARMA, RAHUL, DO† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 350 LAGUNA HILLS, CA 92653 Effective as of 01-NOV-19</p> <p>SHARMA, RAHUL, DO† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 350 LAGUNA HILLS, CA 92653 Effective as of 01-NOV-19</p> <p>SHARMA, RAHUL, DO† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 350 LAGUNA HILLS, CA 92653 Effective as of 01-NOV-19</p> <p>SHAVER, JOHN, MD† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 350 LAGUNA HILLS, CA 92653 Effective as of 01-NOV-19</p> <p>SHAVER, JOHN, MD† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 350 LAGUNA HILLS, CA 92653 Effective as of 01-NOV-19</p> <p>SHAVER, JOHN, MD† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 350 LAGUNA HILLS, CA 92653 Effective as of 01-NOV-19</p> <p>SHAVER, JOHN, MD† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 350 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-23</p> <p>SHAVER, JOHN, MD†</p>	<p>Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 350 LAGUNA HILLS, CA 92653 Effective as of 01-SEP-22</p> <p>TENG, WANG, MD† Provider ID: N/A</p> <p>☐ 24411 HEALTH CENTER DR STE 350 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-18</p> <p>TUNG, SHAWNDEEP, MD Provider ID: N/A</p> <p>☐ 24401 CALLE DE LA LOUISA STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-JUL-21</p> <p>TUNG, SHAWNDEEP, MD Provider ID: N/A</p> <p>☐ 24401 CALLE DE LA LOUISA STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-JUL-21</p> <p>TUNG, SHAWNDEEP, MD Provider ID: N/A</p> <p>☐ 24401 CALLE DE LA LOUISA STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-JUL-21</p> <p>TUNG, SHAWNDEEP, MD Provider ID: N/A</p> <p>☐ 24401 CALLE DE LA LOUISA STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-JUL-21</p> <p>TUNG, SHAWNDEEP, MD Provider ID: N/A</p> <p>☐ 24401 CALLE DE LA LOUISA STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-JUL-21</p> <p>TUNG, SHAWNDEEP, MD Provider ID: N/A</p> <p>☐ 24401 CALLE DE LA LOUISA STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-JUL-21</p> <p>TUNG, SHAWNDEEP, MD Provider ID: N/A</p> <p>☐ 24401 CALLE DE LA LOUISA STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-JUL-21</p>
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LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-13

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

WATANABE, BRIAN, MD†

Provider ID: N/A

24953 PASCO DE
VALENCIA
STE 15C

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-21

WATANABE, BRIAN, MD†

Provider ID: N/A

24953 PASCO DE
VALENCIA
STE 15C

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-21

WATANABE, BRIAN, MD†

Provider ID: N/A

24953 PASCO DE
VALENCIA
STE 15C

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-21

WONG, JASON, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

WONG, JASON, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653
Effective as of 01-JUL-20

WONG, JASON, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

WONG, JASON, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

WONG, JASON, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653
Effective as of 01-NOV-12

WONG, JASON, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-12

WONG, JASON, MD†

Provider ID: N/A

24411 HEALTH CENTER DR

STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

WONG, JASON, MD†

Provider ID: N/A

☑ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-20

**SURGERY GENERAL
VASCULAR**

DEARING, DAVID, MD†

Provider ID: N/A

☑ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-18

DEARING, DAVID, MD†

Provider ID: N/A

☑ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-15

DEARING, DAVID, MD†

Provider ID: N/A

☑ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

DEARING, DAVID, MD†

Provider ID: N/A

☑ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-19

SHARMA, RAHUL, DO†

Provider ID: N/A

☑ 24411 HEALTH CENTER DR

STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-APR-19

SHARMA, RAHUL, DO†

Provider ID: N/A

☑ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-APR-19

SHARMA, RAHUL, DO†

Provider ID: N/A

☑ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SHARMA, RAHUL, DO†

Provider ID: N/A

☑ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SHARMA, RAHUL, DO†

Provider ID: N/A

☑ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-19

SHARMA, RAHUL, DO†

Provider ID: N/A

☑ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-18

TENG, WANG, MD†

Provider ID: N/A

☑ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

TENG, WANG, MD†

Provider ID: N/A

☑ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

TENG, WANG, MD†

Provider ID: N/A

☑ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

TENG, WANG, MD†

Provider ID: N/A

☑ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-12

TENG, WANG, MD†

Provider ID: N/A

☑ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

TENG, WANG, MD†

Provider ID: N/A

☑ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

TENG, WANG, MD†

Provider ID: N/A

☑ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

**SURGERY HAND
ORTHOPEDIC**

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-NOV-20

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-NOV-20

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-NOV-20

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-NOV-20

**SURGERY
NEUROLOGICAL**

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

JACKSON, ROBERT, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

JACKSON, ROBERT, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-19

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 504
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 504
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 504
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-18

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-19

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Teleservice

Effective as of 01-MAY-20

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405

LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-MAY-20

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Teleservice

Effective as of 01-JAN-21

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Teleservice

Effective as of 01-JAN-21

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Teleservice

Effective as of 01-OCT-22

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Teleservice

Effective as of 01-APR-22

SURGERY ORTHOPEDIC

GREENBAUM, BRADLEY, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

GREENBAUM, BRADLEY, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-SEP-23

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-DEC-21

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-JAN-22

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-JUL-21

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-OCT-23

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-MAY-22

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-NOV-22

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-NOV-22

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-JAN-23

SURGERY THORACIC

ALTSHULER, JEFFREY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

HARGROVE, RACHEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

HARGROVE, RACHEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

HARGROVE, RACHEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

HARGROVE, RACHEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KANAAN, SAMER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR

STE 630
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-17

KANAAN, SAMER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-17

LAM, TUAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-APR-19

POWELL, LEDFORD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653
Effective as of 01-APR-16

POWELL, LEDFORD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

POWELL, LEDFORD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

POWELL, LEDFORD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-14

POWELL, LEDFORD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-16

POWELL, LEDFORD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-20

SURGICAL ONCOLOGY

BREMNER, AMY, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

BREMNER, AMY, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 102
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-21

BREMNER, AMY, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

BREMNER, AMY, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

BREMNER, AMY, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

BREMNER, AMY, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

UROLOGY

BUI, DON, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA

MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

CHEVINSKY, MICHAEL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

CHEVINSKY, MICHAEL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

CHEVINSKY, MICHAEL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

CHEVINSKY, MICHAEL, MD†

Provider ID: N/A

24953 PASEO DE VALENCIA STE 15B LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

CHEVINSKY, MICHAEL, MD†

Provider ID: N/A

24953 PASEO DE VALENCIA STE 15B LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

CHEVINSKY, MICHAEL, MD†

Provider ID: N/A

24953 PASEO DE VALENCIA STE 15B LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-FEB-22

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-FEB-22

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

GRUENENFELDER, JENNIFER, MD

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

HO, TAMMY, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

HO, TAMMY, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

HO, TAMMY, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

HO, TAMMY, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

HO, TAMMY, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

HO, TAMMY, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-22

HO, TAMMY, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

HO, TAMMY, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

HO, TAMMY, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

HO, TAMMY, MD†

Provider ID: N/A

23961 CALLE DE LA

MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

HO, TAMMY, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

KIM, MOSES, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-19

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA

MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO VALENCIA7C
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-15

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO VALENCIA7C
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-12

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-21

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-21

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO DE

VALENCIA STE 15B
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

SPITZ, AARON, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

SPITZ, AARON, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

SPITZ, AARON, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-14

SPITZ, AARON, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-14

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA

MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SU, DANIEL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SU, DANIEL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SU, DANIEL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

SU, DANIEL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SU, DANIEL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SU, DANIEL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SU, DANIEL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SU, DANIEL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SU, DANIEL, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-17

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-21

ALLERGY IMMUNOLOGY

DYER, MARC, MD

Provider ID: N/A

30131 TOWN CENTER DR
STE 120
LAGUNA NIGUEL, CA 92677

Effective as of 01-NOV-14

DYER, MARC, MD

Provider ID: N/A

30131 TOWN CENTER DR
STE 120
LAGUNA NIGUEL, CA 92677

Effective as of 01-JAN-13

DYER, MARC, MD

Provider ID: N/A

30131 TOWN CENTER DR
STE 120
LAGUNA NIGUEL, CA 92677

Effective as of 01-JAN-18

AUDIOLOGIST

ABRAMSON, MARIA, AuD†

Provider ID: N/A

28985 GOLDEN LANTERN
STE B105
LAGUNA NIGUEL, CA 92677

Effective as of 01-NOV-21

ABRAMSON, MARIA, AuD†

Provider ID: N/A

28985 GOLDEN LANTERN
STE B105
LAGUNA NIGUEL, CA 92677

Effective as of 01-NOV-21

CERTIFIED

ACUPUNCTURIST

PARK, ERIC, LAC†

Provider ID: N/A

30101 TOWN CENTER DR
STE 112
LAGUNA NIGUEL, CA 92677

Effective as of 01-OCT-22

DERMATOLOGY

KLEIN, LORRIE, MD†

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677

Effective as of 01-JAN-23

KLEIN, LORRIE, MD†

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677

Effective as of 01-JUL-21

KLEIN, LORRIE, MD†

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677

Effective as of 01-JUL-21

KLEIN, LORRIE, MD†

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677

Effective as of 01-SEP-19

KLEIN, LORRIE, MD†

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677

Effective as of 01-SEP-19

KLEIN, LORRIE, MD†

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677

Effective as of 01-OCT-23

LANDER, JEFFREY, MD†

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677

Effective as of 01-OCT-23

LANDER, JEFFREY, MD†

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677

Effective as of 01-OCT-22

LANDER, JEFFREY, MD†

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677
Effective as of 01-JAN-23

NAMI, NAVID, DO⁺

Provider ID: N/A
30281 GOLDEN LANTERN
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAR-22

**ENDOCRINOLOGY
METABOLISM DIABETES**

NEMATI, MARYAM, MD

Provider ID: N/A
30281 GOLDEN LANTERN
LAGUNA NIGUEL, CA 92677
Effective as of 01-SEP-23

GASTROENTEROLOGY

ARGUELLO, JUAN, MD

Provider ID: N/A
30131 TOWN CENTER DR
STE 215
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-17

ARGUELLO, JUAN, MD

Provider ID: N/A
30131 TOWN CENTER DR
STE 215
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-17

GENERAL PRACTICE

PATEL, JYOTINKUMAR, MD⁺

Provider ID: N/A
30281 GOLDEN LANTERN
LAGUNA NIGUEL, CA 92677
Effective as of 01-SEP-22

**HEMATOLOGY /
ONCOLOGY**

WAGNER, EDWARD, MD

Provider ID: N/A
25500 RANCHO NIGUEL
RD STE 240
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-21

INTERNAL MEDICINE

SHAHIM, ZAHRA, MD

Provider ID: N/A
32341 GOLDEN LANTERN
STE D
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-23

MEDICAL ONCOLOGY

WAGNER, EDWARD, MD

Provider ID: N/A
25500 RANCHO NIGUEL
RD STE 240
LAGUNA NIGUEL, CA 92677
Effective as of 01-OCT-12

NEUROLOGY CHILD

GARFINKLE, REBECCA, DO

Provider ID: N/A
30131 TOWN CENTER DR
STE 245
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAY-14

GARFINKLE, REBECCA, DO

Provider ID: N/A
30131 TOWN CENTER DR
STE 245
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-14

MCINTOSH, ANDREW, MD⁺

Provider ID: N/A

30131 TOWN CENTER DR
STE 195
LAGUNA NIGUEL, CA 92677
Effective as of 01-JAN-21

MCINTOSH, ANDREW, MD⁺

Provider ID: N/A
30131 TOWN CENTER DR
STE 195
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAR-21

MCINTOSH, ANDREW, MD⁺

Provider ID: N/A
30131 TOWN CENTER DR
STE 195
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-13

MCINTOSH, ANDREW, MD⁺

Provider ID: N/A
30131 TOWN CENTER DR
STE 195
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-14

**PRZEKLASA AUTH, MELISSA,
MD⁺**

Provider ID: N/A
30131 TOWN CENTER DR
STE 237
LAGUNA NIGUEL, CA 92677
Effective as of 01-SEP-19

**PRZEKLASA AUTH, MELISSA,
MD⁺**

Provider ID: N/A
30131 TOWN CENTER DR
STE 237
LAGUNA NIGUEL, CA 92677
Effective as of 01-SEP-19

PEDIATRIC ALLERGY /

IMMUNOLOGY

DYER, MARC, MD

Provider ID: N/A

30131 TOWN CENTER DR
STE 120
LAGUNA NIGUEL, CA 92677
Effective as of 01-JAN-21

PODIATRIST

COX, MATTHEW, DPM

Provider ID: N/A

30001 TOWN CENTER DR
STE E2
LAGUNA NIGUEL, CA 92677
Effective as of 01-JAN-18

PSYCHOLOGIST

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

30131 TOWN CENTER DR
STE 268
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAR-15

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

30131 TOWN CENTER DR
STE 268
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAR-15

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

30100 CROWN VALLEY
PKWY STE 17C
LAGUNA NIGUEL, CA 92677
Effective as of 01-OCT-23

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

30100 CROWN VALLEY
PKWY STE 17C

LAGUNA NIGUEL, CA 92677
Effective as of 01-OCT-23

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

30131 TOWN CENTER DR
STE 268
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAR-15

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

30131 TOWN CENTER DR
STE 268
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAR-15

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

30100 CROWN VALLEY
PKWY STE 17C
LAGUNA NIGUEL, CA 92677
Effective as of 01-OCT-23

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

30100 CROWN VALLEY
PKWY STE 17C
LAGUNA NIGUEL, CA 92677
Effective as of 01-OCT-23

FAMILY PRACTICE

SPORTS MEDICINE

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-FEB-22

VENEZIANO, CHRISTOPHER, MD†

Provider ID: N/A

24331 EL TORO RD STE 200

LAGUNA WOODS, CA
92637

Effective as of 01-FEB-23

VENEZIANO, CHRISTOPHER, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-OCT-23

PHYSICIANS ASSISTANT

BOW, LINDA, PA†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-SEP-23

NGUYEN, TONY, PA†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-AUG-22

NGUYEN, TONY, PA†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-AUG-22

PODIATRIST

BATHAEE, FARSHAD, DPM

Provider ID: N/A

24331 EL TORO RD STE 370
LAGUNA WOODS, CA
92637
Effective as of 01-JAN-18

BATHAEE, FARSHAD, DPM

Provider ID: N/A

☐ 24331 EL TORO RD STE 370
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-17

BATHAEE, FARSHAD, DPM

Provider ID: N/A

☐ 24331 EL TORO RD STE 370
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

ROOHIAN, ARSHIA, DPM

Provider ID: N/A

☐ 24331 EL TORO RD STE 370
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

ROOHIAN, ARSHIA, DPM

Provider ID: N/A

☐ 24331 EL TORO RD STE 370
LAGUNA WOODS, CA
92637

Effective as of 01-JUL-20

**REGISTERED PHYSICAL
THERAPIST**

FRESHMAN, JANELLE, PT†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-23

FRESHMAN, JANELLE, PT†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-23

PARK, JOSEPH, PT

Provider ID: N/A

☐ 24361 EL TORO RD STE 140
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-23

SURGERY HAND

MOSKOW, LONNIE, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-23

MOSKOW, LONNIE, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-23

**SURGERY HAND
ORTHOPEDIC**

KIM, ABRAHAM, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAY-22

SURGERY ORTHOPEDIC

AMINIAN, ARASH, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

AMINIAN, ARASH, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA

92637

Effective as of 01-FEB-21

AMINIAN, ARASH, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAY-12

AMINIAN, ARASH, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-NOV-14

AMINIAN, ARASH, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-22

AMINIAN, ARASH, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-22

AMINIAN, ARASH, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-18

AMINIAN, ARASH, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-14

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-11

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-18

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-22

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200

LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-22

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-24

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-24

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-24

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-24

GURBANI, AJAY, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-23

GURBANI, AJAY, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

GURBANI, AJAY, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-23

GURBANI, AJAY, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-23

JOHNSON, BRYCE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

JOHNSON, BRYCE, MD†

Provider ID: N/A

<p>24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637</p> <p>Effective as of 01-JAN-18</p> <p>JOHNSON, BRYCE, MD† Provider ID: N/A</p>	<p>Effective as of 01-SEP-23</p> <p>KADAKIA, NIMISH, MD† Provider ID: N/A</p>	<p>Provider ID: N/A</p> <p>24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637</p> <p>Effective as of 01-SEP-18</p> <p>KIM, ABRAHAM, MD† Provider ID: N/A</p>
<p>24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637</p> <p>Effective as of 01-SEP-23</p> <p>JOHNSON, BRYCE, MD† Provider ID: N/A</p>	<p>Effective as of 01-DEC-21</p> <p>KIM, ABRAHAM, MD† Provider ID: N/A</p>	<p>24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637</p> <p>Effective as of 01-SEP-20</p> <p>KIM, ABRAHAM, MD† Provider ID: N/A</p>
<p>24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637</p> <p>Effective as of 01-FEB-21</p> <p>JOHNSON, BRYCE, MD† Provider ID: N/A</p>	<p>Effective as of 01-AUG-18</p> <p>KIM, ABRAHAM, MD† Provider ID: N/A</p>	<p>24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637</p> <p>Effective as of 01-SEP-20</p> <p>KIM, ABRAHAM, MD† Provider ID: N/A</p>
<p>24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637</p> <p>Effective as of 01-OCT-22</p> <p>JOHNSON, BRYCE, MD† Provider ID: N/A</p>	<p>Effective as of 01-DEC-18</p> <p>KIM, ABRAHAM, MD† Provider ID: N/A</p>	<p>24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637</p> <p>Effective as of 01-SEP-20</p> <p>KIM, ABRAHAM, MD† Provider ID: N/A</p>
<p>24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637</p> <p>Effective as of 01-MAR-21</p> <p>KADAKIA, NIMISH, MD† Provider ID: N/A</p>	<p>Effective as of 01-JAN-24</p> <p>KIM, ABRAHAM, MD† Provider ID: N/A</p>	<p>24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637</p> <p>Effective as of 01-JAN-23</p> <p>KIM, ABRAHAM, MD† Provider ID: N/A</p>
<p>24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637</p> <p>Effective as of 01-OCT-22</p> <p>KADAKIA, NIMISH, MD† Provider ID: N/A</p>	<p>Effective as of 01-SEP-23</p> <p>KIM, ABRAHAM, MD† Provider ID: N/A</p>	<p>24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637</p> <p>Effective as of 01-JAN-24</p> <p>KIM, ABRAHAM, MD† Provider ID: N/A</p>
<p>24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637</p> <p>Effective as of 01-SEP-18</p> <p>KADAKIA, NIMISH, MD† Provider ID: N/A</p>	<p>Effective as of 01-JAN-24</p> <p>KIM, ABRAHAM, MD† Provider ID: N/A</p>	<p>24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637</p> <p>Effective as of 01-JAN-24</p> <p>KIM, ABRAHAM, MD† Provider ID: N/A</p>

92637
Effective as of 01-JAN-24

KIM, ABRAHAM, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JUN-23

KIM, ABRAHAM, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-23

KIM, ABRAHAM, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JUN-23

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-23

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200

LAGUNA WOODS, CA
92637

Effective as of 01-JAN-18

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-APR-11

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-11

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAY-12

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAY-22

MOSKOW, LONNIE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAY-22

PATEL, AMAR, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

PATEL, AMAR, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

PATEL, AMAR, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

PATEL, AMAR, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

PYRKO, PETER, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-23

TOCCI, STEPHEN, MD†

Provider ID: N/A

24310 MOULTON PKWY
STE O563
LAGUNA WOODS, CA
92637

Effective as of 01-JUL-12

TOCCI, STEPHEN, MD†

Provider ID: N/A

24310 MOULTON PKWY
STE O563
LAGUNA WOODS, CA
92637

Effective as of 01-JUL-12

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-23

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-23

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-11

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-21

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-21

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200

LAGUNA WOODS, CA
92637

Effective as of 01-MAR-21

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-21

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

WONG, JEFFREY, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

WONG, JEFFREY, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

WONG, JEFFREY, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-19

WONG, JEFFREY, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

YOUDERIAN, ARI, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-18

YOUDERIAN, ARI, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

YOUDERIAN, ARI, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

YOUDERIAN, ARI, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-15

YOUDERIAN, ARI, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-15

YOUDERIAN, ARI, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-16

YOUDERIAN, ARI, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-16

CARDIOLOGY

ATTIA, NADER, DO†

Provider ID: N/A

31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532

Effective as of 01-JAN-19

BISWAS, MIMI, MD

Provider ID: N/A

31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532

Teleservice

Effective as of 01-NOV-23

COX, JEREMY, DO[†]

Provider ID: N/A

31581 CANYON ESTATES DR
LAKE ELSINORE, CA 92532

Effective as of 01-JAN-19

MESSENGER, BRADLEY, MD[†]

Provider ID: N/A

31581 CANYON ESTATES DR
LAKE ELSINORE, CA 92532

Effective as of 01-JAN-19

PATANKAR, KAUSTUBH, MD[†]

Provider ID: N/A

31581 CANYON ESTATES DR
LAKE ELSINORE, CA 92532

Effective as of 01-JAN-19

SANGODKAR, SANDEEP, DO[†]

Provider ID: N/A

31581 CANYON ESTATES DR
LAKE ELSINORE, CA 92532

Effective as of 01-JAN-19

**CARDIOVASCULAR
DISEASE**

QASQAS, SHADI, MD[†]

Provider ID: N/A

31571 CANYON ESTATES DR
STE 228
LAKE ELSINORE, CA 92532

Effective as of 01-MAY-15

QASQAS, SHADI, MD[†]

Provider ID: N/A

31571 CANYON ESTATES DR
STE 228
LAKE ELSINORE, CA 92532

Effective as of 01-MAY-15

QASQAS, SHADI, MD[†]

Provider ID: N/A

31571 CANYON ESTATES DR
STE 228
LAKE ELSINORE, CA 92532

Effective as of 01-JUN-17

QASQAS, SHADI, MD[†]

Provider ID: N/A

31571 CANYON ESTATES DR
STE 228
LAKE ELSINORE, CA 92532

Effective as of 01-JUL-21

QASQAS, SHADI, MD[†]

Provider ID: N/A

31571 CANYON ESTATES DR
STE 228
LAKE ELSINORE, CA 92532

Effective as of 01-JUL-21

QASQAS, SHADI, MD[†]

Provider ID: N/A

31571 CANYON ESTATES DR
STE 228
LAKE ELSINORE, CA 92532

Effective as of 01-MAR-21

QASQAS, SHADI, MD[†]

Provider ID: N/A

31571 CANYON ESTATES DR
STE 228
LAKE ELSINORE, CA 92532

Effective as of 01-JAN-17

**CERTIFIED NURSE
PRACTITIONER**

AGORRILLA, MARIA, NP

Provider ID: N/A

31736 MISSION TRL STE G
LAKE ELSINORE, CA 92530

Effective as of 01-OCT-23

**CERTIFIED REGISTERED
NURSE MIDWIFE**

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530

Effective as of 01-JUL-22

CHIROPRACTOR

HERNANDEZ, MARCO, DC

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530

Effective as of 01-FEB-24

HERNANDEZ, MARCO, DC

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530

Effective as of 01-FEB-24

HERNANDEZ, MARCO, DC

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530

Effective as of 01-FEB-24

HERNANDEZ, MARCO, DC

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530

Effective as of 01-FEB-24

HERNANDEZ, MARCO, DC

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530

Effective as of 01-FEB-24

JU, NATHANIEL, DC[†]

Provider ID: N/A

30195 FRASER DR

LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

FAMILY PRACTICE

VIDAL, MONICA, DO[†]

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-22

**FEMALE PELVIC MED AND
RECONSTRUCTIVE SURG**

KAAKI, BILAL, MD[†]

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-22

INTERNAL MEDICINE

ALTRIKI, MOHAMAD, MD[†]

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-OCT-20

ALTRIKI, MOHAMAD, MD[†]

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-NOV-20

ALTRIKI, MOHAMAD, MD[†]

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-NOV-20

MAHESHWARI, ANOOP, MD[†]

Provider ID: N/A

31571 CANYON ESTATES DR
STE 219
LAKE ELSINORE, CA 92532

Effective as of 01-MAY-15

YU, JERRY, MD[†]

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-DEC-23

YU, JERRY, MD[†]

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

YU, JERRY, MD[†]

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

YU, JERRY, MD[†]

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

**INTERVENTIONAL
CARDIOLOGY**

PAREKH, NIRAJ, MD[†]

Provider ID: N/A

31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532
Effective as of 01-JAN-19

NEPHROLOGY

ALTRIKI, MOHAMAD, MD[†]

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-JAN-20

ALTRIKI, MOHAMAD, MD[†]

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-FEB-20

CHANG, DAVID, MD[†]

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

CHANG, DAVID, MD[†]

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

CHANG, DAVID, MD[†]

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

CHANG, DAVID, MD[†]

Provider ID: N/A

425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-DEC-23

**OBSTETRICS /
GYNECOLOGY**

FRANCIS, LARRY, MD[†]

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

FRANCIS, LARRY, MD[†]

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-DEC-22

FRANCIS, LARRY, MD[†]

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-DEC-22

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-21

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-21

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530*
Effective as of 01-APR-24

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530*
Effective as of 01-APR-24

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530*
Effective as of 01-APR-24

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

141 N MAIN ST
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-21

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

141 N MAIN ST
LAKE ELSINORE, CA 92530

Effective as of 01-JUL-21

QADRI, FARNOOSH, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-DEC-22

REY, RODOLFO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530*
Effective as of 01-APR-24

REY, RODOLFO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530*
Effective as of 01-APR-24

REY, RODOLFO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-SEP-23

REY, RODOLFO, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-NOV-22

REY, RODOLFO, MD†

Provider ID: N/A

141 N MAIN ST
LAKE ELSINORE, CA 92530
Effective as of 01-JAN-21

VADAPARAMPIL, JANET, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JAN-21

VADAPARAMPIL, JANET, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530*
Effective as of 01-APR-24

VADAPARAMPIL, JANET, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530*
Effective as of 01-APR-24

VADAPARAMPIL, JANET, MD†

Provider ID: N/A

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530*
Effective as of 01-APR-24

VADAPARAMPIL, JANET, MD†

Provider ID: N/A

141 N MAIN ST
LAKE ELSINORE, CA 92530
Effective as of 01-JAN-21

OPTOMETRIST

GEE, JENNIFER, OD

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

MORA, WENDY, OD

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

RICH, RYAN, OD

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

TAM, EMILY, OD

Provider ID: N/A

30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

PHYSICIANS ASSISTANT

FATHI, NAGHMEH, PA

Provider ID: N/A

31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532
Effective as of 01-MAY-19

RUIZ-FLORES, ROSE, PA

Provider ID: N/A

425 DIAMOND DR STE 105
LAKE ELSINORE, CA 92530
Effective as of 01-SEP-23

PULMONARY DISEASES

MAHESHWARI, ANOOP, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 219
LAKE ELSINORE, CA 92532
Effective as of 01-AUG-14

MAHESHWARI, ANOOP, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 219
LAKE ELSINORE, CA 92532
Effective as of 01-MAY-15

MAHESHWARI, ANOOP, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 219
LAKE ELSINORE, CA 92532
Effective as of 01-AUG-13

REGISTERED PHYSICAL THERAPIST

CASTELLON, SHAWN, PT

Provider ID: N/A

425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-23

CASTELLON, SHAWN, PT

Provider ID: N/A

425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-23

DUPLECHAN, LAWRENCE, PT

Provider ID: N/A

425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-MAY-23

DUPLECHAN, LAWRENCE, PT

Provider ID: N/A

425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-MAY-23

EDDOW, JIM, PT†

Provider ID: N/A

425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-20

EDDOW, JIM, PT†

Provider ID: N/A

425 DIAMOND DR
LAKE ELSINORE, CA 92530
Effective as of 01-MAY-17

EDDOW, JIM, PT†

Provider ID: N/A

425 DIAMOND DR
LAKE ELSINORE, CA 92530
Effective as of 01-MAY-17

STEVENS, WHITNEY, PT

Provider ID: N/A

425 DIAMOND DR STE 101

LAKE ELSINORE, CA 92530
Effective as of 01-MAR-23

STEVENS, WHITNEY, PT

Provider ID: N/A

425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-MAR-23

TSAI, CHIAHONG, PT

Provider ID: N/A

425 DIAMOND DR STE
101ST
LAKE ELSINORE, CA 92530
Effective as of 01-NOV-23

TSAI, CHIAHONG, PT

Provider ID: N/A

425 DIAMOND DR STE
101ST
LAKE ELSINORE, CA 92530
Effective as of 01-NOV-23

ANESTHESIOLOGY

BUSTOS, JERROLD, MD†

Provider ID: N/A

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

BUSTOS, JERROLD, MD†

Provider ID: N/A

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

ANESTHESIOLOGY PAIN MANAGEMENT

BUSTOS, JERROLD, MD†

Provider ID: N/A

24401 MUIRLANDS BLVD

STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

**CERTIFIED
ACUPUNCTURIST**

KIM, ILWHA, LAC

Provider ID: N/A
23331 EL TORO RD STE 107
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

WEON, SUK KYENG, LAC

Provider ID: N/A
23361 EL TORO RD STE 112
LAKE FOREST, CA 92630
Effective as of 01-FEB-22

**CERTIFIED NURSE
PRACTITIONER**

TRAN, STEPHANIE, NP

Provider ID: N/A
26501 RANCHO PKWY S
STE 301
LAKE FOREST, CA 92630
Effective as of 01-MAR-24

TRAN, STEPHANIE, NP

Provider ID: N/A
26501 RANCHO PKWY S
STE 301
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DERMATOLOGY

BELL, IRA, MD†

Provider ID: N/A
23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-NOV-18

BELL, IRA, MD†

Provider ID: N/A
23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BELL, IRA, MD†

Provider ID: N/A
23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BELL, IRA, MD†

Provider ID: N/A
23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BELL, IRA, MD†

Provider ID: N/A
23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BELL, IRA, MD†

Provider ID: N/A
23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BELL, IRA, MD†

Provider ID: N/A
23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BELL, IRA, MD†

Provider ID: N/A
23832 ROCKFIELD BLVD

STE 210
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

BELL, IRA, MD†

Provider ID: N/A
23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

BELL, IRA, MD†

Provider ID: N/A
23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-APR-23

BENIK, KAREN, MD†

Provider ID: N/A
23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-APR-23

BENIK, KAREN, MD†

Provider ID: N/A
23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

BENIK, KAREN, MD†

Provider ID: N/A
23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

BENIK, KAREN, MD†

Provider ID: N/A
23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-FEB-19

BENIK, KAREN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

BENIK, KAREN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

BENIK, KAREN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

BENIK, KAREN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

BENIK, KAREN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

BENIK, KAREN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-NOV-18

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-NOV-18

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630

Effective as of 01-DEC-18

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210

LAKE FOREST, CA 92630
Effective as of 01-NOV-18

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-OCT-18

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-SEP-22

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-NOV-19

ENDOCRINOLOGY

METABOLISM DIABETES

KRISHNAN, PRIYANKA, MD

Provider ID: N/A

23331 EL TORO RD STE 102
LAKE FOREST, CA 92630
Effective as of 01-AUG-21

KRISHNAN, PRIYANKA, MD

Provider ID: N/A

23331 EL TORO RD STE 102
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

GASTROENTEROLOGY

CHOI, DAVID, DO†

Provider ID: N/A

26672 PORTOLA PKWY STE
104

LAKE FOREST, CA 92610
Effective as of 01-OCT-23

CHOI, DAVID, DO†

Provider ID: N/A

26672 PORTOLA PKWY STE
104
LAKE FOREST, CA 92610
Effective as of 01-JAN-23

CHOI, DAVID, DO†

Provider ID: N/A

26672 PORTOLA PKWY STE
104
LAKE FOREST, CA 92610
Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

26672 PORTOLA PKWY STE
104
LAKE FOREST, CA 92610
Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

26672 PORTOLA PKWY STE
104
LAKE FOREST, CA 92610
Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

26672 PORTOLA PKWY STE
104
LAKE FOREST, CA 92610
Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

26672 PORTOLA PKWY STE
104
LAKE FOREST, CA 92610
Effective as of 01-JUL-22

JAMAL, MOHAMMAD, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-APR-23

JAMAL, MOHAMMAD, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-APR-23

JAMAL, MOHAMMAD, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-OCT-22

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-DEC-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-DEC-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-DEC-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S

STE 103
LAKE FOREST, CA 92630
Effective as of 01-APR-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-DEC-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-DEC-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-DEC-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-JUN-22

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-JAN-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-JAN-23

SZU, ERIC, MD

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-FEB-23

SZU, ERIC, MD

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

SZU, ERIC, MD

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

GYNECOLOGY

WALLACE, PATRICIA, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY
STE 381
LAKE FOREST, CA 92691
Effective as of 01-FEB-24

INTERNAL MEDICINE

CHEN, MAY, MD

Provider ID: N/A

22621 LAKE FOREST DR STE
D1
LAKE FOREST, CA 92630
Effective as of 01-APR-23

CHEN, MAY, MD


Provider ID: N/A

22621 LAKE FOREST DR STE
D1


LAKE FOREST, CA 92630
Effective as of 01-APR-23

OPHTHALMOLOGY


FAZILAT, GOLAREH, MD†

Provider ID: N/A
 23832 ROCKFIELD BLVD
STE 150
LAKE FOREST, CA 92630
Effective as of 01-NOV-18


FAZILAT, GOLAREH, MD†

Provider ID: N/A
 23832 ROCKFIELD BLVD
STE 150
LAKE FOREST, CA 92630
Effective as of 01-APR-21

FAZILAT, GOLAREH, MD†


Provider ID: N/A
 23832 ROCKFIELD BLVD
STE 150
LAKE FOREST, CA 92630
Effective as of 01-APR-21

FAZILAT, GOLAREH, MD†

Provider ID: N/A
 23832 ROCKFIELD BLVD
STE 150
LAKE FOREST, CA 92630
Effective as of 01-JAN-21

OPTOMETRIST

WELLS, MARY, OD†

Provider ID: N/A
 23591 EL TORO RD STE 145
LAKE FOREST, CA 92630
Effective as of 01-JAN-18


WELLS, MARY, OD†

Provider ID: N/A
 23591 EL TORO RD STE 145
LAKE FOREST, CA 92630


Effective as of 01-JAN-17

PHYSICIANS ASSISTANT


ANASTASIU, DANIELLE, PA†

Provider ID: N/A
 24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20


ANASTASIU, DANIELLE, PA†

Provider ID: N/A
 24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20


ANASTASIU, DANIELLE, PA†

Provider ID: N/A
 24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20


DE LEON, ROBERT, PA†

Provider ID: N/A
 24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

DE LEON, ROBERT, PA†


Provider ID: N/A
 24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

DE LEON, ROBERT, PA†


Provider ID: N/A
 24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

PSYCHIATRY


DESILVA, GAYANI, MD†

Provider ID: N/A
 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23


DESILVA, GAYANI, MD†

Provider ID: N/A
 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23


DESILVA, GAYANI, MD†

Provider ID: N/A
 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23


DESILVA, GAYANI, MD†

Provider ID: N/A
 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

DESILVA, GAYANI, MD†

Provider ID: N/A
 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

DESILVA, GAYANI, MD†

Provider ID: N/A
 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

DESILVA, GAYANI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

JAKKULA, JAGAN, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-SEP-19

JAKKULA, JAGAN, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-MAR-21

JAKKULA, JAGAN, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-SEP-19

JAKKULA, JAGAN, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-SEP-19

JAKKULA, JAGAN, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-SEP-19

JAKKULA, JAGAN, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-MAR-21

KANUKUNTALA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

KANUKUNTALA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTALA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTALA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTALA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-NOV-21

KANUKUNTALA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

KANUKUNTALA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTALA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTALA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-NOV-21

KANUKUNTALA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD

STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

RAJPOOT, DEEPAK, MD†
Provider ID: N/A
24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-FEB-22

RAJPOOT, DEEPAK, MD†
Provider ID: N/A
24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-FEB-22

RAJPOOT, DEEPAK, MD†
Provider ID: N/A
24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-FEB-22

RAJPOOT, DEEPAK, MD†
Provider ID: N/A
24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-FEB-22

PSYCHOLOGIST

KANG, EILEEN, PhD
Provider ID: N/A
13 ORCHARD STE 103
LAKE FOREST, CA 92630
Effective as of 01-MAY-15

KANG, EILEEN, PhD
Provider ID: N/A
13 ORCHARD STE 103
LAKE FOREST, CA 92630
Effective as of 01-MAY-15

REGISTERED PHYSICAL THERAPIST

BECKER GALUSHA, JANE, PT
Provider ID: N/A
22821 LAKE FOREST DR STE
100
LAKE FOREST, CA 92630
Effective as of 01-MAY-20

SPEECH PATHOLOGIST

MARSDEN, CLAIRE, SP
Provider ID: N/A
22672 LAMBERT ST STE 611
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP
Provider ID: N/A
22672 LAMBERT ST STE 612
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP
Provider ID: N/A
22672 LAMBERT ST STE 611
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP
Provider ID: N/A
22672 LAMBERT ST STE 612
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP
Provider ID: N/A
22672 LAMBERT ST STE 612
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP
Provider ID: N/A

22672 LAMBERT ST STE 611
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP
Provider ID: N/A
22672 LAMBERT ST STE 611
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP
Provider ID: N/A
22672 LAMBERT ST STE 612
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

UROLOGY

CHUANG, KAI-WEN, MD
Provider ID: N/A
26691 PLAZA
STE 130
LAKE FOREST, CA 92691
Effective as of 01-JAN-24

CHIROPRACTOR

CASTRO, DAVID, DC
Provider ID: N/A
10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-JAN-23

FULKS, ZACKARY, DC
Provider ID: N/A
10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-MAY-23

MANSOUR, RASHAD, DC
Provider ID: N/A
10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-MAR-23

MCCOWN, BARRY, DC

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-DEC-23

ZECHA, RONALD, DC

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-JUL-22

PSYCHIATRY

LIU BARBARO, DOROTHY, MD

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-NOV-22

LIU BARBARO, DOROTHY, MD

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-JAN-24

LIU BARBARO, DOROTHY, MD

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-NOV-22

LIU BARBARO, DOROTHY, MD

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-JAN-24

PSYCHOLOGIST

BRUNETTO, HEIDI, PSYD

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-JAN-24

BRUNETTO, HEIDI, PSYD

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-JAN-24

ANESTHESIOLOGY

GUIANG, RAINIER, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-SEP-19

HYUN, SUZANNE, MD

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAR-24

PANG, GARY, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-SEP-19

PANG, GARY, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAR-24

**ANESTHESIOLOGY PAIN
MANAGEMENT**

CHEN, HAMILTON, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAY-21

CHEN, HAMILTON, MD†

Provider ID: N/A

27990 SHERMAN RD

MENIFEE, CA 92585
Effective as of 01-SEP-19

CHEN, HAMILTON, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-SEP-19

GUIANG, RAINIER, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAY-21

GUIANG, RAINIER, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAR-24

PANG, GARY, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAY-21

CARDIOLOGY

GOKHROO, RAHUL, MD†

Provider ID: N/A

26960 CHERRY HILLS
BLVD STE A
MENIFEE, CA 92586
Effective as of 01-DEC-22

GOKHROO, RAHUL, MD†

Provider ID: N/A

26960 CHERRY HILLS
BLVD STE A
MENIFEE, CA 92586
Effective as of 01-DEC-22

**CARDIOVASCULAR
DISEASE**

ALFAY, WISAM, MD

Provider ID: N/A

26960 CHERRY HILLS
BLVD STE C
MENIFEE, CA 92586
Effective as of 01-JAN-22

ALFAY, WISAM, MD

Provider ID: N/A

26960 CHERRY HILLS
BLVD STE C
MENIFEE, CA 92586
Effective as of 01-MAR-22

**CERTIFIED NURSE
PRACTITIONER**

LUCACI, BIANCA, NP

Provider ID: N/A

29826 HAUN RD STE 300
MENIFEE, CA 92586
Effective as of 01-APR-23

MELOT, KAREN, NP

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-DEC-20

MELOT, KAREN, NP

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-20

MELOT, KAREN, NP

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-20

NGUYEN, ANDY, NP

Provider ID: N/A

29826 HAUN RD STE 200

MENIFEE, CA 92586
Effective as of 01-AUG-23

NGUYEN, ANDY, NP

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-23

NGUYEN, ANDY, NP

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-23

PAULHUS, PATRICIA, NP†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

PAULHUS, PATRICIA, NP†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

PAULHUS, PATRICIA, NP†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

PAULHUS, PATRICIA, NP†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

PAULHUS, PATRICIA, NP†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-MAR-21

PAULHUS, PATRICIA, NP†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-DEC-20

SERAILE, KIRSTEN, NP

Provider ID: N/A

29826 HAUN RD STE 204
MENIFEE, CA 92586
Effective as of 01-MAY-22

SERAILE, KIRSTEN, NP

Provider ID: N/A

29826 HAUN RD STE 204
MENIFEE, CA 92586
Effective as of 01-MAY-22

VIERA, LIANA, NP†

Provider ID: N/A

29826 HAUN RD STE 300
MENIFEE, CA 92586
Effective as of 01-JAN-22

VIERA, LIANA, NP†

Provider ID: N/A

29826 HAUN RD STE 300
MENIFEE, CA 92586
Effective as of 01-JAN-22

CHIROPRACTOR

FARSHLER, ANTHONY, DC†

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-JUL-22

MCCARTHY, CHEYENNE, DC†

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-JUL-22

ROJAS, RAYMOND, DC†

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586

Effective as of 01-JUL-22

SHERIDAN, SHANE, DC

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586

Effective as of 01-JUL-22

DERMATOLOGY

JACOBS, RANDOLPH, MD

Provider ID: N/A

28120 BRADLEY RD
MENIFEE, CA 92586

Effective as of 01-DEC-18

JACOBS, RANDOLPH, MD

Provider ID: N/A

28120 BRADLEY RD
MENIFEE, CA 92586

Effective as of 01-JAN-18

JACOBS, RANDOLPH, MD

Provider ID: N/A

28120 BRADLEY RD
MENIFEE, CA 92586

Effective as of 01-JAN-18

JACOBS, RANDOLPH, MD

Provider ID: N/A

28120 BRADLEY RD
MENIFEE, CA 92586

Effective as of 01-JAN-18

MITCHELL, JESSE, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586

Effective as of 01-AUG-18

MITCHELL, JESSE, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586

Effective as of 01-AUG-18

MITCHELL, JESSE, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586

Effective as of 01-AUG-18

MITCHELL, JESSE, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586

Effective as of 01-AUG-18

MITCHELL, JESSE, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586

Effective as of 01-JUL-21

MITCHELL, JESSE, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586

Effective as of 01-JUL-21

**ENDOCRINOLOGY
METABOLISM DIABETES**

HAIDER, UZMA, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-DEC-20

HAIDER, UZMA, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-DEC-20

HAIDER, UZMA, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-NOV-23

HAIDER, SHANZAY, MD

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-MAR-24

HAIDER, SHANZAY, MD

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-MAR-24

HAIDER, SHANZAY, MD

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-MAR-24

HAIDER, SHANZAY, MD

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-MAR-24

HAIDER, UZMA, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-JUL-21

FAMILY PRACTICE

ZURITA, DANIELA, MD†

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586

Effective as of 01-NOV-22

GASTROENTEROLOGY

FLANNERY, CHRISTOPHER, MD

Provider ID: N/A

29826 HAUN RD STE 308
MENIFEE, CA 92586

Effective as of 01-APR-23

FLANNERY, CHRISTOPHER, MD

Provider ID: N/A

29826 HAUN RD STE 308
MENIFEE, CA 92586

Effective as of 01-APR-23

INTERNAL MEDICINE

JACOBS, NATALIA, MD

Provider ID: N/A

28120 BRADLEY RD
MENIFEE, CA 92586

Effective as of 01-MAY-23

LAC, PETER, MD†

Provider ID: N/A

29878 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-JAN-22

NAGASUNDER, ARABHI, DO

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-SEP-23

LICENSED CLINICAL SOCIAL WORKER

TABIL-GALAPON, BERNICE, LCSW

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE C
MENIFEE, CA 92586

Effective as of 01-JUL-23

NEPHROLOGY

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

29878 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-SEP-17

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

29878 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-SEP-17

CHARLES COWAN, TRICIA,

DO†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-APR-23

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-JUN-19

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-JUN-19

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-JUN-19

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-JUN-19

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-OCT-20

LAC, PETER, MD†

Provider ID: N/A

27851 BRADLEY RD STE 125

MENIFEE, CA 92586
Effective as of 01-NOV-19

LAC, PETER, MD†

Provider ID: N/A
☑ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

LAC, PETER, MD†

Provider ID: N/A
☑ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

LAC, PETER, MD†

Provider ID: N/A
☑ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

LAC, PETER, MD†

Provider ID: N/A
☑ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-DEC-23

LAC, PETER, MD†

Provider ID: N/A
☑ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-MAR-21

LAC, PETER, MD†

Provider ID: N/A
☑ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

NAGASUNDER, ARABHI, DO

Provider ID: N/A
☑ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-FEB-24

NAGASUNDER, ARABHI, DO

Provider ID: N/A
☑ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-OCT-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A
☑ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-OCT-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A
☑ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-NOV-23

NATH, ASHOK, MD†

Provider ID: N/A
☑ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

NATH, ASHOK, MD†

Provider ID: N/A
☑ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

NATH, ASHOK, MD†

Provider ID: N/A
☑ 29878 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-MAR-19

YAN, ERIC, MD†

Provider ID: N/A
☑ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice

Effective as of 01-JUN-19

YAN, ERIC, MD†

Provider ID: N/A
☑ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-JUN-19

YAN, ERIC, MD†

Provider ID: N/A
☑ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-JUN-19

YAN, ERIC, MD†

Provider ID: N/A
☑ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-JUN-19

YAN, ERIC, MD†

Provider ID: N/A
☑ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-MAY-20

YAN, ERIC, MD†

Provider ID: N/A
☑ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-JUL-23

YAN, ERIC, MD†

Provider ID: N/A
☑ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-JUN-19

YOUSSEF, AMR, DO⁺

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-22

YOUSSEF, AMR, DO⁺

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-SEP-22

YOUSSEF, AMR, DO⁺

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-SEP-22

NEUROLOGY

TALANKI, VARUN, MD

Provider ID: N/A

29826 HAUN RD STE 209
MENIFEE, CA 92586
Effective as of 01-DEC-22

**OBSTETRICS /
GYNECOLOGY**

HOM, KATHERINE, MD⁺

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JUL-23

NIHIRA, MIKIO, MD⁺

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-20

NIHIRA, MIKIO, MD⁺

Provider ID: N/A

29826 HAUN RD STE 200

MENIFEE, CA 92586
Effective as of 01-SEP-20

NIHIRA, MIKIO, MD⁺

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-20

NIHIRA, MIKIO, MD⁺

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JUL-23

RIZVI, SYED, MD⁺

Provider ID: N/A

27174 NEWPORT RD STE 2
MENIFEE, CA 92584
Effective as of 01-MAR-22

URSO, MARY JO, DO⁺

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-20

URSO, MARY JO, DO⁺

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-20

URSO, MARY JO, DO⁺

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-21

URSO, MARY JO, DO⁺

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JUL-23

**OCCUPATIONAL
THERAPIST**

STOTLER, APRIL, OT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-24

STOTLER, APRIL, OT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-24

ZECHA, RICHARD, OT⁺

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-21

ZECHA, RICHARD, OT⁺

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-21

OPHTHALMOLOGY

CHANG, TOM, MD⁺

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-JUL-23

CHAWLA, ANUJ, MD⁺

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-JUL-23

CHAWLA, ANUJ, MD⁺

Provider ID: N/A

29950 HAUN RD STE 202

MENIFEE, CA 92586
Effective as of 01-JUN-16

CHOW, JASON, MD†

Provider ID: N/A

27168 NEWPORT RD STE 4
MENIFEE, CA 92584
Effective as of 01-JUL-23

CULOTTA, ANTHONY, MD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Teleservice
Effective as of 01-JUL-23

CULOTTA, ANTHONY, MD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Teleservice
Effective as of 01-NOV-20

DAVIS, MICHAEL, MD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Teleservice
Effective as of 01-JUL-23

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-OCT-17

LAZZARINI, THOMAS, MD

Provider ID: N/A

29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-FEB-24

LEE, JOHN, MD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-JUL-23

LIN, THEODORE, MD†

Provider ID: N/A

29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-17

LIN, THEODORE, MD†

Provider ID: N/A

29798 HAUN RD STE 200
MENIFEE, CA 92586*
Effective as of 01-APR-24

LIN, THEODORE, MD†

Provider ID: N/A

29798 HAUN RD STE 200
MENIFEE, CA 92586*
Effective as of 01-APR-24

LOBUE, THOMAS, MD

Provider ID: N/A

29950 HAUN RD STE 206
MENIFEE, CA 92586
Effective as of 01-APR-14

SAMUEL, MICHAEL, MD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Teleservice
Effective as of 01-JUL-23

SHELTON, RAYMOND, MD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-MAY-23

ZHOU, SIWEI, MD†

Provider ID: N/A

27168 NEWPORT RD STE 4
MENIFEE, CA 92584
Effective as of 01-JUL-23

**OPHTHALMOLOGY /
OTOLOGY /
LARYNGOLOGY /
RHINOLOGY**

ISSA, REDA, MD†

Provider ID: N/A

29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-DEC-21

OPTOMETRIST

ARCHIBALD, JOHN, OD†

Provider ID: N/A

27168 NEWPORT RD STE 4
MENIFEE, CA 92584
Effective as of 01-JUL-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

27168 NEWPORT RD STE 4
MENIFEE, CA 92584
Effective as of 01-DEC-23

BARR, AUSTIN, OD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-MAR-23

BARR, AUSTIN, OD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-NOV-22

FENNEMA, ERIC, OD†

Provider ID: N/A

27168 NEWPORT RD STE 4
MENIFEE, CA 92584

Effective as of 01-FEB-22

FENNEMA, ERIC, OD†

Provider ID: N/A

27168 NEWPORT RD STE 4
MENIFEE, CA 92584

Effective as of 01-SEP-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-NOV-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-NOV-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-NOV-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-NOV-21

HAMOUIE, JUDY, OD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-NOV-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-JUL-23

MCINTYRE, DEBRA, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-DEC-17

MCINTYRE, DEBRA, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-DEC-17

MCINTYRE, DEBRA, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-DEC-17

MILLER, RYAN, OD

Provider ID: N/A

29950 HAUN RD STE 206
MENIFEE, CA 92586

Effective as of 01-APR-14

TO, BRITTANY, OD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-JUL-23

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-JUL-23

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-AUG-15

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-AUG-15

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-AUG-15

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-JAN-22

**PHYSICAL MEDICINE /
REHABILITATION**

CHEN, HAMILTON, MD†

Provider ID: N/A

☑ 27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAR-24

PHYSICIANS ASSISTANT

BUSTAMANTE, ANGEL, PA†

Provider ID: N/A

☑ 29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

BUSTAMANTE, ANGEL, PA†

Provider ID: N/A

☑ 29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-AUG-20

HUNSAKER, NALANI, PA†

Provider ID: N/A

☑ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-DEC-20

HUNSAKER, NALANI, PA†

Provider ID: N/A

☑ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-DEC-20

HUNSAKER, NALANI, PA†

Provider ID: N/A

☑ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-23

LOPEZ, MARIA, PA†

Provider ID: N/A

☑ 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-AUG-21

PSYCHIATRY

ANDERSEN, CLAIRE, MD

Provider ID: N/A

☑ 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-DEC-20

ANDERSEN, CLAIRE, MD

Provider ID: N/A

☑ 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-DEC-20

PERSAUD, PRIA, MD

Provider ID: N/A

☑ 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-AUG-20

PERSAUD, PRIA, MD

Provider ID: N/A

☑ 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-AUG-20

PERSAUD, PRIA, MD

Provider ID: N/A

☑ 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-AUG-20

PERSAUD, PRIA, MD

Provider ID: N/A

☑ 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-AUG-20

PSYCHIATRY CHILD

ANDERSEN, CLAIRE, MD

Provider ID: N/A

☑ 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-DEC-20

ANDERSEN, CLAIRE, MD

Provider ID: N/A

☑ 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-DEC-20

**REGISTERED PHYSICAL
THERAPIST**

ALEXANDER, AUSTIN, PT

Provider ID: N/A

☑ 29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-DEC-20

ALEXANDER, AUSTIN, PT

Provider ID: N/A

☑ 29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-DEC-20

ALEXANDER, AUSTIN, PT

Provider ID: N/A

☑ 30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-DEC-20

ALEXANDER, AUSTIN, PT

Provider ID: N/A

☑ 30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-DEC-20

ATKINS, AARON, PT

Provider ID: N/A

☑ 30141 ANTELOPE RD STE A

MENIFEE, CA 92584
Effective as of 01-JUL-23

ATKINS, AARON, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JUL-23

BARI, MONICA, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-DEC-23

BARI, MONICA, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-DEC-23

COBURN, PIERRE, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-24

COBURN, PIERRE, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-24

FOX, DELANIE, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-OCT-23

FOX, DELANIE, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-OCT-23

GARCIA, JASON, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JAN-23

GARCIA, JASON, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JAN-23

HARMAN, JACY, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JAN-22

HARMAN, JACY, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JAN-22

HARMAN, JACY, PT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-22

HARMAN, JACY, PT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-22

HIGGINS, DAWN, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JUL-22

HIGGINS, DAWN, PT†

Provider ID: N/A

29798 HAUN RD STE 201

MENIFEE, CA 92586
Effective as of 01-JUL-22

KARODY, ATULA, PT

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-FEB-24

KARODY, ATULA, PT

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-FEB-24

KARODY, ATULA, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-FEB-24

KARODY, ATULA, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-FEB-24

KESEL, KELSEY, PT

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-MAR-24

KESEL, KELSEY, PT

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-MAR-24

KESEL, KELSEY, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-MAR-24

KESEL, KELSEY, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-MAR-24

PATEL, BINOY, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-SEP-17

PATEL, BINOY, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-SEP-17

REED, SAVONNA, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JAN-21

REED, SAVONNA, PT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-21

REED, SAVONNA, PT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-21

REED, SAVONNA, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JAN-21

SABIN, SCOTT, PT†

Provider ID: N/A

29798 HAUN RD STE 201

MENIFEE, CA 92586
Effective as of 01-FEB-19

SABIN, SCOTT, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-FEB-19

SABIN, SCOTT, PT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-FEB-19

SABIN, SCOTT, PT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-FEB-19

SANCHEZ, EMILY, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JUN-23

SANCHEZ, EMILY, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JUN-23

SANCHEZ, EMILY, PT

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JUN-23

SANCHEZ, EMILY, PT

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JUN-23

RHEUMATOLOGY

BRAVO, ARLENE, MD†

Provider ID: N/A

29798 HAUN RD
MENIFEE, CA 92586
Effective as of 01-APR-21

COLBURN, KEITH, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

MEHTA, AMAL, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

MEHTA, AMAL, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-JUL-23

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-OCT-09

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-SEP-18

MEHTA, AMAL, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-SEP-18

**RAMASWAMY,
DHARMARAJAN, MD†**

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

**RAMASWAMY,
DHARMARAJAN, MD†**

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAY-21

TRIVEDI, JANKI, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

TRIVEDI, JANKI, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-SEP-18

TRIVEDI, JANKI, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-AUG-20

SURGERY GENERAL

IGWE, DANIEL, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

IGWE, DANIEL, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

IGWE, DANIEL, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

SURGERY ORTHOPEDIC

CHAUDHURI, KALI, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-21

CHAUDHURI, KALI, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-21

CHAUDHURI, KALI, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-21

DAVENPORT, STEPHEN, MD

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JUL-23

GANDE, ABHIRAM, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JUL-23

GANDE, ABHIRAM, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-22

GANDE, ABHIRAM, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-22

GANDE, ABHIRAM, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-22

PANSE, MILIND, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

PANSE, MILIND, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

PANSE, MILIND, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

UROLOGY

CRISELL, MONISHA, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586*
Effective as of 01-JUL-23

LARSON, BENJAMIN, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-JUN-17

LARSON, BENJAMIN, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-JUN-17

LUTTGE, SCOTT, MD

Provider ID: N/A

29826 HAUN RD STE 209
MENIFEE, CA 92586
Effective as of 01-MAY-23

NIHIRA, MIKIO, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-OCT-21

NIHIRA, MIKIO, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-OCT-21

ALLERGY IMMUNOLOGY

BASEN, TYLER, MD†

Provider ID: N/A

26691 PLAZA STE 170
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-DEC-20

BASEN, TYLER, MD†

Provider ID: N/A

26691 PLAZA STE 170
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-DEC-20

BASEN, TYLER, MD†

Provider ID: N/A

26691 PLAZA STE 170
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-SEP-22

BASEN, TYLER, MD†

Provider ID: N/A

26691 PLAZA STE 170
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-SEP-22

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-JUN-08

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-DEC-13

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244

MISSION VIEJO, CA 92691
Effective as of 01-DEC-13

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

☒ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

☒ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

☒ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

☒ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

MEHTA, VINAY, MD

Provider ID: N/A

☒ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☒ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☒ 27800 MEDICAL CENTER

RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

MEHTA, VINAY, MD

Provider ID: N/A

☒ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☒ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☒ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☒ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

VENKAT, GEETA, MD†

Provider ID: N/A

☒ 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-17

VENKAT, GEETA, MD†

Provider ID: N/A

☒ 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-17

ANESTHESIOLOGY

GERAYLI, AFSHIN, MD†

Provider ID: N/A

☒ 25982 PALA STE 280
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-AUG-22

GERAYLI, AFSHIN, MD†

Provider ID: N/A

☒ 25982 PALA STE 280
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-AUG-22

**ANESTHESIOLOGY PAIN
MANAGEMENT**

BESHAI, ALFRED, MD

Provider ID: N/A

☒ 26691 PLAZA STE 170
MISSION VIEJO, CA 92691
Effective as of 01-MAY-16

GERAYLI, AFSHIN, MD†

Provider ID: N/A

☒ 25982 PALA STE 280
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-JAN-16

GERAYLI, AFSHIN, MD†

Provider ID: N/A

☒ 25982 PALA STE 280
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-OCT-08

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

☒ 25982 PALA STE 280
MISSION VIEJO, CA 92691

Effective as of 01-JUL-22

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

25982 PALA STE 280
MISSION VIEJO, CA 92691
Effective as of 01-OCT-16

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

25982 PALA STE 280
MISSION VIEJO, CA 92691
Effective as of 01-OCT-16

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

25982 PALA STE 280
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

25982 PALA STE 280
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

25982 PALA STE 280
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

AUDIOLOGIST

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200

MISSION VIEJO, CA 92691

Effective as of 01-NOV-22

PANEK, KRISTI, AuD

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

PANEK, KRISTI, AuD

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

CARDIAC

ELECTROPHYSIOLOGY

DESAI, ASEEM, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

HUNG, LYNNE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

TIONGSON, JAY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 103
MISSION VIEJO, CA 92691
Effective as of 01-OCT-13

TIONGSON, JAY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 103

MISSION VIEJO, CA 92691

Effective as of 01-OCT-13

CARDIOLOGY

HUNG, LYNNE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

KOPLIK, SHERI, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-16

KOPLIK, SHERI, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-16

**LOUSSARARIAN, ARTHUR,
MD†**

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

**LOUSSARARIAN, ARTHUR,
MD†**

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

**LOUSSARARIAN, ARTHUR,
MD†**

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

SUK, DAVID, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

SUK, DAVID, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

**CARDIOVASCULAR
DISEASE**

ALOMARI, IHAB, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

ALOMARI, IHAB, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

CUA, BENNETT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-AUG-18

CUA, BENNETT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-AUG-18

DESAI, ASEEM, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-NOV-05

EUBANY, JACQUELINE, MD†

Provider ID: N/A

27525 PUERTA REAL STE
300
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

EUBANY, JACQUELINE, MD†

Provider ID: N/A

27525 PUERTA REAL STE
300
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

HEPNER, ABSALOM, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

HEPNER, ABSALOM, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

KULICK, DANIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-NOV-12

KULICK, DANIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-OCT-99

KULICK, DANIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

KULICK, DANIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

**LOUSSARARIAN, ARTHUR,
MD†**

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-OCT-99

**LOUSSARARIAN, ARTHUR,
MD†**

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

**LOUSSARARIAN, ARTHUR,
MD†**

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-NOV-12

REDIKER, DONALD, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-OCT-12

REDIKER, DONALD, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-OCT-99

REDIKER, DONALD, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691

Effective as of 01-SEP-10

REDIKER, DONALD, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-MAY-12

**CERTIFIED NURSE
PRACTITIONER**

CARR, CHERYL, NP

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

CARR, CHERYL, NP

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

CARR, CHERYL, NP

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

CARR, CHERYL, NP

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-MAY-23

CARR, CHERYL, NP

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-MAY-23

CHAN, JUDY, NPF

Provider ID: N/A

30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694

Effective as of 01-JAN-24

CHAN, JUDY, NPF

Provider ID: N/A

30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694

Effective as of 01-JAN-24

CHAN, JUDY, NPF

Provider ID: N/A

30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694

Effective as of 01-JAN-24

CHAN, JUDY, NPF

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694

Effective as of 01-APR-23

CHAN, JUDY, NPF

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694

Effective as of 01-APR-23

CHAN, JUDY, NPF

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694

Effective as of 01-APR-23

DAVID, MARY LOU, NP†

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691

Effective as of 01-AUG-21

PARK, SE, NP

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

PASICOLAN, MARI, NP

Provider ID: N/A

26012 MARGUERITE PKWY
STE H
MISSION VIEJO, CA 92692
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

26012 MARGUERITE PKWY
STE H
MISSION VIEJO, CA 92692
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

26012 MARGUERITE PKWY
STE H
MISSION VIEJO, CA 92692
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

30897 GATEWAY PL STE F
MISSION VIEJO, CA 92694
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

30897 GATEWAY PL STE F
MISSION VIEJO, CA 92694
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

30897 GATEWAY PL STE F
MISSION VIEJO, CA 92694
Effective as of 01-DEC-22

TORIOLA, ABIODUN, NP

Provider ID: N/A

30240 RANCHO VIEJO
SUITE E
MISSION VIEJO, CA 92675
Effective as of 01-JUL-23

CLINICAL

NEUROPSYCHOLOGIST

HAMILTON, JOANNE, PhD

Provider ID: N/A

26440 LA ALAMEDA STE
220
MISSION VIEJO, CA 92691
Effective as of 01-NOV-18

HAMILTON, JOANNE, PhD

Provider ID: N/A

26440 LA ALAMEDA STE
220
MISSION VIEJO, CA 92691
Effective as of 01-NOV-18

HOCHBERGER, WILLIAM, PhD

Provider ID: N/A

26440 LA ALAMEDA STE
220
MISSION VIEJO, CA 92691
Effective as of 01-FEB-21

HOCHBERGER, WILLIAM, PhD

Provider ID: N/A

26440 LA ALAMEDA STE
220
MISSION VIEJO, CA 92691
Effective as of 01-FEB-21

DERMATOLOGY

BISUNA, BLANCA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 170
MISSION VIEJO, CA 92691*
Effective as of 01-MAR-16

DICESARE, DANIEL, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691
Effective as of 01-NOV-19

DICESARE, DANIEL, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691
Effective as of 01-NOV-19

LEVIN, JACQUELINE, DO†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 220
MISSION VIEJO, CA 92691
Effective as of 01-NOV-15

LONGBERG, AUSTIN, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 435
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

LONGBERG, AUSTIN, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 435
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

NGUYEN, TUYET, MD

Provider ID: N/A

26800 CROWN VALLEY

PKWY STE 435
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

NGUYEN, TUYET, MD

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 435
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

ZHAN, FRANK, MD†

Provider ID: N/A
26691 PLAZA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

ZHAN, FRANK, MD†

Provider ID: N/A
26691 PLAZA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

ZHAN, FRANK, MD†

Provider ID: N/A
26691 PLAZA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

EMERGENCY MEDICINE

ELPEDES, BERNARD, DO†

Provider ID: N/A
23962 ALICIA PKWY STE 11
MISSION VIEJO, CA 92691
Effective as of 01-JAN-24

ENDOCRINOLOGY

METABOLISM DIABETES

BARRERA, JOSEPH, MD†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691*

Effective as of 01-NOV-12

BARRERA, JOSEPH, MD†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-DEC-02

BUI, AMY-VAN, MD†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

BUI, AMY-VAN, MD†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-FEB-15

CHAN, JESSICA, MD†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

CHAN, JESSICA, MD†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

DAO, LISA, MD

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

FRANKWICH, KAREN, MD†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-14

FRANKWICH, KAREN, MD†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-14

HOSSEINI, ALIREZA, MD†

Provider ID: N/A
25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A
25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A
25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A
25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A
25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

HOSSEINI, ALIREZA, MD[†]

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

HOSSEINI, ALIREZA, MD[†]

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

MULFORD, MIM, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

MULFORD, MIM, MD[†]

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

MULFORD, MIM, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-OCT-99

TRAN, NEIL, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-07

TRAN, NEIL, MD[†]

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

TRAN, NEIL, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

TRUONG, MICHAEL, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

TRUONG, MICHAEL, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-99

**FAMILY PRACTICE
SPORTS MEDICINE**

CUENCA, ARNOLD, DO[†]

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21

CUENCA, ARNOLD, DO[†]

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21

CUENCA, ARNOLD, DO[†]

Provider ID: N/A

23512 MADERO

MISSION VIEJO, CA 92691
Effective as of 01-SEP-21

MARANDOLA, MICHAEL, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUL-12

MARANDOLA, MICHAEL, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-APR-12

GASTROENTEROLOGY

BAE, WANJUN, MD[†]

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

BAE, WANJUN, MD[†]

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

BLOCK, EDWARD, MD[†]

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

BLOCK, EDWARD, MD[†]

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

CHANG, ELMER, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

CHANG, ELMER, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

CHU, ERIC, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 240
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

CHU, ERIC, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 240
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

CHU, ERIC, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310

MISSION VIEJO, CA 92691
Effective as of 01-APR-21

CHU, ERIC, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

KIM, DANIEL, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

KIM, DANIEL, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

NGUYEN, DOUGLAS, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

NGUYEN, DOUGLAS, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

RAHMAN, HABIB, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 475
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

RAHMAN, HABIB, MD

Provider ID: N/A

26691 PLAZA STE 150
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

RAHMAN, HABIB, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 475
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

RODRIGUES, DANIALD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

RODRIGUES, DANIALD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

ZABIHI, RAMIN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

ZABIHI, RAMIN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 308

MISSION VIEJO, CA 92691
Effective as of 01-JAN-12

ZABIHI, RAMIN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

ZABIHI, RAMIN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

ZABIHI, RAMIN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

GYNECOLOGY

KANALY, KIM, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

KANALY, KIM, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

WALLACE, PATRICIA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691

Effective as of 01-APR-11

WALLACE, PATRICIA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

WALLACE, PATRICIA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691
Effective as of 01-DEC-08

**HEMATOLOGY /
ONCOLOGY**

BENDER, RICHARD, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

BENDER, RICHARD, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

HU, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 460
MISSION VIEJO, CA 92691
Effective as of 01-SEP-20

HU, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD

STE 460
MISSION VIEJO, CA 92691
Effective as of 01-SEP-20

HUANG, DANIEL, MD†

Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

HUANG, DANIEL, MD†

Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

HUANG, DANIEL, MD†

Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-FEB-21

LAZO, NELLY, MD†

Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

LAZO, NELLY, MD†

Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

LAZO, NELLY, MD†

Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-NOV-18

LAZO, NELLY, MD†

Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-NOV-18

LAZO, NELLY, MD†

Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

LI, MING, MD†

Provider ID: N/A
27799 MEDICAL CENTER
RD
STE 460
MISSION VIEJO, CA 92691
Effective as of 01-APR-20

LI, MING, MD†

Provider ID: N/A
27799 MEDICAL CENTER
RD
STE 460
MISSION VIEJO, CA 92691
Effective as of 01-APR-20

INFECTIOUS DISEASE

REDDY, JAGADEESH, MD

Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-16

REDDY, JAGADEESH, MD

Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-JUL-16

REDDY, JAGADEESH, MD

Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

WAYNE, EDGAR, MD†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

WAYNE, EDGAR, MD†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

INTERNAL MEDICINE

AZAD, HABIB, MD†

Provider ID: N/A
27800 MEDICAL CENTER
RD STE 220
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

CASTRO RUEDA, HERNAN, MD†

Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-AUG-17

CHEN, MAY, MD†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

CHEN, MAY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

GEE, JOEY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691

Effective as of 01-DEC-16

GOLDBERG, ROBERT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691

Effective as of 01-NOV-12

JIANG, FEN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 460
MISSION VIEJO, CA 92691

Effective as of 01-SEP-22

JIANG, FEN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 460
MISSION VIEJO, CA 92691

Effective as of 01-SEP-22

KOVACS, DAVID, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691

Effective as of 01-APR-16

MIEL, RUFINA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691

Effective as of 01-APR-19

MIEL, RUFINA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691

Effective as of 01-APR-19

QURESHI, TAUSEEF, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691

Effective as of 01-JUL-15

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691

Effective as of 01-MAY-17

**INTERNAL MEDICINE
CRITICAL CARE MEDICINE**

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691

Effective as of 01-MAY-17

**INTERNAL MEDICINE
SPORTS MEDICINE**

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230

MISSION VIEJO, CA 92691

Effective as of 01-OCT-18

**INTERVENTIONAL
CARDIOLOGY**

DANON, SAAR, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694

Effective as of 01-MAY-21

DANON, SAAR, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694

Effective as of 01-MAY-21

DANON, SAAR, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694

Effective as of 01-MAY-21

DANON, SAAR, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694

Effective as of 01-AUG-20

**MARRIAGE FAMILY
THERAPIST**

ORTIZ, TINA, MFT†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 325
MISSION VIEJO, CA 92691

Effective as of 01-SEP-22

ORTIZ, TINA, MFT†

Provider ID: N/A
 26800 CROWN VALLEY
 PKWY STE 325
 MISSION VIEJO, CA 92691
 Effective as of 01-SEP-22

MEDICAL ONCOLOGY

BENDER, RICHARD, MD†
 Provider ID: N/A
 26732 CROWN VALLEY
 PKWY STE 271
 MISSION VIEJO, CA 92691
 Effective as of 01-JAN-23

BENDER, RICHARD, MD†
 Provider ID: N/A
 26732 CROWN VALLEY
 PKWY STE 271
 MISSION VIEJO, CA 92691
 Effective as of 01-OCT-23

NEPHROLOGY

ALLAMEHZADEH, REZA, MD†
 Provider ID: N/A
 25982 PALA
 MISSION VIEJO, CA 92691
 Effective as of 01-AUG-16

ALLAMEHZADEH, REZA, MD†
 Provider ID: N/A
 25982 PALA
 MISSION VIEJO, CA 92691
 Effective as of 01-AUG-16

ALLAMEHZADEH, REZA, MD†
 Provider ID: N/A
 25982 PALA STE 170
 MISSION VIEJO, CA 92691
 Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD†
 Provider ID: N/A
 25982 PALA STE 170

MISSION VIEJO, CA 92691
 Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD†
 Provider ID: N/A
 25982 PALA STE 170
 MISSION VIEJO, CA 92691
 Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD†
 Provider ID: N/A
 25982 PALA STE 170
 MISSION VIEJO, CA 92691
 Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD†
 Provider ID: N/A
 25982 PALA STE 170
 MISSION VIEJO, CA 92691
 Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD†
 Provider ID: N/A
 25982 PALA STE 170
 MISSION VIEJO, CA 92691*
 Effective as of 01-JAN-18

AZAD, HABIB, MD†
 Provider ID: N/A
 26800 CROWN VALLEY
 PKWY STE 250
 MISSION VIEJO, CA 92691
 Effective as of 01-JAN-15

AZAD, HABIB, MD†
 Provider ID: N/A
 26800 CROWN VALLEY
 PKWY STE 250
 MISSION VIEJO, CA 92691
 Effective as of 01-DEC-14

AZAD, HABIB, MD†
 Provider ID: N/A
 26800 CROWN VALLEY
 PKWY STE 250

MISSION VIEJO, CA 92691
 Effective as of 01-JAN-15

CHEN, MAY, MD†
 Provider ID: N/A
 26800 CROWN VALLEY
 PKWY STE 250
 MISSION VIEJO, CA 92691
 Effective as of 01-JAN-15

CHEN, MAY, MD†
 Provider ID: N/A
 26800 CROWN VALLEY
 PKWY STE 250
 MISSION VIEJO, CA 92691
 Effective as of 01-JAN-15

NAWAR, MAGDY, MD†
 Provider ID: N/A
 26800 CROWN VALLEY
 PKWY STE 485
 MISSION VIEJO, CA 92691
 Effective as of 01-JAN-18

NAWAR, MAGDY, MD†
 Provider ID: N/A
 26800 CROWN VALLEY
 PKWY STE 485
 MISSION VIEJO, CA 92691
 Effective as of 01-NOV-14

NAWAR, MAGDY, MD†
 Provider ID: N/A
 26800 CROWN VALLEY
 PKWY STE 485
 MISSION VIEJO, CA 92691
 Effective as of 01-MAR-99

RAVIKUMAR, ASHA, MD†
 Provider ID: N/A
 27871 MEDICAL CENTER RD
 STE 250
 MISSION VIEJO, CA 92691
 Effective as of 01-JAN-14

TEACHER, THEODORE, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

TEACHER, THEODORE, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

TRAN, STEVE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

TRAN, STEVE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

TRAN, STEVE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

TRAN, STEVE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

NEUROLOGY

DORRIZ, PARSHAW, MD†

Provider ID: N/A

26800 CROWN VALLEY

PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

DORRIZ, PARSHAW, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

FAHIMI, GOLSHAN, MD

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

FAHIMI, GOLSHAN, MD

Provider ID: N/A

26991 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

GEE, JOEY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

GEE, JOEY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

GEE, JOEY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

KESARI, SANTOSH, MD

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 110
MISSION VIEJO, CA 92691
Effective as of 01-MAR-24

LOPEZ VIZCARRA, MARCO, MD

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

NIK, ANDREW, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

NIK, ANDREW, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

RAHIM, BASIT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-AUG-19

RAHIM, BASIT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-AUG-19

SALEHI, HAMID, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

SALEHI, HAMID, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

SALEHI, HAMID, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Effective as of 01-AUG-11

SALEHI, HAMID, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

SALEHI, HAMID, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

SPOKOYNY, ELEONORA, MD†

Provider ID: N/A

25982 PALA STE 150
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

SPOKOYNY, ELEONORA, MD†

Provider ID: N/A

25982 PALA STE 150
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

SPOKOYNY, ELEONORA, MD†

Provider ID: N/A

25982 PALA STE 150
MISSION VIEJO, CA 92691

Effective as of 01-JUN-18

SPOKOYNY, ELEONORA, MD†

Provider ID: N/A

25982 PALA STE 150
MISSION VIEJO, CA 92691
Effective as of 01-DEC-08

SPOKOYNY, ELEONORA, MD†

Provider ID: N/A

25982 PALA STE 150
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

TEACHER, THEODORE, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

TEACHER, THEODORE, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

VORA, RONAK, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

VORA, RONAK, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

NEUROLOGY CHILD

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY

PKWY STE 460

MISSION VIEJO, CA 92691

Effective as of 01-DEC-16

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-JAN-20

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

**OBSTETRICS /
GYNECOLOGY**

ABRAVESH, SOODABEH, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 310
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

BAGINSKI, LEON, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 310
MISSION VIEJO, CA 92691
Effective as of 01-JUL-20

BAGINSKI, LEON, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 310
MISSION VIEJO, CA 92691
Effective as of 01-JUL-20

BAGINSKI, LEON, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 310
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

BAILEY, THOMAS, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-JUL-14

BAILEY, THOMAS, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

BENZL, JERRY, MD†

Provider ID: N/A

26902 OSO PKWY STE 180
MISSION VIEJO, CA 92691
Effective as of 01-JUL-03

BENZL, JERRY, MD†

Provider ID: N/A

26902 OSO PKWY STE 180
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

BENZL, JERRY, MD†

Provider ID: N/A

26902 OSO PKWY STE 180
MISSION VIEJO, CA 92691
Effective as of 01-JUN-11

BENZL, JERRY, MD†

Provider ID: N/A

26902 OSO PKWY STE 180
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

CVAR, KATHRYN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

CVAR, KATHRYN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

CVAR, KATHRYN, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 443
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

EDMUNDSON, MORIAH, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21

EDMUNDSON, MORIAH, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21

FARAZ ESLAMI, PARASTOO, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-JUL-20

FARAZ ESLAMI, PARASTOO, MD†

Provider ID: N/A

30492 GATEWAY PL STE

110
MISSION VIEJO, CA 92694
Effective as of 01-JUL-20

FARAZ ESLAMI, PARASTOO, MD

Provider ID: N/A

30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-JAN-24

FARAZ ESLAMI, PARASTOO, MD

Provider ID: N/A

30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-JAN-24

FARAZ ESLAMI, PARASTOO, MD

Provider ID: N/A

30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-FEB-24

FARAZ ESLAMI, PARASTOO, MD

Provider ID: N/A

30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-FEB-24

GRANESE, MARSHA, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691
Effective as of 01-JUL-18

GRANESE, MARSHA, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691
Effective as of 01-JUL-18

KANALY, KIM, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 381
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

KANALY, KIM, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 381
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

LEAVITT, JAMIE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

LEAVITT, JAMIE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

MELKONIAN, VIKEN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

MELKONIAN, VIKEN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691

Effective as of 01-SEP-19

MELKONIAN, VIKEN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691

Effective as of 01-SEP-19

MILLER, KURT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691

Effective as of 01-MAR-99

MILLER, KURT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691

Effective as of 01-JAN-18

POLLOCK, KATHLEEN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-JUN-05

POLLOCK, KATHLEEN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-SEP-10

RAMIREZ, SARA, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691

Effective as of 01-JAN-18

RAMIREZ, SARA, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691

Effective as of 01-JAN-18

SALCIDO, CRAIG, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691

Effective as of 01-DEC-07

SALCIDO, CRAIG, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691

Effective as of 01-NOV-14

STADLER, EDWARD, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691

Effective as of 01-MAR-99

STADLER, EDWARD, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691

Effective as of 01-JAN-18

TRAN, TIFFANY, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 144
MISSION VIEJO, CA 92691

Effective as of 01-MAR-23

TRAN, TIFFANY, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 144

MISSION VIEJO, CA 92691

Effective as of 01-MAR-23

TRAN, BRYAN, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 144
MISSION VIEJO, CA 92691

Effective as of 01-SEP-22

OPHTHALMOLOGY

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-NOV-21

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-NOV-21

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-NOV-21

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-MAR-23

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-MAR-23

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-OCT-21

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-OCT-21

AMRA, NOOR, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-DEC-22

AMRA, NOOR, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-DEC-22

AMRA, NOOR, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-JAN-23

AMRA, NOOR, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-MAY-22

AMRA, NOOR, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-MAY-22

BANUELOS, LYDIA, MD†

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691

Effective as of 01-DEC-22

BANUELOS, LYDIA, MD†

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

**CUNNINGHAM-AHUMADA,
ROSE, DO†**

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691

Effective as of 01-JAN-18

**CUNNINGHAM-AHUMADA,
ROSE, DO†**

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691

Effective as of 01-DEC-14

**CUNNINGHAM-AHUMADA,
ROSE, DO†**

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691

Effective as of 01-DEC-11

**CUNNINGHAM-AHUMADA,
ROSE, DO†**

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691

Effective as of 01-AUG-19

**CUNNINGHAM-AHUMADA,
ROSE, DO†**

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691

Effective as of 01-JUN-16

**CUNNINGHAM-AHUMADA,
ROSE, DO†**

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691

Effective as of 01-MAY-22

**CUNNINGHAM-AHUMADA,
ROSE, DO†**

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691

Effective as of 01-MAY-22

**CUNNINGHAM-AHUMADA,
ROSE, DO†**

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691

Effective as of 01-NOV-14

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-NOV-14

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-FEB-08

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

JOSON, PETER, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

JOSON, PETER, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

JOSON, PETER, MD

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 220
MISSION VIEJO, CA 92691

Effective as of 01-OCT-17

JOSON, PETER, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

JOSON, PETER, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-AUG-19

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD

STE 120

MISSION VIEJO, CA 92691

Effective as of 01-DEC-14

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-12

SALEHI-HAD, HANI, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 220
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

SALEHI-HAD, HANI, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 220
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

SALEHI-HAD, HANI, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 220
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

SALEHI-HAD, HANI, MD

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

TAI, AUDREY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

TAI, AUDREY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

TAYANI, RAMIN, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-12

TAYANI, RAMIN, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

TAYANI, RAMIN, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

TAYANI, RAMIN, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

TAYANI, RAMIN, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

OPTOMETRIST

ANSARI, SHORA, OD

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

HWANG, DONNA, OD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

KHAN, CEMONE, OD

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

NG, REBECCA, OD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

NG, REBECCA, OD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

SAKO, AARON, OD

Provider ID: N/A

27724 SANTA MARGARITA
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

WONG, RANDALL, OD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-FEB-04

WONG, RANDALL, OD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

OTOLARYNGOLOGY

FEINBERG, STEVEN, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

LUU, QUANG, MD†

Provider ID: N/A

26726 CROWN VALLEY

PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

LUU, QUANG, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-18

LUU, QUANG, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

LUU, QUANG, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

**OTOLARYNGOLOGY /
OTOLOGY /
LARYNGOLOGY /
RHINOLOGY**

BREDENKAMP, JAMES, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-16

BREDENKAMP, JAMES, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-14

BREDENKAMP, JAMES, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

BREDENKAMP, JAMES, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

BREDENKAMP, JAMES, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-SEP-99

CHO, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

CHO, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

CHO, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

CHO, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY

PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-08

CROCKETT, DENNIS, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

CROCKETT, DENNIS, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-08

CROCKETT, DENNIS, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

CROCKETT, DENNIS, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

CROCKETT, DENNIS, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

CROCKETT, DENNIS, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-99

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-04

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

MUNDI, JAGMEET, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

MUNDI, JAGMEET, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-14

MUNDI, JAGMEET, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-14

MUNDI, JAGMEET, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-OCT-13

MUNDI, JAGMEET, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-13

MUNDI, JAGMEET, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-FEB-16

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

26726 CROWN VALLEY

PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-FEB-16

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A
26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-FEB-16

PEDIATRIC CARDIOLOGY

CHUN, DAVID, MD†

Provider ID: N/A
26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-FEB-15

CHUN, DAVID, MD†

Provider ID: N/A
26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-MAY-15

ELLINI, AHMAD, MD†

Provider ID: N/A
26691 PLAZA STE 120A
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

GANDY, JODIE, MD†

Provider ID: N/A
26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-SEP-15

GANDY, JODIE, MD†

Provider ID: N/A
26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

GANDY, JODIE, MD†

Provider ID: N/A
26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

GANDY, JODIE, MD†

Provider ID: N/A
26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

GANDY, JODIE, MD†

Provider ID: N/A
26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21

GANDY, JODIE, MD†

Provider ID: N/A
26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

GANDY, JODIE, MD

Provider ID: N/A
26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

GANDY, JODIE, MD†

Provider ID: N/A
26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

GANDY, JODIE, MD

Provider ID: N/A
26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

GANDY, JODIE, MD

Provider ID: N/A
26691 PLAZA STE 160
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

GANDY, JODIE, MD

Provider ID: N/A
26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

MUHONEN, LINDA, MD

Provider ID: N/A
26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

RAHIMI, MOHAMMAD, MD†

Provider ID: N/A
30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-DEC-20

RAHIMI, MOHAMMAD, MD†

Provider ID: N/A
30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-DEC-20

RAHIMI, MOHAMMAD, MD†

Provider ID: N/A
30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-DEC-20

RAHIMI, MOHAMMAD, MD†

Provider ID: N/A
30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-JAN-21

RAHIMI, MOHAMMAD, MD†

Provider ID: N/A
30492 GATEWAY PL STE

110
MISSION VIEJO, CA 92694
Effective as of 01-JAN-21

RAHIMI, MOHAMMAD, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-JAN-21

RAHIMI, MOHAMMAD, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-JAN-21

WEINER, KEITH, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 264
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

WEINER, KEITH, MD†

Provider ID: N/A

26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

WEINER, KEITH, MD†

Provider ID: N/A

26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

WEINER, KEITH, MD

Provider ID: N/A

26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

WEINER, KEITH, MD

Provider ID: N/A

26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

WEINER, KEITH, MD

Provider ID: N/A

26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

WEINER, KEITH, MD

Provider ID: N/A

26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

**PEDIATRIC INFECTIOUS
DISEASES**

ARRIETA, ANTONIO, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 138 BLDG 2
MISSION VIEJO, CA 92691
Effective as of 01-FEB-17

ARRIETA, ANTONIO, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 138 BLDG 2
MISSION VIEJO, CA 92691
Effective as of 01-FEB-17

ARRIETA, ANTONIO, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 138 BLDG 2
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

PEDIATRIC NEPHROLOGY

ZAMAN, RUMINA, MD

Provider ID: N/A

26691 PLAZA STE 130

MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

PEDIATRIC ORTHOPEDICS

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-05

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-12

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

DOBYNS, JEFFREY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-15

DOBYNS, JEFFREY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-SEP-15

DOBYNS, JEFFREY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-JAN-21

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-MAR-10

MISAGHI, AMIRHOSSEIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-JAN-20

ROSENFELD, SAMUEL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-JUL-05

SCHLECHTER, JOHN, DO†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-FEB-09

WEINERT, CARL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-JUL-05

***PEDIATRIC SPORTS
MEDICINE***

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-OCT-18

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-OCT-18

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-DEC-20

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-APR-18

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-APR-18

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-SEP-19

***PEDIATRIC SURGERY
ORTHOPEDIC***

CAO, LISA, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-JUL-23

CAO, LISA, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-OCT-22

CAO, LISA, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-OCT-22

MCMICHAEL, JESSICA, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-OCT-20

PEDIATRICS

CHAMBERLIN, JOSHUA, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 110
MISSION VIEJO, CA 92691

Effective as of 01-FEB-21

***PHYS MED/ REHAB PAIN
MEDICINE***

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

**PHYSICAL MEDICINE /
REHABILITATION**

CUSHING, JAMES, MD

Provider ID: N/A

27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

CUSHING, JAMES, MD

Provider ID: N/A

27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

CUSHING, JAMES, MD

Provider ID: N/A

27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691

Effective as of 01-APR-11

FADAVI, HAMID, DO

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

FADAVI, HAMID, DO

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-NOV-21

FADAVI, HAMID, DO

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

FADAVI, HAMID, DO

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-DEC-21

FADAVI, HAMID, DO

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-NOV-21

FADAVI, HAMID, DO

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-DEC-21

HANJAN, TIVA, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-FEB-18

KIM, BONNIE, MD†

Provider ID: N/A

26302 LA PAZ RD STE 106
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

KIM, BONNIE, MD†

Provider ID: N/A

26302 LA PAZ RD STE 106
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21

KIM, BONNIE, MD†

Provider ID: N/A

26302 LA PAZ RD STE 106
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21

KING, FRANK, MD

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-JAN-16

KING, FRANK, MD

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

RANJBARAN, ZIBA, MD†

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

RANJBARAN, ZIBA, MD†

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

WASHBURN, NEAL, DO

Provider ID: N/A

26401 CROWN VALLEY

PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JAN-24

WASHBURN, NEAL, DO

Provider ID: N/A
26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JAN-24

PHYSICIANS ASSISTANT

KENNEDY, KATHRYN, PA

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

KISCADEN, LAUREN, PA

Provider ID: N/A
26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

KISCADEN, LAUREN, PA

Provider ID: N/A
26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

KISCADEN, LAUREN, PA

Provider ID: N/A
26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

KISCADEN, LAUREN, PA

Provider ID: N/A
26726 CROWN VALLEY
PKWY STE 200

MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

KISCADEN, LAUREN, PA

Provider ID: N/A
26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

KISCADEN, LAUREN, PA

Provider ID: N/A
26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

KISCADEN, LAUREN, PA

Provider ID: N/A
26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

KISCADEN, LAUREN, PA†

Provider ID: N/A
26051 ACERO STE 100
MISSION VIEJO, CA 92691*
Effective as of 01-FEB-22

KISCADEN, LAUREN, PA†

Provider ID: N/A
26051 ACERO STE 100
MISSION VIEJO, CA 92691*
Effective as of 01-FEB-22

NOJAN, JOSEPH, PA

Provider ID: N/A
26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

NOJAN, JOSEPH, PA

Provider ID: N/A
26024 ACERO

MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

NOJAN, JOSEPH, PA

Provider ID: N/A
26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

PARK, SUNG, PA

Provider ID: N/A
26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

PARK, SUNG, PA

Provider ID: N/A
26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

SOBHANIAN, SHAHAB, PA

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

SOBHANIAN, SHAHAB, PA

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

TERRERI, NATALIE, PA

Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

PODIATRIST

DAL PORTO-KUJANPAA,

STEPHANIE, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

**DAL PORTO-KUJANPAA,
STEPHANIE, DPM**

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

**DAL PORTO-KUJANPAA,
STEPHANIE, DPM**

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 420
MISSION VIEJO, CA 92691
Effective as of 01-JUN-20

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 420
MISSION VIEJO, CA 92691
Effective as of 01-JUN-20

GOLSHAHI, BAHAR, DPM

Provider ID: N/A

26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

GOLSHAHI, BAHAR, DPM

Provider ID: N/A

26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

HAIDER, SANDRA, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

HAIDER, SANDRA, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

HAIDER, SANDRA, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

HEHE, KYLE, DPM

Provider ID: N/A

26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-AUG-23

HEHE, KYLE, DPM

Provider ID: N/A

26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-AUG-23

MCCANN, JAN, DPM

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 485
MISSION VIEJO, CA 92691
Effective as of 01-AUG-19

MCGRATH, BENJAMIN, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

MCGRATH, BENJAMIN, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

MCGRATH, BENJAMIN, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

MCGRATH, BENJAMIN, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

MCGRATH, BENJAMIN, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

MCGRATH, BENJAMIN, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

MCGRATH, BENJAMIN, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317

MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

MCGRATH, BENJAMIN, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

NGUYEN, HAN, DPM†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

NGUYEN, HAN, DPM†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

NGUYEN, HAN, DPM†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

NOSRATI, SAM, DPM†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 420
MISSION VIEJO, CA 92691
Effective as of 01-NOV-19

NOSRATI, SAM, DPM†

Provider ID: N/A

26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

NOSRATI, SAM, DPM†

Provider ID: N/A

26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

PENERA, KEITH, DPM†

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

RAMBACHER, THOMAS, DPM†

Provider ID: N/A

26302 LA PAZ RD STE 101
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

RAMBACHER, THOMAS, DPM†

Provider ID: N/A

26302 LA PAZ RD STE 101
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

RAMBACHER, THOMAS, DPM†

Provider ID: N/A

26302 LA PAZ RD STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

RAMBACHER, THOMAS, DPM†

Provider ID: N/A

26302 LA PAZ RD STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

SCHMALHAUS, MONTE, DPM

Provider ID: N/A

26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

SCHMALHAUS, MONTE, DPM

Provider ID: N/A

26691 PLAZA STE 201

MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

SPENCER, ROBERT, DPM†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 110
MISSION VIEJO, CA 92691
Effective as of 01-JAN-16

PSYCHIATRY

ANOSHIVANI, ARDE, MD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

ANOSHIVANI, ARDE, MD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

BENESCH, ERIN, DO†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

BENESCH, ERIN, DO†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

DENNIS, TSHEKEDI, MD†

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

DENNIS, TSHEKEDI, MD†

Provider ID: N/A

26024 ACERO

MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

SHREIBA, MOHAMMED, MD†

Provider ID: N/A
26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

SHREIBA, MOHAMMED, MD†

Provider ID: N/A
26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

SHREIBA, MOHAMMED, MD†

Provider ID: N/A
26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

SHREIBA, MOHAMMED, MD†

Provider ID: N/A
26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

PSYCHOLOGIST

FRANCIS, CATHERINE, PSYD

Provider ID: N/A
26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

FRANCIS, CATHERINE, PSYD

Provider ID: N/A
26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

FRANCIS, CATHERINE, PSYD

Provider ID: N/A
26051 ACERO STE 100
MISSION VIEJO, CA 92691

Effective as of 01-AUG-21

FRANCIS, CATHERINE, PSYD

Provider ID: N/A
26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

FRANCIS, CATHERINE, PSYD

Provider ID: N/A
26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21

FRANCIS, CATHERINE, PSYD

Provider ID: N/A
26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

HAMILTON, JOANNE, PhD

Provider ID: N/A
26440 LA ALAMEDA STE
220
MISSION VIEJO, CA 92691
Effective as of 01-NOV-18

HAMILTON, JOANNE, PhD

Provider ID: N/A
26440 LA ALAMEDA STE
220
MISSION VIEJO, CA 92691
Effective as of 01-NOV-18

HAMILTON, JOANNE, PhD

Provider ID: N/A
26440 LA ALAMEDA STE
220
MISSION VIEJO, CA 92691
Effective as of 01-NOV-18

HAMILTON, JOANNE, PhD

Provider ID: N/A
26440 LA ALAMEDA STE
220

MISSION VIEJO, CA 92691
Effective as of 01-NOV-18

HANDLEY, KAREN, PhD

Provider ID: N/A
26441 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

HANDLEY, KAREN, PhD

Provider ID: N/A
26441 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

HANDLEY, KAREN, PhD

Provider ID: N/A
26441 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

HANDLEY, KAREN, PhD

Provider ID: N/A
26441 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

KIENZLE, HELEN, PhD†

Provider ID: N/A
26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

KIENZLE, HELEN, PhD†

Provider ID: N/A
26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

KUECHLE, RALPH, PhD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

KUECHLE, RALPH, PhD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

KUECHLE, RALPH, PhD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

KUECHLE, RALPH, PhD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

MARCUS, DEKE, PhD

Provider ID: N/A

27201 PUERTA REAL STE
300
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

MARCUS, DEKE, PhD

Provider ID: N/A

27201 PUERTA REAL STE
300
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

MELE, ANTHONY, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21

MELE, ANTHONY, PSYD†

Provider ID: N/A

26051 ACERO STE 100

MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MELE, ANTHONY, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MELE, ANTHONY, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MELE, ANTHONY, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MELE, ANTHONY, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21

MONTEL, SEBASTIEN, PhD†

Provider ID: N/A

27201 PUERTA REAL STE
300
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

MONTEL, SEBASTIEN, PhD†

Provider ID: N/A

27201 PUERTA REAL STE
300
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

MONTEL, SEBASTIEN, PhD†

Provider ID: N/A

27201 PUERTA REAL STE
300

MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

MONTEL, SEBASTIEN, PhD†

Provider ID: N/A

27201 PUERTA REAL STE
300
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

REZNICK, HARRELL, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

REZNICK, HARRELL, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

REZNICK, HARRELL, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

REZNICK, HARRELL, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

SEIDER, TALIA, PhD

Provider ID: N/A

26440 LA ALAMEDA STE
220
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

SEIDER, TALIA, PhD

Provider ID: N/A

26440 LA ALAMEDA STE
220

MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

SEIDER, TALIA, PhD

Provider ID: N/A

26440 LA ALAMEDA STE
220
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

SEIDER, TALIA, PhD

Provider ID: N/A

26440 LA ALAMEDA STE
220
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

ZAYAT, DINA, PSYD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

ZAYAT, DINA, PSYD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

ZAYAT, DINA, PSYD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

ZAYAT, DINA, PSYD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

PULMONARY DISEASES

GOLDBERG, ROBERT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

GOMEZ, GABRIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

GOMEZ, GABRIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

QURESHI, TAUSEEF, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-JUL-15

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-OCT-99

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691

Effective as of 01-MAY-12

TAMMELIN, BRUCE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

TAMMELIN, BRUCE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-08

TAMMELIN, BRUCE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

RADIATION ONCOLOGY

CHOU, WILLIAM, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

CHOU, WILLIAM, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

CHOU, WILLIAM, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD

STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

CHOU, WILLIAM, MD†

Provider ID: N/A
27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

CHOU, WILLIAM, MD†

Provider ID: N/A
27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-20

CHOU, WILLIAM, MD†

Provider ID: N/A
27800 MEDICAL CENTER
RD STE 160
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

DOGGETT, STEPHEN, MD†

Provider ID: N/A
27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

FENG, CHU-PEI, MD†

Provider ID: N/A
27700 MEDICAL CENTER
RD STE 2
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

FENG, CHU-PEI, MD†

Provider ID: N/A
27700 MEDICAL CENTER
RD STE 2

MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

FENG, CHU-PEI, MD†

Provider ID: N/A
27700 MEDICAL CENTER
RD STE 2
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

FENG, CHU-PEI, MD†

Provider ID: N/A
27700 MEDICAL CENTER
RD STE 2
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

LEE, SHARON, MD†

Provider ID: N/A
27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

LIU, GENE FU, MD†

Provider ID: N/A
27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

LIU, GENE FU, MD†

Provider ID: N/A
27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21

LIU, GENE FU, MD†

Provider ID: N/A
27799 MEDICAL CENTER
RD
STE 120

MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

LIU, GENE FU, MD†

Provider ID: N/A
27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

YOUNG, CAROLYN, MD†

Provider ID: N/A
27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

YOUNG, CAROLYN, MD†

Provider ID: N/A
27800 MEDICAL CENTER
RD STE 160
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

RHEUMATOLOGY

CASTRO RUEDA, HERNAN, MD†

Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-AUG-17

DRIVER, CATHERINE, MD

Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

DRIVER, CATHERINE, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

FARSHAMI, FATEMEH, MD

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

KOVACS, DAVID, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-APR-16

PHILIPOSE, JAYA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-APR-16

PHILIPOSE, JAYA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-APR-16

SINGH, SIMRANJIT, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

SINGH, SIMRANJIT, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691

Effective as of 01-SEP-19

SURGERY

CARDIOVASCULAR

FOWLER, AARON, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691

Effective as of 01-OCT-20

SAFFARZADEH, AREO, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

SAFFARZADEH, AREO, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

TANG, TAYLOR, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 461
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

TANG, TAYLOR, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 461
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

THIBAUT, WILLIAM, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-21

THIBAUT, WILLIAM, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-19

THIBAUT, WILLIAM, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-21

THIBAUT, WILLIAM, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-19

THIBAUT, WILLIAM, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-19

THIBAUT, WILLIAM, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-19

WON, EUGENE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

WON, EUGENE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

WON, EUGENE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226

MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

WON, EUGENE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

***SURGERY COLON
SURGERY***

BRADY, MATTHEW, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

BRADY, MATTHEW, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

BRADY, MATTHEW, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

BRADY, MATTHEW, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

BRADY, MATTHEW, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21

BRADY, MATTHEW, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21

BRADY, MATTHEW, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21

BRADY, MATTHEW, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

BRADY, MATTHEW, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

SURGERY CRITICAL CARE

YU, PETER, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

SURGERY GENERAL

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JAN-22

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351

MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

ANDERSON, MARLA, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

ANDERSON, MARLA, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

ANDERSON, MARLA, MD†

Provider ID: N/A

26732 CROWN VALLEY

PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

ANDERSON, MARLA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ANDERSON, MARLA, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

ANDERSON, MARLA, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

ANDERSON, MARLA, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

ANDERSON, MARLA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

BACON, LOUISE, MD†

Provider ID: N/A

27799 MEDICAL CENTER

RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

BACON, LOUISE, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

BACON, LOUISE, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

BACON, LOUISE, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

BACON, LOUISE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

BACON, LOUISE, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

BACON, LOUISE, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21

BRADY, MATTHEW, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

BRADY, MATTHEW, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

BRADY, MATTHEW, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

KUSHNER, KENNETH, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

KUSHNER, KENNETH, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

KUSHNER, KENNETH, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

KUSHNER, KENNETH, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

KUSHNER, KENNETH, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

KUSHNER, KENNETH, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

KUSHNER, KENNETH, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

LAM, VINH, MD†

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-DEC-18

ROBERTSON, ELSIE, MD

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

ROBERTSON, ELSIE, MD

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440

MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

SHAVER, JOHN, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

**SURGERY
NEUROLOGICAL**

KIM, KEUN YOUNG, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-15

KIM, KEUN YOUNG, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-15

KIM, KEUN YOUNG, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-15

KIM, KEUN YOUNG, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-15

LIAUW, JASON, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 561
MISSION VIEJO, CA 92691
Effective as of 01-APR-16

MAGGE, SURESH, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

MEHTA, VIVEK, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541

MISSION VIEJO, CA 92691
Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21

MUHONEN, MICHAEL, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

NWAGWU, CHIEDOZIE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-AUG-23

NWAGWU, CHIEDOZIE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-AUG-23

NWAGWU, CHIEDOZIE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-AUG-23

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-DEC-22

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541

MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-NOV-16

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-NOV-16

TAGHVA, ALEXANDER, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-AUG-15

TAGHVA, ALEXANDER, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-AUG-15

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY

PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

SURGERY ORTHOPEDIC

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-NOV-07

BURDI, MICHAEL, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-APR-12

BURDI, MICHAEL, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

CHEN, JAMES, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

CHEN, JAMES, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

CLAVERIA, RICHARD, MD

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691

Effective as of 01-MAR-20

CLAVERIA, RICHARD, MD

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691

Effective as of 01-MAR-20

DOBYNS, JEFFREY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-SEP-15

DUGGAN, DANIEL, DO†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-SEP-19

DUGGAN, DANIEL, DO†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

DUGGAN, DANIEL, DO†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-NOV-20

DUGGAN, DANIEL, DO†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-JAN-21

DUGGAN, DANIEL, DO†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-JAN-21

ELZIK, MARK, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-NOV-14

ELZIK, MARK, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-DEC-14

ELZIK, MARK, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-NOV-23

FITZPATRICK, MICHAEL, MD†

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-SEP-10

FITZPATRICK, MICHAEL, MD†

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-DEC-23

FITZPATRICK, MICHAEL, MD†

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-DEC-23

FITZPATRICK, MICHAEL, MD†

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-JUL-07

GARDNER, STEPHEN, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-DEC-14

GARDNER, STEPHEN, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-DEC-14

GUERRERO, EVAN, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-NOV-21

GUERRERO, EVAN, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-NOV-21

GVOZDYEV, BORYS, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100

MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100

MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100

MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100

MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

HANJAN, TIVA, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101

MISSION VIEJO, CA 92691
Effective as of 01-FEB-18

HUO, KEUN-HENG, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100

MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100

MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100

MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100

MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100

MISSION VIEJO, CA 92691
Effective as of 01-APR-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100

MISSION VIEJO, CA 92691
Effective as of 01-APR-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100

MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100

MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

27725 SANTA MARGARITA

PKWY STE 100

MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100

MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230

MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230

MISSION VIEJO, CA 92691
Effective as of 01-OCT-12

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230

MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230

MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230

MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230

MISSION VIEJO, CA 92691

Effective as of 01-APR-08

MAJUMDAR, ADITI, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-MAY-22

MAJUMDAR, ADITI, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-MAY-22

MARANGI, KENT, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-APR-12

MARANGI, KENT, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-JUL-12

MISAGHI, AMIRHOSSEIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-SEP-19

MISAGHI, AMIRHOSSEIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-DEC-19

MISAGHI, AMIRHOSSEIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-DEC-19

MORRIS, JOHN, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-APR-12

MORRIS, JOHN, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-JUL-12

PARK, SAMUEL, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-DEC-14

PARK, SAMUEL, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-DEC-23

PARK, SAMUEL, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-DEC-23

PARK, SAMUEL, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-NOV-14

PODOLSKY, ANATOL, MD†

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691

Effective as of 01-NOV-20

PODOLSKY, ANATOL, MD†

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691

Effective as of 01-NOV-20

PODOLSKY, ANATOL, MD†

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691

Effective as of 01-DEC-20

PODOLSKY, ANATOL, MD†

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691

Effective as of 01-DEC-20

PODOLSKY, ANATOL, MD†

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691

Effective as of 01-DEC-20

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-MAR-21

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-MAR-23

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-MAR-23

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-NOV-20

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-NOV-20

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-SEP-19

ROSENFELD, SAMUEL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-OCT-12

ROSENFELD, SAMUEL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-MAR-20

ROSENFELD, SAMUEL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-JAN-21

ROSENFELD, SAMUEL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-APR-08

SCHLECHTER, JOHN, DO†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-JUL-20

TOCCI, STEPHEN, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-MAY-23

TOCCI, STEPHEN, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-MAY-23

WANG, WILLIAM, MD†

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-MAR-18

WANG, WILLIAM, MD†

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-MAR-18

WEINERT, CARL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-OCT-12

WEINERT, CARL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-APR-08

WEINERT, CARL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-JAN-17

SURGERY PEDIATRIC

GERMAN, JOHN, MD†

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691

Effective as of 01-MAR-18

LAM, VINH, MD†

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691

Effective as of 01-SEP-17

LAM, VINH, MD†

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691

Effective as of 01-SEP-17

LAM, VINH, MD†

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

LAM, VINH, MD†

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JUL-17

LAM, VINH, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 138
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

SURGERY PLASTIC

LEE, MICHAEL, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 410
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

SURGERY THORACIC

SAFFARZADEH, AREO, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

SAFFARZADEH, AREO, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

TANG, TAYLOR, MD†

Provider ID: N/A

26732 CROWN VALLEY

PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-NOV-16

TANG, TAYLOR, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-NOV-16

TANG, TAYLOR, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-NOV-16

TANG, TAYLOR, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-NOV-16

WON, EUGENE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

WON, EUGENE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

WON, EUGENE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

WON, EUGENE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

WON, EUGENE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

WON, EUGENE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

UROLOGY

BUI, DON, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

BUI, DON, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

BUI, DON, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

BUI, DON, MD†

Provider ID: N/A

26691 PLAZA STE 120

MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

BUI, DON, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

CHAMBERLIN, DAVID, MD

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

CHAMBERLIN, DAVID, MD

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

GRUENENFELDER, JENNIFER, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

HO, TAMMY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

HO, TAMMY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

HO, TAMMY, MD†

Provider ID: N/A

26800 CROWN VALLEY

PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

HO, TAMMY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

HO, TAMMY, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

HO, TAMMY, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

HO, TAMMY, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

HO, TAMMY, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

HO, TAMMY, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

KIM, MOSES, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

KIM, MOSES, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

KIM, MOSES, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

KIM, MOSES, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

KIM, MOSES, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

KIM, MOSES, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

KIM, MOSES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-DEC-19

KIM, MOSES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-DEC-19

MEAGLIA, JAMES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JAN-21

MEAGLIA, JAMES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-SEP-18

MEAGLIA, JAMES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-SEP-18

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-JUN-22

MEAGLIA, JAMES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JUN-18

MEAGLIA, JAMES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JUN-18

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120

MISSION VIEJO, CA 92691

Effective as of 01-JAN-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-JUN-22

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

NAKAMURA, LEAH, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

NAKAMURA, LEAH, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

NAKAMURA, LEAH, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

NAKAMURA, LEAH, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

NAKAMURA, LEAH, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

NAKAMURA, LEAH, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

NAKAMURA, LEAH, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

NAKAMURA, LEAH, MD

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

NAKAMURA, LEAH, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

NAKAMURA, LEAH, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

NAKAMURA, LEAH, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

PASIN, ERIK, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 445
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

RANDALL, JOSH, MD

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

RANDALL, JOSH, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

RANDALL, JOSH, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

RANDALL, JOSH, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

RANDALL, JOSH, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

RANDALL, JOSH, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

RANDALL, JOSH, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

SINGH, KARAN, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

SINGH, KARAN, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

SINGH, KARAN, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

SINGH, KARAN, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

SINGH, KARAN, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

SINGH, KARAN, MD†

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

SINGH, KARAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

SINGH, KARAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

SINGH, KARAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

SINGH, KARAN, MD†

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

SINGH, KARAN, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

SINGH, KARAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

SINGH, KARAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

SINGH, KARAN, MD†

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

SPITZ, AARON, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

SPITZ, AARON, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

SPITZ, AARON, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

SPITZ, AARON, MD†

Provider ID: N/A

26800 CROWN VALLEY

PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

SPITZ, AARON, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

SPITZ, AARON, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

SPITZ, AARON, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

SPITZ, AARON, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

SPITZ, AARON, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

STEPHANY, HEIDI, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JAN-24

SU, DANIEL, MD

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

SU, DANIEL, MD

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

SU, DANIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

SU, DANIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

SU, DANIEL, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

SU, DANIEL, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

SU, DANIEL, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

SU, DANIEL, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

SU, DANIEL, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

ALLERGY IMMUNOLOGY

IMAM, ASIF, MD

Provider ID: N/A

40680 CALIFORNIA OAKS
RD STE 1A
MURRIETA, CA 92562
Effective as of 01-MAR-23

IMAM, ASIF, MD

Provider ID: N/A

40680 CALIFORNIA OAKS
RD STE 1A
MURRIETA, CA 92562
Effective as of 01-MAR-23

IMAM, ASIF, MD

Provider ID: N/A

40680 CALIFORNIA OAKS
RD STE 1A
MURRIETA, CA 92562
Effective as of 01-MAR-23

ANESTHESIOLOGY

BAKER, BRUCE, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-AUG-22

DRUET, JACK, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 102
MURRIETA, CA 92562
Effective as of 01-JUL-23

KRAUSE, MARTIN, MD†

Provider ID: N/A

25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
Effective as of 01-FEB-22

ANESTHESIOLOGY PAIN MANAGEMENT

AUSTIN, MARK, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 102
MURRIETA, CA 92562
Effective as of 01-JUL-23

BETTS, ANDRES, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

BETTS, ANDRES, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

KELLING, JONATHAN, MD†

Provider ID: N/A

38860 SKY CANYON DR
BLDG A
MURRIETA, CA 92563
Effective as of 01-JUL-23

KELLING, JONATHAN, MD†

Provider ID: N/A

38860 SKY CANYON DR
BLDG A
MURRIETA, CA 92563
Effective as of 01-DEC-18

KHATIBI, NIKAN, DO†

Provider ID: N/A

24910 LAS BRISAS RD STE
121
MURRIETA, CA 92562
Effective as of 01-SEP-22

CARDIAC ELECTROPHYSIOLOGY

MESSENGER, BRADLEY, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-MAY-20

OSHODI, GANIYU, MD†

Provider ID: N/A

40700 CALIFORNIA OAKS
RD STE 208
MURRIETA, CA 92562*
Effective as of 01-JUL-23

OSHODI, GANIYU, MD†

Provider ID: N/A

40700 CALIFORNIA OAKS
RD STE 208
MURRIETA, CA 92562
Effective as of 01-FEB-19

CARDIOLOGY

AL KHIAMI, BELAL, MD†

Provider ID: N/A

28062 BAXTER RD
MURRIETA, CA 92563
Effective as of 01-JAN-21

AMIN, JATIN, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-JAN-19

ATTIA, NADER, DO⁺

Provider ID: N/A

39755 MURRIETA HOT SPRINGS RD BLDG G MURRIETA, CA 92563

Teleservice

Effective as of 01-APR-17

ATTIA, NADER, DO⁺

Provider ID: N/A

39755 MURRIETA HOT SPRINGS RD BLDG G MURRIETA, CA 92563

Teleservice

Effective as of 01-JAN-19

MESSINGER, BRADLEY, MD⁺

Provider ID: N/A

39755 MURRIETA HOT SPRINGS RD BLDG G MURRIETA, CA 92563

Teleservice

Effective as of 01-FEB-22

MESSINGER, BRADLEY, MD⁺

Provider ID: N/A

39755 MURRIETA HOT SPRINGS RD BLDG G MURRIETA, CA 92563

Teleservice

Effective as of 01-JAN-19

PATANKAR, KAUSTUBH, MD⁺

Provider ID: N/A

39755 MURRIETA HOT SPRINGS RD BLDG G MURRIETA, CA 92563

Effective as of 01-JAN-19

SANGODKAR, SANDEEP, DO⁺

Provider ID: N/A

39755 MURRIETA HOT SPRINGS RD BLDG G MURRIETA, CA 92563

Effective as of 01-JAN-19

SCHWARZ, ERNST, MD⁺

Provider ID: N/A

39755 DATE ST STE 205 MURRIETA, CA 92563

Effective as of 01-SEP-22

SCHWARZ, ERNST, MD⁺

Provider ID: N/A

39755 DATE ST STE 205 MURRIETA, CA 92563

Effective as of 01-SEP-22

CARDIOVASCULAR DISEASE

ALTURJUMAN, AHMAD, MD⁺

Provider ID: N/A

29995 TECHNOLOGY DR STE 302 MURRIETA, CA 92563

Effective as of 01-MAR-22

ALTURJUMAN, AHMAD, MD⁺

Provider ID: N/A

29995 TECHNOLOGY DR STE 302 MURRIETA, CA 92563

Effective as of 01-MAR-22

ALTURJUMAN, AHMAD, MD⁺

Provider ID: N/A

29995 TECHNOLOGY DR STE 302 MURRIETA, CA 92563

Effective as of 01-JUL-22

ALTURJUMAN, AHMAD, MD⁺

Provider ID: N/A

40700 CALIFORNIA OAKS RD STE 208 MURRIETA, CA 92562

Effective as of 01-NOV-22

AMIN, JATIN, MD⁺

Provider ID: N/A

39755 MURRIETA HOT SPRINGS RD BLDG G MURRIETA, CA 92563

Teleservice

Effective as of 01-AUG-20

ATTIA, NADER, DO⁺

Provider ID: N/A

39755 MURRIETA HOT SPRINGS RD BLDG G MURRIETA, CA 92563

Teleservice

Effective as of 01-MAY-21

ATTIA, NADER, DO⁺

Provider ID: N/A

39755 MURRIETA HOT SPRINGS RD BLDG G MURRIETA, CA 92563

Teleservice

Effective as of 01-MAY-20

ATTIA, NADER, DO⁺

Provider ID: N/A

39755 MURRIETA HOT SPRINGS RD BLDG G MURRIETA, CA 92563

Teleservice

Effective as of 01-MAR-20

ATTIA, NADER, DO⁺

Provider ID: N/A

39755 MURRIETA HOT SPRINGS RD BLDG G MURRIETA, CA 92563

Teleservice

Effective as of 01-JUL-22

ATTIA, NADER, DO⁺

Provider ID: N/A

39755 MURRIETA HOT SPRINGS RD BLDG G

MURRIETA, CA 92563
Teleservice
Effective as of 01-SEP-18

BISWAS, MIMI, MD†

Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-FEB-17

BISWAS, MIMI, MD†

Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-FEB-17

BISWAS, MIMI, MD†

Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-FEB-17

BISWAS, MIMI, MD†

Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-FEB-17

BISWAS, MIMI, MD†

Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-FEB-17

COLLINS, BRIAN, MD†

Provider ID: N/A
40700 CALIFORNIA OAKS
RD STE 208
MURRIETA, CA 92562
Effective as of 01-NOV-22

COX, JEREMY, DO

Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Effective as of 01-NOV-23

COX, JEREMY, DO

Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Effective as of 01-NOV-23

COX, JEREMY, DO

Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Effective as of 01-NOV-23

COX, JEREMY, DO

Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Effective as of 01-NOV-23

COX, JEREMY, DO

Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Effective as of 01-MAR-24

COX, JEREMY, DO

Provider ID: N/A
39755 MURRIETA HOT

SPRINGS RD BLDG G
MURRIETA, CA 92563
Effective as of 01-MAR-24

MESSENGER, BRADLEY, MD†

Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-AUG-20

MUKHERJEE, ASHIS, MD†

Provider ID: N/A
28078 BAXTER RD STE 110
MURRIETA, CA 92563*
Effective as of 01-JUL-23

OSHODI, GANIYU, MD

Provider ID: N/A
40770 CALIFORNIA OAKS
RD STE A
MURRIETA, CA 92562
Effective as of 01-MAR-23

OSHODI, GANIYU, MD†

Provider ID: N/A
40700 CALIFORNIA OAKS
RD STE 208
MURRIETA, CA 92562
Effective as of 01-JAN-21

PAREKH, NIRAJ, MD†

Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-AUG-18

PAREKH, NIRAJ, MD†

Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice
Effective as of 01-MAY-20

PAREKH, NIRAJ, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice
Effective as of 01-MAR-20

PAREKH, NIRAJ, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice
Effective as of 01-MAR-20

PAREKH, NIRAJ, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice
Effective as of 01-MAY-21

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Effective as of 01-SEP-18

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Effective as of 01-FEB-22

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A

39755 MURRIETA HOT

SPRINGS RD BLDG G
MURRIETA, CA 92563
Effective as of 01-MAY-20

SANGODKAR, SANDEEP, DO†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Effective as of 01-MAY-20

SCHWARZ, ERNST, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562

Effective as of 01-FEB-21

SCHWARZ, ERNST, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562

Effective as of 01-SEP-21

SCHWARZ, ERNST, MD†

Provider ID: N/A

39755 DATE ST STE 205
MURRIETA, CA 92563

Effective as of 01-AUG-22

SCHWARZ, ERNST, MD†

Provider ID: N/A

39755 DATE ST STE 205
MURRIETA, CA 92563

Effective as of 01-AUG-22

SEAMAN, CHRISTOPHER, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice
Effective as of 01-MAY-20

**CERTIFIED NURSE
PRACTITIONER**

ANDERSON, TRACEY, NP†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-DEC-20

ANDERSON, TRACEY, NP†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-FEB-20

ANDERSON, TRACEY, NP†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-FEB-20

ANDERSON, TRACEY, NP†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-FEB-20

ANDERSON, TRACEY, NP†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-FEB-20

BARBOZA, GEORGE, NP

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD
MURRIETA, CA 92563

Effective as of 01-SEP-22

BARBOZA, GEORGE, NP

Provider ID: N/A

39755 MURRIETA HOT SPRINGS RD
MURRIETA, CA 92563
Effective as of 01-SEP-22

BEDFORD, RONALD, NP†

Provider ID: N/A

25405 HANCOCK AVE STE 200
MURRIETA, CA 92562
Effective as of 01-SEP-22

BEDFORD, RONALD, NP†

Provider ID: N/A

25405 HANCOCK AVE STE 200
MURRIETA, CA 92562
Effective as of 01-SEP-22

BEDFORD, RONALD, NP†

Provider ID: N/A

25405 HANCOCK AVE STE 200
MURRIETA, CA 92562
Effective as of 01-MAY-22

BEDFORD, RONALD, NP†

Provider ID: N/A

25405 HANCOCK AVE STE 200
MURRIETA, CA 92562
Effective as of 01-MAY-22

BEDFORD, RONALD, NP†

Provider ID: N/A

25405 HANCOCK AVE STE 200
MURRIETA, CA 92562
Effective as of 01-MAY-22

CAMPBELL, AMBER, NP

Provider ID: N/A

25470 MEDICAL CENTER

DR STE 102
MURRIETA, CA 92562
Effective as of 01-JAN-22

CORCORAN, KIMBERLY, NP

Provider ID: N/A

24910 LAS BRISAS RD STE 105
MURRIETA, CA 92562
Effective as of 01-OCT-19

DAO, NU, NP†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-MAR-21

DONLON, RYAN, NPF

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-MAR-24

FAIQ, JAMILA, NP†

Provider ID: N/A

25405 HANCOCK AVE STE 206

MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-22

GUTIERREZ, CRYSTAL, NP†

Provider ID: N/A

25109 JEFFERSON AVE STE 100
MURRIETA, CA 92562
Effective as of 01-AUG-20

HARTMAN, JULIE, NPF

Provider ID: N/A

25470 MEDICAL CENTER DR STE 102
MURRIETA, CA 92562
Effective as of 01-SEP-23

HASAN, BUSHRA, NP

Provider ID: N/A

25470 MEDICAL CENTER DR STE 102
MURRIETA, CA 92562
Effective as of 01-OCT-22

HUERTA, CARMEN, NP†

Provider ID: N/A

25405 HANCOCK AVE STE 200
MURRIETA, CA 92562
Effective as of 01-MAY-22

HUERTA, CARMEN, NP†

Provider ID: N/A

25405 HANCOCK AVE STE 200
MURRIETA, CA 92562
Effective as of 01-OCT-22

HUERTA, CARMEN, NP†

Provider ID: N/A

25405 HANCOCK AVE STE 200
MURRIETA, CA 92562
Effective as of 01-DEC-22

KLEWEIN, CRYSTAL, NPF

Provider ID: N/A

40770 CALIFORNIA OAKS
RD STE A
MURRIETA, CA 92562

Effective as of 01-MAY-23

KULJIAN, NANCY, NP

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD STE E
MURRIETA, CA 92563

Effective as of 01-AUG-21

MOONEY, PATRICIA, NP†

Provider ID: N/A

25405 HANCOCK AVE STE
206
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAY-21

MWAURA, WAIRIMU, NP†

Provider ID: N/A

25405 HANCOCK AVE STE
206
MURRIETA, CA 92562

Teleservice

Effective as of 01-JUN-21

PIZZIFRED, TIFFINY, NP†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562

Effective as of 01-JAN-18

PIZZIFRED, TIFFINY, NP†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562

Effective as of 01-JAN-18

SHEIKH, SARAH, NP

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-OCT-16

SHEIKH, SARAH, NP

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-MAY-23

SHEIKH, SARAH, NP

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-MAY-23

SICKELS, JENNIFER, NP

Provider ID: N/A

24910 LAS BRISAS RD STE
105
MURRIETA, CA 92562

Effective as of 01-NOV-19

VIERA, LIANA, NP†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD
MURRIETA, CA 92563

Effective as of 01-JAN-22

VIERA, LIANA, NP†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD
MURRIETA, CA 92563

Effective as of 01-JAN-22

WILLEY, MARTI, NP†

Provider ID: N/A

25405 HANCOCK AVE STE
206
MURRIETA, CA 92562

Teleservice

Effective as of 01-JUN-21

DERMATOLOGY

CABRAL, ERIK, MD†

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562

Effective as of 01-JUN-22

FOWLER, VINCENT, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562

Effective as of 01-FEB-24

FOWLER, VINCENT, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562

Effective as of 01-FEB-24

FOWLER, VINCENT, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562

Teleservice

Effective as of 01-AUG-17

FOWLER, VINCENT, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562

Teleservice

Effective as of 01-NOV-18

KHERADMAND, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200

MURRIETA, CA 92562
Effective as of 01-MAY-23

KHERADMAND, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-MAY-22

KHERADMAND, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-MAY-22

KHERADMAND, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-DEC-21

KOUPAIE, JAFAR, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

KOUPAIE, JAFAR, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

KOUPAIE, JAFAR, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

KOUPAIE, JAFAR, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

LEE, HELEN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-22

LEE, HELEN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-22

MITCHELL, JESSE, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

MITCHELL, JESSE, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

MITCHELL, JESSE, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

MITCHELL, JESSE, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

MUNYON, THOMAS, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Teleservice
Effective as of 01-MAY-23

MUNYON, THOMAS, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Teleservice
Effective as of 01-JAN-23

MUNYON, THOMAS, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Teleservice
Effective as of 01-MAR-24

MUNYON, THOMAS, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-21

ROSHDIEH, BABAK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE 200
MURRIETA, CA 92562

Effective as of 01-JUL-23

ROSHDIEH, BABAK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE 200
MURRIETA, CA 92562

Effective as of 01-MAY-23

SAIED, NAGI, MD†

Provider ID: N/A

25405 HANCOCK AVE STE 217
MURRIETA, CA 92562

Teleservice

Effective as of 01-NOV-18

SAIED, NAGI, MD†

Provider ID: N/A

25405 HANCOCK AVE STE 200
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAY-23

SAIED, NAGI, MD†

Provider ID: N/A

25405 HANCOCK AVE STE 200
MURRIETA, CA 92562

Teleservice

Effective as of 01-DEC-19

SAIED, NAGI, MD†

Provider ID: N/A

25405 HANCOCK AVE STE 200
MURRIETA, CA 92562

Teleservice

Effective as of 01-NOV-21

SIRICHOTIRATANA, MELISSA, MD†

Provider ID: N/A

25495 MEDICAL CENTER DR STE 200
MURRIETA, CA 92562

Effective as of 01-JUL-22

TAHERI, DANIEL, MD†

Provider ID: N/A

40663 MURRIETA HOT SPRINGS RD STE C3
MURRIETA, CA 92562

Teleservice

Effective as of 01-APR-21

TAHERI, DANIEL, MD†

Provider ID: N/A

40663 MURRIETA HOT SPRINGS RD STE C3
MURRIETA, CA 92562

Teleservice

Effective as of 01-APR-21

TAHERI, DANIEL, MD†

Provider ID: N/A

40663 MURRIETA HOT SPRINGS RD STE C3
MURRIETA, CA 92562

Teleservice

Effective as of 01-DEC-21

THIELE, JENS, MD†

Provider ID: N/A

25495 MEDICAL CENTER DR STE 200
MURRIETA, CA 92562

Effective as of 01-JUL-22

VENKAT, ARUN, MD†

Provider ID: N/A

25495 MEDICAL CENTER

DR STE 200

MURRIETA, CA 92562

Effective as of 01-FEB-21

ENDOCRINOLOGY

METABOLISM DIABETES

BUI, AMY-VAN, MD†

Provider ID: N/A

39765 DATE ST STE 102
MURRIETA, CA 92563

Effective as of 01-NOV-13

FAMILY PRACTICE

FARZIN, ABDUL, MD

Provider ID: N/A

40690 CALIFORNIA OAKS RD STE A
MURRIETA, CA 92562

Effective as of 01-MAR-24

MEMON, TALHA, MD†

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563

Effective as of 01-OCT-18

MEMON, TALHA, MD†

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563

Effective as of 01-OCT-18

GASTROENTEROLOGY

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER DR STE 302
MURRIETA, CA 92562

Effective as of 01-MAR-21

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562
Effective as of 01-FEB-18

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562
Effective as of 01-APR-20

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562
Effective as of 01-APR-17

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 101
MURRIETA, CA 92562
Effective as of 01-AUG-20

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562
Effective as of 01-JUL-23

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562
Effective as of 01-SEP-15

ARDIGO, GREGORY, MD†

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-DEC-08

ARDIGO, GREGORY, MD†

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-JUL-23

DINH, JACK, MD†

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-DEC-08

DINH, JACK, MD†

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-OCT-07

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-JUL-23

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAR-21

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-JUL-15

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-APR-17

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-AUG-15

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-APR-20

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-FEB-18

FLANNERY, CHRISTOPHER, MD

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C1
MURRIETA, CA 92562

Effective as of 01-APR-23

FLANNERY, CHRISTOPHER, MD

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C1
MURRIETA, CA 92562
Effective as of 01-APR-23

**FLANNERY, CHRISTOPHER,
MD**

Provider ID: N/A

28078 BAXTER RD STE 530
MURRIETA, CA 92563
Effective as of 01-APR-23

**FLANNERY, CHRISTOPHER,
MD**

Provider ID: N/A

28078 BAXTER RD STE 530
MURRIETA, CA 92563
Effective as of 01-APR-23

NAKKA, SREENIVASA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 306
MURRIETA, CA 92562
Effective as of 01-OCT-16

NAKKA, SREENIVASA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 306
MURRIETA, CA 92562
Effective as of 01-OCT-16

NAKKA, SREENIVASA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 306
MURRIETA, CA 92562
Effective as of 01-OCT-16

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302

MURRIETA, CA 92562

Teleservice

Effective as of 01-APR-17

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-JUL-23

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAY-21

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAY-15

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAY-15

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAR-21

**RAGHUWANSHI, NAISHADH,
MD†**

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 306
MURRIETA, CA 92562

Effective as of 01-MAY-18

**RAGHUWANSHI, NAISHADH,
MD†**

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 306
MURRIETA, CA 92562

Effective as of 01-OCT-16

**RAGHUWANSHI, NAISHADH,
MD†**

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 306
MURRIETA, CA 92562

Effective as of 01-OCT-16

TEYMOORIAN, ARIAN, MD†

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-FEB-20

TEYMOORIAN, ARIAN, MD†

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-SEP-19

GENETICS CLINICAL

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE
210

MURRIETA, CA 92562
Effective as of 01-JUL-19

**HEMATOLOGY /
ONCOLOGY**

AGAJANIAN, RICHY, MD

Provider ID: N/A
25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-JUL-23

ANDREY, JEFFREY, MD

Provider ID: N/A
25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-JUL-23

BASERI, BABAK, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
203
MURRIETA, CA 92562
Effective as of 01-JUL-21

BASERI, BABAK, MD

Provider ID: N/A
25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-APR-24

BASERI, BABAK, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
203
MURRIETA, CA 92562
Effective as of 01-JUL-21

BASERI, BABAK, MD

Provider ID: N/A
25405 HANCOCK AVE STE
101

MURRIETA, CA 92562
Effective as of 01-FEB-24

BASERI, BABAK, MD

Provider ID: N/A
25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-JAN-24

BASERI, BABAK, MD

Provider ID: N/A
25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-APR-23

BASERI, BABAK, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
203
MURRIETA, CA 92562
Effective as of 01-AUG-19

BELLO, OSAGIE, MD

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-OCT-23

BELLO, OSAGIE, MD

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-OCT-23

BELLO, OSAGIE, MD

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-OCT-23

BESSUDO, ALBERTO, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
206
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-21

LEE, BYUNG, DO†

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-JUL-21

LEE, BYUNG, DO†

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-JUL-21

LEE, BYUNG, DO†

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-JUL-21

MARJON, PHILIP, MD

Provider ID: N/A
25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-APR-23

MASIELLO, DAVID, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-MAR-21

MOST, CAROLE, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-MAR-21

MOST, CAROLE, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-SEP-18

MOST, CAROLE, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-SEP-18

MOST, CAROLE, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-SEP-18

NAIK, RAHUL, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-MAR-21

**RAVINDRANATHAN, MEERA,
MD**

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Teleservice

Effective as of 01-MAY-23

**RAVINDRANATHAN, MEERA,
MD**

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAY-23

SARWARI, NAWID, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562*
Effective as of 01-APR-23

SAUNDERS, PHILLIP, DO

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-APR-23

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
203
MURRIETA, CA 92562
Effective as of 01-DEC-20

SCHWERKOSKE, JOHN, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-JUL-23

SHUM, MERRILL, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
203
MURRIETA, CA 92562
Effective as of 01-JUL-23

TSANG, WALTER, MD†

Provider ID: N/A

25404 HANCOCK AVE STE
211

MURRIETA, CA 92562
Effective as of 01-FEB-20

TSANG, WALTER, MD†

Provider ID: N/A

25404 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-FEB-20

TSANG, WALTER, MD†

Provider ID: N/A

25404 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-FEB-20

WANG, AMY, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-JUN-21

WANG, AMY, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-JUN-21

WANG, AMY, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-JUN-21

WANG, AMY, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-JUN-21

INFECTIOUS DISEASE

HARFOUCH, CHAWKI, MD†

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-JUL-23

HARFOUCH, CHAWKI, MD†

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAY-13

KIM, EMILY, MD

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAR-24

KIM, EMILY, MD

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAR-24

KIM, EMILY, MD

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAR-24

LE, THUAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAY-13

LE, THUAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAY-09

LE, THUAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-SEP-09

LE, THUAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-SEP-09

LE, THUAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-JAN-11

INTERNAL MEDICINE

BASERI, BABAK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
203
MURRIETA, CA 92562
Effective as of 01-APR-24

HADDADIN, HASSAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-SEP-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-SEP-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-SEP-22

HARFOUCH, CHAWKI, MD†

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-JUN-17

MONTANA, WILBUR, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
203
MURRIETA, CA 92562
Effective as of 01-NOV-18

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

PATEL, SAGAR, MD†

Provider ID: N/A

25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
Effective as of 01-AUG-21

INTERVENTIONAL

CARDIOLOGY

GAGLANI, RAHUL, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
230
MURRIETA, CA 92562
Effective as of 01-AUG-21

PAREKH, NIRAJ, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-JAN-19

**MATERNAL AND FETAL
MEDICINE**

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE
210

MURRIETA, CA 92562

Effective as of 01-DEC-10

MEDICAL ONCOLOGY

PARSI, HOOMAN, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101

MURRIETA, CA 92562

Effective as of 01-MAY-23

SHAIKH, ANWER, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101

MURRIETA, CA 92562

Effective as of 01-JUL-23

NEPHROLOGY

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE
108

MURRIETA, CA 92562

Effective as of 01-JUL-20

NEUROLOGY

ALVAREZ, PAMELA, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE
115

MURRIETA, CA 92562

Effective as of 01-MAY-14

ALVAREZ, PAMELA, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE
115

MURRIETA, CA 92562

Effective as of 01-MAR-15

NUNE, SUNITHA, MD†

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563

Effective as of 01-FEB-22

TALANKI, VARUN, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204

MURRIETA, CA 92562

Effective as of 01-DEC-22

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE
108

MURRIETA, CA 92562

Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE
108

MURRIETA, CA 92562

Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE
108

MURRIETA, CA 92562

Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE
108

MURRIETA, CA 92562

Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE
108

MURRIETA, CA 92562

Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE
108

MURRIETA, CA 92562

Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE
108

MURRIETA, CA 92562

Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE
108

MURRIETA, CA 92562

Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE
108

MURRIETA, CA 92562

Effective as of 01-AUG-20

NEUROLOGY CHILD

NUNE, SUNITHA, MD†

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563

Effective as of 01-APR-21

OBSTETRICS / GYNECOLOGY

ANDERSEN, MICHAEL, MD†

Provider ID: N/A
 24619 WASHINGTON AVE
 STE 104
 MURRIETA, CA 92562
 Effective as of 01-JAN-21

BINDER, PRATIBHA, MD†

Provider ID: N/A
 25405 HANCOCK AVE STE
 217
 MURRIETA, CA 92562
 Effective as of 01-JUL-21

BRAR, HARBINDER, MD†

Provider ID: N/A
 25109 JEFFERSON AVE STE
 210
 MURRIETA, CA 92562
 Effective as of 01-SEP-23

BRAR, HARBINDER, MD†

Provider ID: N/A
 25109 JEFFERSON AVE STE
 210
 MURRIETA, CA 92562
 Effective as of 01-SEP-23

BRAR, HARBINDER, MD†

Provider ID: N/A
 25109 JEFFERSON AVE STE
 210
 MURRIETA, CA 92562
 Effective as of 01-SEP-23

BRAR, HARBINDER, MD†

Provider ID: N/A
 25109 JEFFERSON AVE STE
 210
 MURRIETA, CA 92562
 Effective as of 01-NOV-08

BRAR, HARBINDER, MD†

Provider ID: N/A
 25109 JEFFERSON AVE STE
 210

MURRIETA, CA 92562
 Effective as of 01-JUL-11

CHIODI, MARTINA, MD†

Provider ID: N/A
 24910 LAS BRISAS RD STE
 113
 MURRIETA, CA 92562
 Effective as of 01-MAR-20

DIMMETTE, PATTIE, MD

Provider ID: N/A
 25405 HANCOCK AVE STE
 203
 MURRIETA, CA 92562
 Effective as of 01-SEP-23

ELFELT, TIMOTHY, MD†

Provider ID: N/A
 25460 MEDICAL CENTER
 DR STE 100
 MURRIETA, CA 92562
 Effective as of 01-AUG-10

HAYTON, TAMMY, MD†

Provider ID: N/A
 25460 MEDICAL CENTER
 DR STE 100
 MURRIETA, CA 92562

Teleservice
 Effective as of 01-AUG-10

HAYTON, TAMMY, MD†

Provider ID: N/A
 25460 MEDICAL CENTER
 DR STE 100
 MURRIETA, CA 92562

Teleservice
 Effective as of 01-SEP-22

JONES, KENDRA, MD†

Provider ID: N/A
 25460 MEDICAL CENTER
 DR STE 100
 MURRIETA, CA 92562

Teleservice
 Effective as of 01-SEP-22

JONES, KENDRA, MD†

Provider ID: N/A
 25460 MEDICAL CENTER
 DR STE 100
 MURRIETA, CA 92562

Teleservice
 Effective as of 01-SEP-22

LEBO, DEBRA, DO†

Provider ID: N/A
 25460 MEDICAL CENTER
 DR STE 100
 MURRIETA, CA 92562
 Effective as of 01-AUG-10

LEBO, DEBRA, DO†

Provider ID: N/A
 25460 MEDICAL CENTER
 DR STE 100
 MURRIETA, CA 92562
 Effective as of 01-SEP-22

LOCASCIO, ELIZABETH, DO†

Provider ID: N/A
 25460 MEDICAL CENTER
 DR STE 100
 MURRIETA, CA 92562

Teleservice
 Effective as of 01-FEB-18

LOCASCIO, ELIZABETH, DO†

Provider ID: N/A
 25460 MEDICAL CENTER
 DR STE 100
 MURRIETA, CA 92562

Teleservice
 Effective as of 01-SEP-22

NEAL, JAMES, MD†

Provider ID: N/A
 25495 MEDICAL CENTER

DR STE 300
MURRIETA, CA 92562
Effective as of 01-JUL-23

QUINATA, FLORENCE, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 300
MURRIETA, CA 92562
Effective as of 01-JUL-23

SHAH, NEMI, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Teleservice
Effective as of 01-FEB-24

SHEHATA, HANNAH LOUISE, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-OCT-21

THOMSON, EMILY, DO

Provider ID: N/A

25460 MEDICAL CENTER
DR
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-22

THOMSON, EMILY, DO

Provider ID: N/A

25460 MEDICAL CENTER
DR
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-22

TODD, CHRISTINE, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 300
MURRIETA, CA 92562
Effective as of 01-JUL-23

TRAN, THERESA, DO

Provider ID: N/A

24910 LAS BRISAS RD STE
113
MURRIETA, CA 92562
Effective as of 01-MAR-20

YANG, CHARLES, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-22

YANG, CHARLES, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562
Teleservice
Effective as of 01-AUG-10

**OCCUPATIONAL
THERAPIST**

BAST, SIDNEY, OT†

Provider ID: N/A

24671 MONROE AVE STE
101
MURRIETA, CA 92562
Effective as of 01-OCT-19

BAST, SIDNEY, OT†

Provider ID: N/A

24671 MONROE AVE STE
101
MURRIETA, CA 92562
Effective as of 01-OCT-19

CATIPON, GABRIELLE, OT

Provider ID: N/A

24671 MONROE AVE STE
C101
MURRIETA, CA 92562
Effective as of 01-MAY-23

CATIPON, GABRIELLE, OT

Provider ID: N/A

24671 MONROE AVE STE
C101
MURRIETA, CA 92562
Effective as of 01-MAY-23

DIMEGLIO, PAUL, OT†

Provider ID: N/A

24671 MONROE AVE STE
101
MURRIETA, CA 92562
Effective as of 01-FEB-21

DIMEGLIO, PAUL, OT†

Provider ID: N/A

24671 MONROE AVE STE
101
MURRIETA, CA 92562
Effective as of 01-FEB-21

STOTLER, APRIL, OT

Provider ID: N/A

24671 MONROE AVE STE
C201
MURRIETA, CA 92562
Effective as of 01-JAN-24

STOTLER, APRIL, OT

Provider ID: N/A

24671 MONROE AVE STE
C201
MURRIETA, CA 92562
Effective as of 01-JAN-24

ZECHA, RICHARD, OT†

Provider ID: N/A

24671 MONROE AVE STE

101 BLDG C
MURRIETA, CA 92562
Effective as of 01-JAN-21

ZECHA, RICHARD, OT†

Provider ID: N/A
24671 MONROE AVE STE
101 BLDG C
MURRIETA, CA 92562
Effective as of 01-JAN-21

OPHTHALMOLOGY

ABBOUD, JEAN-PAUL, MD†

Provider ID: N/A
40700 CALIFORNIA OAKS
RD STE 106
MURRIETA, CA 92562
Effective as of 01-MAR-18

CARLSON, JOHN, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-FEB-21

CARLSON, JOHN, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-FEB-21

CHAWLA, ANUJ, MD†

Provider ID: N/A
40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Effective as of 01-JUL-23

CHIN, ERIC, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
100

MURRIETA, CA 92562
Effective as of 01-JUN-23

CHIN, ERIC, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JUL-19

CHIN, ERIC, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-FEB-21

CHIN, ERIC, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-FEB-21

CHIN, ERIC, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JAN-22

CHOW, JASON, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-FEB-24

CHOW, JASON, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-OCT-22

CHOW, JASON, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-SEP-22

CHOW, JASON, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JUL-23

CHOW, JASON, MD†

Provider ID: N/A
25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JUL-23

CULOTTA, ANTHONY, MD†

Provider ID: N/A
40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-18

CULOTTA, ANTHONY, MD†

Provider ID: N/A
40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-18

CULOTTA, ANTHONY, MD†

Provider ID: N/A
40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-18

CULOTTA, ANTHONY, MD†
 Provider ID: N/A
 40690 CALIFORNIA OAKS
 RD STE B
 MURRIETA, CA 92562
 Teleservice
 Effective as of 01-SEP-18

CULOTTA, ANTHONY, MD†
 Provider ID: N/A
 40690 CALIFORNIA OAKS
 RD STE B
 MURRIETA, CA 92562
 Teleservice
 Effective as of 01-MAY-21

CULOTTA, ANTHONY, MD†
 Provider ID: N/A
 40690 CALIFORNIA OAKS
 RD STE B
 MURRIETA, CA 92562
 Teleservice
 Effective as of 01-NOV-20

DONALDSON, JARED, MD†
 Provider ID: N/A
 25395 HANCOCK AVE STE
 100
 MURRIETA, CA 92562
 Effective as of 01-MAY-21

DONALDSON, JARED, MD†
 Provider ID: N/A
 25395 HANCOCK AVE
 MURRIETA, CA 92562
 Effective as of 01-DEC-22

DONALDSON, JARED, MD†
 Provider ID: N/A
 25395 HANCOCK AVE STE
 100
 MURRIETA, CA 92562
 Effective as of 01-JUL-21

DONALDSON, JARED, MD†

Provider ID: N/A
 25395 HANCOCK AVE STE
 100
 MURRIETA, CA 92562
 Effective as of 01-JUL-21

DONALDSON, JARED, MD†
 Provider ID: N/A
 25395 HANCOCK AVE
 MURRIETA, CA 92562
 Effective as of 01-JAN-23

DONALDSON, JARED, MD†
 Provider ID: N/A
 25395 HANCOCK AVE STE
 100
 MURRIETA, CA 92562
 Effective as of 01-SEP-22

GOLLOGLY, HEIDRUN, MD†
 Provider ID: N/A
 40690 CALIFORNIA OAKS
 RD STE B
 MURRIETA, CA 92562
 Effective as of 01-OCT-17

JOHNSON, ROGER, MD†
 Provider ID: N/A
 25395 HANCOCK AVE STE
 100
 MURRIETA, CA 92562
 Effective as of 01-JAN-17

JOHNSON, ROGER, MD†
 Provider ID: N/A
 25395 HANCOCK AVE STE
 100
 MURRIETA, CA 92562
 Effective as of 01-FEB-22

JOHNSON, ROGER, MD†
 Provider ID: N/A
 25460 MEDICAL CENTER
 DR STE 103
 MURRIETA, CA 92562

Effective as of 01-FEB-22

JOHNSON, ROGER, MD†
 Provider ID: N/A
 25395 HANCOCK AVE STE
 100
 MURRIETA, CA 92562
 Effective as of 01-JAN-22

JOHNSON, ROGER, MD†
 Provider ID: N/A
 25460 MEDICAL CENTER
 DR STE 103
 MURRIETA, CA 92562
 Effective as of 01-JAN-22

JOHNSON, ROGER, MD†
 Provider ID: N/A
 25460 MEDICAL CENTER
 DR STE 103
 MURRIETA, CA 92562
 Effective as of 01-JUL-23

JOSEPH, JEFFREY, MD†
 Provider ID: N/A
 25395 HANCOCK AVE STE
 100
 MURRIETA, CA 92562
 Effective as of 01-JUL-23

JOSEPH, JEFFREY, MD†
 Provider ID: N/A
 25460 MEDICAL CENTER
 DR STE 103
 MURRIETA, CA 92562
 Effective as of 01-JAN-22

JOSEPH, JEFFREY, MD†
 Provider ID: N/A
 25460 MEDICAL CENTER
 DR STE 103
 MURRIETA, CA 92562
 Effective as of 01-AUG-19

JOSEPH, JEFFREY, MD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-AUG-19

JOSEPH, JEFFREY, MD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-AUG-18

JOSEPH, JEFFREY, MD†

Provider ID: N/A

☐ 25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-DEC-21

LOBUE, THOMAS, MD

Provider ID: N/A

☐ 40700 CALIFORNIA OAKS
RD STE 106
MURRIETA, CA 92562
Effective as of 01-OCT-09

NAWAZISH, SABA, MD†

Provider ID: N/A

☐ 40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Effective as of 01-JUL-23

PHILLIPS, BARRATT, MD†

Provider ID: N/A

☐ 25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100

MURRIETA, CA 92562
Effective as of 01-AUG-18

PHILLIPS, BARRATT, MD†

Provider ID: N/A

☐ 25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

☐ 25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-MAY-17

SORENSEN, ROBERT, MD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JAN-22

SORENSEN, ROBERT, MD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-DEC-21

VIDOR, IRA, MD†

Provider ID: N/A

☐ 40700 CALIFORNIA OAKS
RD
MURRIETA, CA 92562
Effective as of 01-JUL-19

OPTOMETRIST

ARCHIBALD, JOHN, OD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-DEC-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

☐ 25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-DEC-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JUL-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

☐ 25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JUL-23

COLEMAN, BROOKE, OD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-AUG-20

COOPER, MICHAEL, OD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-FEB-22

COOPER, MICHAEL, OD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-SEP-22

EVANS, RYAN, OD

Provider ID: N/A

☐ 40700 CALIFORNIA OAKS
RD STE 106
MURRIETA, CA 92562
Effective as of 01-APR-14

LARSON, BRETT, OD†

Provider ID: N/A

☐ 25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-DEC-21

LARSON, BRETT, OD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-FEB-22

LARSON, BRETT, OD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-AUG-20

LARSON, BRETT, OD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100

MURRIETA, CA 92562
Effective as of 01-AUG-18

MC DIARMID, JOHN, OD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-FEB-22

MC DIARMID, JOHN, OD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JAN-11

SCOTT, JEFFREY, OD†

Provider ID: N/A

☐ 40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Effective as of 01-JAN-22

SCOTT, JEFFREY, OD†

Provider ID: N/A

☐ 40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Effective as of 01-JAN-23

OTOLARYNGOLOGY

ABDOU, RAMI, MD†

Provider ID: N/A

☐ 39755 DATE ST STE 106
MURRIETA, CA 92563*
Effective as of 01-JUL-23

ABDOU, RAMI, MD†

Provider ID: N/A

☐ 39755 DATE ST STE 105
MURRIETA, CA 92563*
Effective as of 01-JUL-23

BANTHIA, VISHAL, MD†

Provider ID: N/A

☐ 39755 DATE ST STE 105
MURRIETA, CA 92563*
Teleservice
Effective as of 01-JUL-23

DATE, AMIT, MD

Provider ID: N/A

☐ 39755 DATE ST STE 105-106
MURRIETA, CA 92563
Teleservice
Effective as of 01-JUL-23

TIAN, QING, MD†

Provider ID: N/A

☐ 39755 DATE ST STE 105-106
MURRIETA, CA 92563*
Effective as of 01-JUL-23

**OTOLARYNGOLOGY /
OTOLOGY /
LARYNGOLOGY /
RHINOLOGY**

FORRESTER, MICHAEL, MD†

Provider ID: N/A

☐ 25150 HANCOCK AVE STE
204
MURRIETA, CA 92562
Effective as of 01-JUL-23

FORRESTER, MICHAEL, MD†

Provider ID: N/A

☐ 25150 HANCOCK AVE STE
204
MURRIETA, CA 92562
Effective as of 01-JUN-05

ROBERTS, TODD, DO

Provider ID: N/A

☐ 25150 HANCOCK AVE STE
204

MURRIETA, CA 92562
Effective as of 01-DEC-15

ROBERTS, BENJAMIN, DO

Provider ID: N/A

25150 HANCOCK AVE STE
204

MURRIETA, CA 92562
Effective as of 01-JUL-23

ROBERTS, TODD, DO

Provider ID: N/A

25150 HANCOCK AVE STE
204

MURRIETA, CA 92562
Effective as of 01-JUL-23

ROBERTS, BENJAMIN, DO

Provider ID: N/A

25150 HANCOCK AVE STE
204

MURRIETA, CA 92562
Effective as of 01-FEB-23

PEDIATRIC CARDIOLOGY

CHU, JAMES, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201

MURRIETA, CA 92562
Effective as of 01-APR-18

CHU, JAMES, MD

Provider ID: N/A

39755 DATE ST STE 205
MURRIETA, CA 92563

Effective as of 01-JAN-23

CHU, JAMES, MD

Provider ID: N/A

39755 DATE ST STE 205
MURRIETA, CA 92563

Effective as of 01-JAN-23

CHU, JAMES, MD

Provider ID: N/A

39755 DATE ST STE 205
MURRIETA, CA 92563

Effective as of 01-JAN-23

CHU, JAMES, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201

MURRIETA, CA 92562

Effective as of 01-APR-18

CHU, JAMES, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201

MURRIETA, CA 92562

Effective as of 01-APR-18

ELLINI, AHMAD, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201

MURRIETA, CA 92562

Effective as of 01-APR-18

ELLINI, AHMAD, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201

MURRIETA, CA 92562

Effective as of 01-APR-18

ELLINI, AHMAD, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201

MURRIETA, CA 92562

Effective as of 01-APR-18

ELLINI, AHMAD, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201

MURRIETA, CA 92562
Effective as of 01-APR-18

PHYSICIANS ASSISTANT

ARROYO, ARIANNA, PA

Provider ID: N/A

25150 HANCOCK AVE STE
210

MURRIETA, CA 92562

Effective as of 01-JUN-23

ARROYO, ARIANNA, PA

Provider ID: N/A

25150 HANCOCK AVE STE
210

MURRIETA, CA 92562

Effective as of 01-JUN-23

ARROYO, ARIANNA, PA

Provider ID: N/A

25150 HANCOCK AVE STE
210

MURRIETA, CA 92562

Effective as of 01-JUN-23

ARROYO, ARIANNA, PA

Provider ID: N/A

25150 HANCOCK AVE STE
210

MURRIETA, CA 92562

Effective as of 01-JUN-23

BASIN, NATALIE, PA

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 200

MURRIETA, CA 92562

Teleservice

Effective as of 01-AUG-23

FRYER, KEVIN, PA

Provider ID: N/A

28078 BAXTER RD STE
330-340

MURRIETA, CA 92563
Effective as of 01-AUG-23

GAUSEPOHL, MARY, PA†

Provider ID: N/A

24910 LAS BRISAS RD STE
116

MURRIETA, CA 92562*
Effective as of 01-SEP-21

GAUSEPOHL, MARY, PA†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 102

MURRIETA, CA 92562*
Effective as of 01-SEP-21

HILLER, ASHLEY, PA

Provider ID: N/A

28078 BAXTER RD STE
300-340

MURRIETA, CA 92563
Effective as of 01-AUG-23

KAUFMAN, TIFFANY, PA†

Provider ID: N/A

24910 LAS BRISAS RD STE
105

MURRIETA, CA 92562
Effective as of 01-NOV-16

KAUFMAN, BRITNEY, PA†

Provider ID: N/A

25405 HANCOCK AVE STE
217

MURRIETA, CA 92562
Effective as of 01-NOV-18

KAUFMAN, BRITNEY, PA†

Provider ID: N/A

25405 HANCOCK AVE STE
217

MURRIETA, CA 92562
Effective as of 01-MAY-22

LANCASTER, MICHELLE, PA†

Provider ID: N/A

25150 HANCOCK AVE STE
210

MURRIETA, CA 92562
Effective as of 01-DEC-22

LANCASTER, MICHELLE, PA†

Provider ID: N/A

25150 HANCOCK AVE STE
210

MURRIETA, CA 92562
Effective as of 01-SEP-22

LANCASTER, MICHELLE, PA†

Provider ID: N/A

25150 HANCOCK AVE STE
210

MURRIETA, CA 92562
Effective as of 01-SEP-22

LANCASTER, MICHELLE, PA†

Provider ID: N/A

25150 HANCOCK AVE STE
210

MURRIETA, CA 92562
Effective as of 01-SEP-22

LANCASTER, MICHELLE, PA†

Provider ID: N/A

25150 HANCOCK AVE STE
210

MURRIETA, CA 92562
Effective as of 01-SEP-22

LEE, WILLIAM, PA†

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3

MURRIETA, CA 92562
Effective as of 01-APR-21

LEE, WILLIAM, PA†

Provider ID: N/A

40663 MURRIETA HOT

SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-APR-21

LIN, RAY, PA†

Provider ID: N/A

25405 HANCOCK AVE STE
217

MURRIETA, CA 92562
Effective as of 01-AUG-17

LIN, RAY, PA†

Provider ID: N/A

25405 HANCOCK AVE STE
217

MURRIETA, CA 92562
Effective as of 01-AUG-17

LUCATERO, JENNIFER, PA†

Provider ID: N/A

25405 HANCOCK AVE STE
217

MURRIETA, CA 92562
Effective as of 01-NOV-18

LUCATERO, JENNIFER, PA†

Provider ID: N/A

25405 HANCOCK AVE STE
217

MURRIETA, CA 92562
Effective as of 01-JAN-18

LUCATERO, JENNIFER, PA†

Provider ID: N/A

25405 HANCOCK AVE STE
217

MURRIETA, CA 92562
Effective as of 01-JAN-18

NEALEIGH, NATALIE, PA†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204

MURRIETA, CA 92562
Effective as of 01-JAN-17

QUISMORIO, DEMETRIO, PA†

Provider ID: N/A

28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-NOV-20

QUISMORIO, DEMETRIO, PA†

Provider ID: N/A

28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-DEC-16

RUIZ-FLORES, ROSE, PA

Provider ID: N/A

24703 MONROE AVE
MURRIETA, CA 92562
Effective as of 01-SEP-23

ST JULES, JESSICA, PA†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-AUG-17

ST JULES, JESSICA, PA†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-NOV-18

TAYLOR, ISHA, PA

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

TAYLOR, ISHA, PA

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

TAYLOR, ISHA, PA

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

TAYLOR, ISHA, PA

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

VALENTA, CAYLIE, PA†

Provider ID: N/A

40700 CALIFORNIA OAKS
RD STE 208
MURRIETA, CA 92562
Effective as of 01-JAN-21

WOOLEY, LAURA, PA†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-NOV-18

PODIATRIST

EVANS, RICHARD, DPM

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD STE D130
MURRIETA, CA 92563
Effective as of 01-MAR-15

EVANS, RICHARD, DPM

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD STE D130
MURRIETA, CA 92563
Effective as of 01-APR-06

NGUYEN, THO, DPM†

Provider ID: N/A

24640 JEFFERSON AVE

STE 109

MURRIETA, CA 92562

Effective as of 01-AUG-16

NGUYEN, THO, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-NOV-16

SCOTT, SUSAN, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-DEC-17

SCOTT, SUSAN, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-DEC-16

SCOTT, SUSAN, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-JUL-23

SHIN, CHRISTOPHER, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-JAN-23

SHIN, CHRISTOPHER, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-MAY-21

SHIN, CHRISTOPHER, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-SEP-22

**TRANSFIGURACION SHIN,
CHRISTIANNE, DPM†**

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-DEC-16

**TRANSFIGURACION SHIN,
CHRISTIANNE, DPM†**

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-DEC-17

**TRANSFIGURACION SHIN,
CHRISTIANNE, DPM†**

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-JUL-23

WELLS, JOSEPH, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-JUL-23

WELLS, JOSEPH, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-NOV-16

WELLS, JOSEPH, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-SEP-16

PULMONARY DISEASES

HADDADIN, HASSAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-JUL-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-APR-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-APR-22

HENNINGER, DELMER, MD

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563
Effective as of 01-SEP-09

HENNINGER, DELMER, MD

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563
Effective as of 01-SEP-09

HENNINGER, DELMER, MD

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563*
Effective as of 01-JUL-23

KUMAR, AVNEE, MD

Provider ID: N/A

25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
Effective as of 01-JUL-23

SIEN, STEFAN, DO†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-NOV-12

SIEN, STEFAN, DO†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-FEB-15

SURI, RAJAT, MD†

Provider ID: N/A

25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
Effective as of 01-AUG-21

VEGA, RICARDO, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-AUG-22

VEGA, RICARDO, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-AUG-22

VEGA, RICARDO, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-AUG-22

RADIATION ONCOLOGY

QUANG, TONY, MD

Provider ID: N/A

40663 MURRIETA HOT SPRINGS RD STE C3 MURRIETA, CA 92562
Effective as of 01-OCT-23

RADIOLOGY DIAGNOSTIC

PATEL, NIKHIL, MD†

Provider ID: N/A

25485 MEDICAL CENTER DR STE 106 MURRIETA, CA 92562
Effective as of 01-AUG-22

PATEL, NIKHIL, MD†

Provider ID: N/A

25485 MEDICAL CENTER DR STE 106 MURRIETA, CA 92562
Effective as of 01-DEC-22

PATEL, NIKHIL, MD†

Provider ID: N/A

25485 MEDICAL CENTER DR STE 106 MURRIETA, CA 92562
Effective as of 01-JAN-24

PATEL, NIKHIL, MD†

Provider ID: N/A

25485 MEDICAL CENTER DR STE 106 MURRIETA, CA 92562
Effective as of 01-AUG-22

REGISTERED DIETITIAN / NUTRITIONIST

BLUCHER, CHERI, RD

Provider ID: N/A

29970 TECHNOLOGY DR STE 105D

MURRIETA, CA 92563

Effective as of 01-JUN-21

BRENDECKE, LORIE, RDN

Provider ID: N/A

29970 TECHNOLOGY DR STE 105D MURRIETA, CA 92563
Effective as of 01-JUL-22

BRENDECKE, LORIE, RDN

Provider ID: N/A

29970 TECHNOLOGY DR STE 105D MURRIETA, CA 92563
Effective as of 01-JUL-22

BRENDECKE, LORIE, RDN

Provider ID: N/A

29970 TECHNOLOGY DR STE 105D MURRIETA, CA 92563
Effective as of 01-FEB-22

JACKSON, ALLYSON, RD

Provider ID: N/A

29970 TECHNOLOGY DR STE 105D MURRIETA, CA 92563
Effective as of 01-JUL-21

JACKSON, ALLYSON, RD

Provider ID: N/A

29970 TECHNOLOGY DR STE 105D MURRIETA, CA 92563
Effective as of 01-JUN-21

ROBERTS, LISA, RD

Provider ID: N/A

29970 TECHNOLOGY DR STE 105D MURRIETA, CA 92563
Effective as of 01-JUN-21

WAYNE, DIANE, RD

Provider ID: N/A

29970 TECHNOLOGY DR STE 105D MURRIETA, CA 92563
Teleservice
Effective as of 01-DEC-23

WAYNE, DIANE, RD

Provider ID: N/A

29970 TECHNOLOGY DR STE 105D MURRIETA, CA 92563
Teleservice
Effective as of 01-DEC-23

REGISTERED PHYSICAL THERAPIST

AGENA, CYAN, PT†

Provider ID: N/A

25136 HANCOCK AVE STE A MURRIETA, CA 92562
Effective as of 01-MAY-22

AGENA, CYAN, PT†

Provider ID: N/A

25136 HANCOCK AVE STE A MURRIETA, CA 92562
Effective as of 01-MAY-22

ALEXANDER, AUSTIN, PT

Provider ID: N/A

25495 MEDICAL CENTER DR STE 304 MURRIETA, CA 92562
Effective as of 01-DEC-20

ALEXANDER, AUSTIN, PT

Provider ID: N/A

25495 MEDICAL CENTER DR STE 304 MURRIETA, CA 92562
Effective as of 01-DEC-20

ALY, DILYANA, PT†

Provider ID: N/A

27722 CLINTON KEITH RD
STE B-C
MURRIETA, CA 92562
Effective as of 01-JUL-19

ALY, DILYANA, PT†

Provider ID: N/A

27722 CLINTON KEITH RD
STE B-C
MURRIETA, CA 92562
Effective as of 01-JUL-19

ATKINS, AARON, PT

Provider ID: N/A

24630 WASHINGTON AVE
STE 201
MURRIETA, CA 92562
Effective as of 01-JUL-23

ATKINS, AARON, PT

Provider ID: N/A

24630 WASHINGTON AVE
STE 201
MURRIETA, CA 92562
Effective as of 01-JUL-23

ATKINS, AARON, PT†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 304
MURRIETA, CA 92562
Effective as of 01-NOV-18

ATKINS, CHEYENNE, PT†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 304
MURRIETA, CA 92562
Effective as of 01-NOV-18

ATKINS, AARON, PT†

Provider ID: N/A

25495 MEDICAL CENTER

DR STE 304
MURRIETA, CA 92562
Effective as of 01-NOV-18

ATKINS, CHEYENNE, PT†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 304
MURRIETA, CA 92562
Effective as of 01-NOV-18

ATKINS, AARON, PT

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-JUL-23

ATKINS, AARON, PT

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-JUL-23

ATKINS, WILLIAM, PT

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-JUN-23

ATKINS, WILLIAM, PT

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-JUN-23

ATKINS, AARON, PT

Provider ID: N/A

24671 MONROE AVE STE
C-201
MURRIETA, CA 92562
Effective as of 01-JUL-23

ATKINS, AARON, PT

Provider ID: N/A

24671 MONROE AVE STE

C-201

MURRIETA, CA 92562
Effective as of 01-JUL-23

BARI, MONICA, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C201
MURRIETA, CA 92562
Effective as of 01-DEC-23

BARI, MONICA, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C201
MURRIETA, CA 92562
Effective as of 01-DEC-23

CARTER, CHRISTIAN, PT†

Provider ID: N/A

24671 MONROE AVE STE
101
MURRIETA, CA 92562
Effective as of 01-JUL-18

CARTER, CHRISTIAN, PT†

Provider ID: N/A

24671 MONROE AVE STE
101
MURRIETA, CA 92562
Effective as of 01-JUL-18

COBURN, PIERRE, PT

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-JAN-24

COBURN, PIERRE, PT

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-JAN-24

COBURN, PIERRE, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C201
MURRIETA, CA 92562
Effective as of 01-JAN-24

COBURN, PIERRE, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C201
MURRIETA, CA 92562
Effective as of 01-JAN-24

FOX, DELANIE, PT

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-OCT-23

FOX, DELANIE, PT

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-OCT-23

FOX, DELANIE, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C101
MURRIETA, CA 92562
Effective as of 01-OCT-23

FOX, DELANIE, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C101
MURRIETA, CA 92562
Effective as of 01-OCT-23

KARODY, ATULA, PT

Provider ID: N/A

25136 HANCOCK AVE
MURRIETA, CA 92562
Effective as of 01-FEB-24

KARODY, ATULA, PT

Provider ID: N/A

25136 HANCOCK AVE
MURRIETA, CA 92562
Effective as of 01-FEB-24

KESEL, KELSEY, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C101
MURRIETA, CA 92562
Effective as of 01-MAR-24

KESEL, KELSEY, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C101
MURRIETA, CA 92562
Effective as of 01-MAR-24

SABIN, SCOTT, PT†

Provider ID: N/A

24671 MONROE AVE BLDG
C-101
MURRIETA, CA 92562
Effective as of 01-MAY-22

SABIN, SCOTT, PT†

Provider ID: N/A

24671 MONROE AVE BLDG
C-101
MURRIETA, CA 92562
Effective as of 01-MAY-22

RHEUMATOLOGY

FREYNE, BRIGID, MD†

Provider ID: N/A

39755 MURRIETA HT SP
F110
MURRIETA, CA 92563
Effective as of 01-MAY-14

SPEECH PATHOLOGIST

PEDERSEN, ERICA, SP

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD
MURRIETA, CA 92563
Effective as of 01-MAY-23

PEDERSEN, ERICA, SP

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD
MURRIETA, CA 92563
Effective as of 01-MAY-23

SURGERY COLON

SURGERY

MOORE, PATRICK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-JUL-23

MOORE, PATRICK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-JUN-20

SURGERY GENERAL

BATRA, MUNISH, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562

Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562

Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562

Effective as of 01-SEP-17

BERNSTEIN, DAVID, MD

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562

Effective as of 01-JUL-23

BIANCHI, CHRISTIAN, MD

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562

Effective as of 01-JUL-23

BIANCHI, CHRISTIAN, MD

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562

Effective as of 01-FEB-23

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-NOV-23

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-NOV-23

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-JAN-24

DADA, STEPHEN, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562

Effective as of 01-MAY-14

DADA, FESTUS, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562

Effective as of 01-JUN-17

DADA, STEPHEN, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562

Effective as of 01-JUL-18

DADA, FESTUS, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562

Effective as of 01-AUG-20

DADA, FESTUS, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562

Effective as of 01-DEC-22

DADA, FESTUS, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562

Effective as of 01-JUL-23

IGWE, DANIEL, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562

Effective as of 01-DEC-22

KRAHN, DOUGLAS, MD

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-MAR-23

LIEN, CHRISTINA, DO

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-OCT-22

LIEN, CHRISTINA, DO

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-MAR-23

MARTIN, DAVID, MD

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-MAR-23

MARTIN, DAVID, MD

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-23

MEHTA, PRATIK, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-OCT-22

POLLACK, JAMES, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-22

POLLACK, JAMES, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

POLLACK, JAMES, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-FEB-23

POLLACK, JAMES, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-21

SAMIMI, KIAN, MD

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-APR-23

SUH, DAVID, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-DEC-12

SUH, DAVID, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-DEC-12

TRAN, MICHAEL, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JUN-23

TRAN, MICHAEL, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JUN-23

VEGA, FRANCISCO, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-MAR-23

WANG, SHIN-CHERN, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-MAR-23

WANG, SHIN-CHERN, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-FEB-23

**SURGERY GENERAL
VASCULAR**

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-APR-20

CHIRIANO, JASON, DO

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-MAR-23

VEGA, FRANCISCO, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-NOV-23

VEGA, FRANCISCO, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

SURGERY HAND PLASTIC

KUPFER, DAVID, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-SEP-09

SURGERY

NEUROLOGICAL

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-MAR-17

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-FEB-18

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-FEB-20

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210

MURRIETA, CA 92562

Effective as of 01-FEB-20

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-OCT-15

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-17

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-17

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-17

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-17

FRIEDLICH, DANIEL, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-MAY-15

FRIEDLICH, DANIEL, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-MAY-15

FRIEDLICH, DANIEL, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-MAR-14

OH, GERALD, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-OCT-17

OH, GERALD, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-AUG-17

OH, GERALD, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-AUG-17

OH, GERALD, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-AUG-17

OH, GERALD, MD†

Provider ID: N/A

25150 HANCOCK AVE STE

210
MURRIETA, CA 92562
Effective as of 01-AUG-17

OH, GERALD, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-FEB-19

SURGERY ORTHOPEDIC

AGYEMAN, KOFI, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
240
MURRIETA, CA 92562
Effective as of 01-MAR-22

AGYEMAN, KOFI, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
250
MURRIETA, CA 92562
Effective as of 01-MAR-22

CHENG, WAYNE, MD†

Provider ID: N/A
28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-JUL-21

CHENG, WAYNE, MD†

Provider ID: N/A
28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-JUL-21

CHENG, WAYNE, MD†

Provider ID: N/A
28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-JAN-24

DRINHAUS, ROLF, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-APR-08

ERWTEMAN, ANDREW, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-AUG-20

ERWTEMAN, ANDREW, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-NOV-16

ERWTEMAN, ANDREW, MD†

Provider ID: N/A
521 E ELDER STREET
SUITE 202
MURRIETA, CA 92562
Effective as of 01-AUG-20

GARGULINSKI, MATTHEW, DO†

Provider ID: N/A
25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-AUG-22

GARGULINSKI, MATTHEW, DO†

Provider ID: N/A
25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-AUG-23

GARGULINSKI, MATTHEW, DO†

Provider ID: N/A
25150 HANCOCK AVE STE

200
MURRIETA, CA 92562
Effective as of 01-AUG-22

GARGULINSKI, MATTHEW, DO†

Provider ID: N/A
25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-SEP-23

GHAYOUMI, POURIYA, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
250
MURRIETA, CA 92562
Effective as of 01-NOV-21

GHAYOUMI, POURIYA, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
240
MURRIETA, CA 92562
Effective as of 01-NOV-21

GHAYOUMI, POURIYA, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
240
MURRIETA, CA 92562
Effective as of 01-AUG-22

GHAYOUMI, POURIYA, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
250
MURRIETA, CA 92562
Effective as of 01-AUG-22

GHAYOUMI, POURIYA, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
240
MURRIETA, CA 92562
Effective as of 01-DEC-22

GHAYOUMI, POURIYA, MD†

Provider ID: N/A

25395 HANCOCK AVE STE 250
MURRIETA, CA 92562
Effective as of 01-DEC-22

JERCINOVICH, IGOR, MD

Provider ID: N/A

25150 HANCOCK AVE STE 200
MURRIETA, CA 92562
Effective as of 01-OCT-20

JERCINOVICH, IGOR, MD

Provider ID: N/A

25150 HANCOCK AVE STE 200
MURRIETA, CA 92562
Effective as of 01-APR-07

KIMBALL, JEFF, MD

Provider ID: N/A

28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-DEC-23

KIMBALL, JEFF, MD

Provider ID: N/A

28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-NOV-23

LOCKE, JOHN, MD†

Provider ID: N/A

28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-AUG-22

LOCKE, JOHN, MD†

Provider ID: N/A

28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-AUG-22

LUNA, MARIO, MD†

Provider ID: N/A

25495 MEDICAL CENTER DR STE 101
MURRIETA, CA 92562
Effective as of 01-AUG-20

LUNA, MARIO, MD

Provider ID: N/A

39755 DATE ST STE 104
MURRIETA, CA 92563
Effective as of 01-MAR-23

ODA, NINOS, MD

Provider ID: N/A

25395 HANCOCK AVE STE 240
MURRIETA, CA 92562
Effective as of 01-MAY-23

ODA, NINOS, MD

Provider ID: N/A

25395 HANCOCK AVE STE 250
MURRIETA, CA 92562
Effective as of 01-MAY-23

SAADAT, ARDAVAN, MD†

Provider ID: N/A

25395 HANCOCK AVE STE 240
MURRIETA, CA 92562
Effective as of 01-NOV-21

SAADAT, ARDAVAN, MD†

Provider ID: N/A

25395 HANCOCK AVE STE 250
MURRIETA, CA 92562
Effective as of 01-NOV-21

SAYEGH, ELI, MD

Provider ID: N/A

28078 BAXTER RD STE 330
MURRIETA, CA 92563

Effective as of 01-AUG-22

SAYEGH, ELI, MD

Provider ID: N/A

28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-AUG-22

SAYEGH, ELI, MD

Provider ID: N/A

28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-DEC-22

SAYEGH, ELI, MD

Provider ID: N/A

28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-JAN-22

SAYEGH, ELI, MD

Provider ID: N/A

28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-JAN-22

SAYEGH, ELI, MD

Provider ID: N/A

28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-DEC-22

TOOMA, GHASSAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-DEC-22

TOOMA, GHASSAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-APR-03

TOOMA, GHASSAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-DEC-23

SURGERY PLASTIC

BATRA, MUNISH, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562*
Effective as of 01-JUL-23

KUPFER, DAVID, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-SEP-09

MUDGE, BRADLEY, MD

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-23

NEWMAN, DAVID, MD

Provider ID: N/A

25150 HANCOCK AVE STE
110
MURRIETA, CA 92562
Effective as of 01-JAN-06

NEWMAN, DAVID, MD

Provider ID: N/A

25150 HANCOCK AVE STE
110
MURRIETA, CA 92562
Effective as of 01-SEP-13

SURGERY THORACIC

KOUMJIAN, MICHAEL, MD†

Provider ID: N/A

28078 BAXTER RD STE 510
MURRIETA, CA 92563
Effective as of 01-JUN-21

VO, QUANG, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-23

VO, QUANG, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-DEC-22

UROLOGY

CONNER, RICHARD, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-20

CONNER, RICHARD, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-SEP-14

CRISELL, MONISHA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-SEP-14

CRISELL, MONISHA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-15

CRISELL, MONISHA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-20

CRISELL, MONISHA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JUN-15

CRISELL, MONISHA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JAN-04

CRISELL, MONISHA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-FEB-15

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JAN-24

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-APR-21

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-NOV-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-NOV-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-NOV-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450

MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

LARSON, BENJAMIN, MD

Provider ID: N/A

28078 BAXTER RD STE 430
MURRIETA, CA 92563
Effective as of 01-MAY-23

LARSON, BENJAMIN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-AUG-15

LARSON, BENJAMIN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-AUG-15

LARSON, BENJAMIN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-AUG-15

LARSON, BENJAMIN, MD†

Provider ID: N/A

25495 MEDICAL CENTER

DR STE 204
MURRIETA, CA 92562
Effective as of 01-OCT-15

LARSON, BENJAMIN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JUL-23

LARSON, BENJAMIN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-20

LOUIE, BRANDON, MD

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JAN-24

LOUIE, BRANDON, MD

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JAN-24

LUTTGE, SCOTT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-DEC-22

LUTTGE, SCOTT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAR-23

LUTTGE, SCOTT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-23

LUTTGE, SCOTT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-23

REDDY, MADHUMITHA, DO†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-FEB-22

REDDY, MADHUMITHA, DO†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-MAR-21

REDDY, MADHUMITHA, DO†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-MAY-21

REDDY, MADHUMITHA, DO†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-AUG-19

SHAH, NEMI, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Teleservice
Effective as of 01-FEB-24

SHAH, NEMI, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Teleservice
Effective as of 01-FEB-24

TAKESITA, KEN, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-NOV-15

TAKESITA, KEN, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-NOV-15

TALANKI, VARUN, MD

Provider ID: N/A

28078 BAXTER RD STE 430
MURRIETA, CA 92563
Effective as of 01-MAY-23

TALANKI, VARUN, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JAN-22

TALANKI, VARUN, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-22

TALANKI, VARUN, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-MAY-22

TALANKI, VARUN, MD

Provider ID: N/A

28078 BAXTER RD STE 430
MURRIETA, CA 92563
Effective as of 01-MAY-23

TSI, SY, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563*
Effective as of 01-JUL-23

TSI, SY, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-APR-22

TSI, SY, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-AUG-16

VEMULAPALLI, SREENIVAS, MD

Provider ID: N/A

28078 BAXTER RD STE 430
MURRIETA, CA 92563
Effective as of 01-MAY-23

VEMULAPALLI, SREENIVAS, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-DEC-23

VEMULAPALLI, SREENIVAS, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-OCT-14

**VEMULAPALLI, SREENIVAS,
MD†**

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-20

**VEMULAPALLI, SREENIVAS,
MD†**

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-15

**VEMULAPALLI, SREENIVAS,
MD†**

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JUL-13

**VEMULAPALLI, SREENIVAS,
MD†**

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JUN-15

YUN, EDWARD, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563*
Effective as of 01-JUL-23

YUN, EDWARD, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JAN-23

YUN, EDWARD, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JAN-23

YUN, EDWARD, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563*
Effective as of 01-NOV-15

YUN, EDWARD, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563*
Effective as of 01-APR-16

YUN, EDWARD, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563*
Effective as of 01-AUG-16

CARDIOLOGY

CAMACHO, BENJAMIN, MD†

Provider ID: N/A

1615 SWEETWATER RD STE
D
NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

DAMANI, SAMIR, MD

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-MAR-24

FERNANDEZ, GENARO, MD†

Provider ID: N/A

610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950*
Effective as of 01-APR-24

FERNANDEZ, GENARO, MD†

Provider ID: N/A

610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

FERNANDEZ, GENARO, MD†

Provider ID: N/A

610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

LY, NANCY, MD

Provider ID: N/A

1415 E 8TH ST STE 4
NATIONAL CITY, CA 91950
Effective as of 01-AUG-23

LY, NANCY, MD

Provider ID: N/A

1415 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-JUN-23

LY, NANCY, MD

Provider ID: N/A

1415 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-JUN-23

OVIEDO-LINARES, RAUL, MD

Provider ID: N/A

1415 E 8TH ST STE 5
NATIONAL CITY, CA 91950
Effective as of 01-AUG-23

OVIEDO-LINARES, RAUL, MD

Provider ID: N/A

1415 E 8TH ST STE 5
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-MAR-20

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

ROUGH, STEVEN, MD

Provider ID: N/A

1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

ROUGH, STEVEN, MD

Provider ID: N/A

1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

SHARF, ALBERT, MD

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

SHETABI, KAMBIZ, MD

Provider ID: N/A

1415 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

SHETABI, KAMBIZ, MD

Provider ID: N/A

1415 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

WYSOCZANSKI, MARIUSZ, MD

Provider ID: N/A

1415 E 8TH ST STE 8
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

502 EUCLID AVE STE 104
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

502 EUCLID AVE STE 104
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

**CARDIOVASCULAR
DISEASE**

DAMANI, SAMIR, MD

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-NOV-23

KIM, JAMES, MD

Provider ID: N/A

1415 E 8TH ST STE 3
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-AUG-23

KIM, JAMES, MD

Provider ID: N/A

1415 E 8TH ST
NATIONAL CITY, CA 91950

Effective as of 01-JUN-23

LY, NANCY, MD

Provider ID: N/A

1415 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-JUN-23

LY, NANCY, MD

Provider ID: N/A

1415 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-JUN-23

LY, NANCY, MD

Provider ID: N/A

1415 E 8TH ST STE 4
NATIONAL CITY, CA 91950
Effective as of 01-NOV-23

NANAVATI, VIMAL, MD

Provider ID: N/A

2345 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-FEB-23

OVIEDO-LINARES, RAUL, MD

Provider ID: N/A

1415 E 8TH ST STE 5
NATIONAL CITY, CA 91950
Effective as of 01-AUG-23

OVIEDO-LINARES, RAUL, MD

Provider ID: N/A

1415 E 8TH ST STE 5
NATIONAL CITY, CA 91950
Effective as of 01-JUN-23

OVIEDO-LINARES, RAUL, MD

Provider ID: N/A

1415 E 8TH ST STE 5
NATIONAL CITY, CA 91950
Effective as of 01-AUG-23

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-MAR-18

ROUGH, STEVEN, MD

Provider ID: N/A

1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-AUG-23

SHEREV, DIMITRI, MD

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-SEP-23

WYSOCZANSKI, MARIUSZ, MD

Provider ID: N/A

1415 E 8TH ST STE 8
NATIONAL CITY, CA 91950
Effective as of 01-AUG-23

WYSOCZANSKI, MARIUSZ, MD

Provider ID: N/A

1415 E 8TH ST STE 8
NATIONAL CITY, CA 91950
Effective as of 01-JUN-23

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

502 EUCLID AVE STE 104
NATIONAL CITY, CA 91950
Effective as of 01-JAN-23

**CERTIFIED NURSE
PRACTITIONER**

AQUINO, FELINO, NP

Provider ID: N/A

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

CARDENAS, MIRIAM, NPF

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

**DHARKAR SURBER, SAPNA,
NP**

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

DRISCOLL, SUSAN, NP

Provider ID: N/A

330 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-OCT-23

DRISCOLL, SUSAN, NP

Provider ID: N/A

340 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-OCT-23

KYI, MYA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-MAR-24

LIM, IMELDA, NP

Provider ID: N/A

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Effective as of 01-OCT-22

OLESCO, JENNIFER, NP

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-AUG-23

REAL, MARIA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

REDDY, PRIYA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Effective as of 01-NOV-22

RENZAS, JENNIFER, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUL-21

SWEENEY, ZSA ZSA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUL-21

**VILLANUEVA DE GUTIE,
BERENICE, NP**

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-MAY-21

WILLIAMS, BREAHA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Effective as of 01-DEC-21

**CERTIFIED REGISTERED
NURSE MIDWIFE**

MAST, ASHLEY, CRNM

Provider ID: N/A
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

CHIROPRACTOR

DORADO, SUE, DC

Provider ID: N/A
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

GILIBERTO, JOSEPH, DC†

Provider ID: N/A
2835 HIGHLAND AVE
NATIONAL CITY, CA 91950
Effective as of 01-AUG-22

HALEY, STEVEN, DC

Provider ID: N/A
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

DERMATOLOGY

BARRIO, VICTORIA, MD

Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-MAR-24

BROGAN, JACQUELINE, MD†

Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

BROGAN, JACQUELINE, MD†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-21

BROGAN, JACQUELINE, MD†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JAN-21

CELANO, NICHOLAS, MD†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-MAR-18

CELANO, NICHOLAS, MD†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

CELANO, NICHOLAS, MD†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

CELANO, NICHOLAS, MD†

Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-SEP-22

CELANO, NICHOLAS, MD†

Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUL-22

CHIANG, JENNIFER, MD†

Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUL-22

CHIANG, JENNIFER, MD†

Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-SEP-22

CHIANG, JENNIFER, MD†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

CHIANG, JENNIFER, MD†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

CHIANG, JENNIFER, MD†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-MAR-18

GONZALEZ, JOSE, MD†

Provider ID: N/A
655 EUCLID AVE STE 304

NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-AUG-22

GONZALEZ, JOSE, MD

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-MAY-23

GORDON, JUSTIN, MD†

Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-AUG-22

GORDON, JUSTIN, MD†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-APR-22

LIN, SHINKO, MD

Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-MAR-24

NELSON, AISLYN, MD†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-19

NELSON, AISLYN, MD†

Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUL-22

NELSON, AISLYN, MD†

Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-AUG-22

SATEESH, BROOKE, MD†

Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-AUG-22

SATEESH, BROOKE, MD†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-MAR-18

SATEESH, BROOKE, MD†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

SATEESH, BROOKE, MD†

Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUL-22

TYAGI, ABHILASHA, MD†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

TYAGI, ABHILASHA, MD†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-APR-22

TYAGI, ABHILASHA, MD†

Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-AUG-22

UEBELHOER, NATHAN, DO†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-APR-18

UEBELHOER, NATHAN, DO†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

UEBELHOER, NATHAN, DO†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-FEB-22

UEBELHOER, NATHAN, DO†

Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-FEB-23

UEBELHOER, NATHAN, DO†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

EMERGENCY MEDICINE

TABILA, BRIAN, MD†

Provider ID: N/A
610 EUCLID AVE STE 202
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

TOVAR, JUAN, MD†

Provider ID: N/A

1136 D AVE
NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

ENDOCRINOLOGY

METABOLISM DIABETES

VALDEZ, KRYSTAL, MD

Provider ID: N/A

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

FAMILY PRACTICE

DILLON, MAYRA, MD†

Provider ID: N/A

1136 D AVE
NATIONAL CITY, CA 91950
Effective as of 01-AUG-23

RICHARDSON, DANIELLE, MD

Provider ID: N/A

2400 E 8TH ST
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-MAY-23

GASTROENTEROLOGY

GISH, ROBERT, MD†

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUN-21

INTERNAL MEDICINE

LIU, ANDREW, MD

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-SEP-23

MAA CHIP, FHARAK, MD†

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-NOV-23

MAA CHIP, FHARAK, MD†

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-MAR-15

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

**INTERNAL MEDICINE
CRITICAL CARE MEDICINE**

LIM, ROSEMARIE, MD†

Provider ID: N/A

655 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-MAY-21

TABILA, BRIAN, MD†

Provider ID: N/A

655 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-MAR-21

**INTERVENTIONAL
CARDIOLOGY**

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950

Effective as of 01-JAN-24

ROUGH, STEVEN, MD

Provider ID: N/A

1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

ROUGH, STEVEN, MD

Provider ID: N/A

1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

**LICENSED CLINICAL
SOCIAL WORKER**

ALVAREZ, DIANA, LCSW

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

**JASSO-RAMIREZ, MARTHA,
LCSW**

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-SEP-21

SACHS, MELISSA, LCSW†

Provider ID: N/A

2400 E 8TH ST
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-MAR-21

WRIGHT, STEPHANIE, LCSW

Provider ID: N/A

2743 HIGHLAND AVE

NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

**MARRIAGE FAMILY
THERAPIST**

KUEK, JOHN, MFT

Provider ID: N/A
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

NEPHROLOGY

**CALDERON MOLINA, JUAN,
MD†**

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-NOV-23

**CALDERON MOLINA, JUAN,
MD†**

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

COMUNALE, RODERICK, MD†

Provider ID: N/A
502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JAN-21

COMUNALE, RODERICK, MD†

Provider ID: N/A
502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-FEB-19

COMUNALE, RODERICK, MD†

Provider ID: N/A
502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUL-22

MAA CHIP, FHARAK, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

MAA CHIP, FHARAK, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

MAA CHIP, FHARAK, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-SEP-20

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-SEP-20

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A
655 EUCLID AVE STE 303

NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

NEUROLOGY

BOBO, JERRY, MD†

Provider ID: N/A
502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

**OBSTETRICS /
GYNECOLOGY**

AL-MSHHDANI, AYSER, MD

Provider ID: N/A
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

ASLIAN, AZITA, MD†

Provider ID: N/A
2400 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

ASLIAN, AZITA, MD

Provider ID: N/A
1136 D AVE
NATIONAL CITY, CA 91950
Effective as of 01-SEP-23

ASLIAN, AZITA, MD†

Provider ID: N/A
2400 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

DAVIS, TRACIE, MD

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-23

DEL ROSARIO, GELEN, MD†

Provider ID: N/A

502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950

Effective as of 01-SEP-22

DEL ROSARIO, GELEN, MD†

Provider ID: N/A

502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

**FOLCH TORRES-AGUIAR,
BEATRIZ, MD†**

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-AUG-22

GELLENS, ANDREW, MD†

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-NOV-21

MENDEZ, DIEGO, MD

Provider ID: N/A

2400 E 8TH ST
NATIONAL CITY, CA 91950

Effective as of 01-APR-23

OPHTHALMOLOGY

CARRABY, ARNETT, MD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

CHANG, TOM, MD†

Provider ID: N/A

2240 E PLAZA BLVD
NATIONAL CITY, CA 91950

Effective as of 01-SEP-22

DELENGOCKY, TAYSON, DO

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950

Effective as of 01-FEB-24

FISH, STEVEN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Effective as of 01-JUN-22

FISH, STEVEN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Effective as of 01-NOV-22

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Effective as of 01-APR-18

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Effective as of 01-JUN-23

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Effective as of 01-MAR-18

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Effective as of 01-SEP-22

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

HAIGHT, BRUCE, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Effective as of 01-SEP-22

HUDSON, HENRY, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

HUDSON, HENRY, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-22

MANI, MAJID, MD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

MANI, NASRIN, MD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

MCDONNELL, EMMA, MD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

MCGRAW, JOSEPH, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-NOV-21

MCGRAW, JOSEPH, MD†

Provider ID: N/A

2240 E PLAZA BLVD STE F
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

2240 E PLAZA BLVD STE G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-OCT-21

MCGRAW, JOSEPH, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

MCGRAW, JOSEPH, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JAN-22

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

MORRISON-REYES, JOSHUA, MD

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-MAR-23

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-APR-22

PAPASTERGIU, GEORGIOS, MD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PATEL, GITANE, MD†

Provider ID: N/A

2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

PATEL, SARJAN, MD†

Provider ID: N/A

2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

PATEL, SARJAN, MD†

Provider ID: N/A

2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PATEL, SARJAN, MD†

Provider ID: N/A

2240 E PLAZA BOULEVARD
SUITE F AND G

NATIONAL CITY, CA 91950
Effective as of 01-AUG-20

PEAIRS, JAMES, MD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PERRY, ARTHUR, MD

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

PRABHU, SUJATA, MD†

Provider ID: N/A

2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

RAJSBAUM, MARTIN, MD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

SASSANI, PATRICK, MD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

SKAF, AYHAM, MD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

WAINESS, REID, MD†

Provider ID: N/A

2240 E PLAZA BLVD STE F
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

OPTOMETRIST

AOTO, KIM, OD†

Provider ID: N/A

2240 E PLAZA BLVD STE
F-G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A

2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

EL-MOGHRABI, NANCY, OD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

EL-MOGHRABI, ROULA, OD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

KHIEU, TINA, OD

Provider ID: N/A

2240 E PLAZA BLVD STE
F&G
NATIONAL CITY, CA 91950
Effective as of 01-DEC-23

KHIEU, TINA, OD

Provider ID: N/A

2240 E PLAZA BLVD STE

F&G

NATIONAL CITY, CA 91950
Effective as of 01-MAR-24

KOO, ANITA, OD

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

KOO, ANITA, OD

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

MARR, RYAN, OD

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-DEC-22

VINH, JOHN, OD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-SEP-20

**PEDIATRIC EMERGENCY
MEDICINE**

BONSU, BEMA, MD†

Provider ID: N/A

1136 D AVE
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

**PHYSICAL MEDICINE /
REHABILITATION**

CROWLEY, DONNA, MD†

Provider ID: N/A

655 EUCLID AVE STE 209
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

CROWLEY, DONNA, MD†

Provider ID: N/A

655 EUCLID AVE STE 209
NATIONAL CITY, CA 91950

Effective as of 01-APR-14

PHYSICIANS ASSISTANT

HABBOUSH, RANA, PA

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-23

HIGUERA, EDITH, PA

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-23

LANDON, JEFFREY, PA

Provider ID: N/A

610 EUCLID AVE STE 200
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-NOV-23

MACASADIA, MARITES, PA

Provider ID: N/A

610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Effective as of 01-SEP-20

MERCER, KELLY, PA†

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-APR-21

SHAH, SHEENA, PA

Provider ID: N/A

502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950

Effective as of 01-SEP-21

SHAH, SHEENA, PA

Provider ID: N/A

502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950

Effective as of 01-SEP-22

UDOH, EKAETE, PA

Provider ID: N/A

610 EUCLID AVE STE 200
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-MAR-24

PODIATRIST

ATMAR, AKMAL, DPM†

Provider ID: N/A

2345 E 8TH ST STE 105
NATIONAL CITY, CA 91950

Effective as of 01-SEP-22

ATMAR, AKMAL, DPM†

Provider ID: N/A

2345 E 8TH ST STE 105
NATIONAL CITY, CA 91950

Effective as of 01-JAN-23

CAINE, SAMUEL, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-DEC-23

DAVIDSON, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-FEB-19

DAVIDSON, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-DEC-23

DAVIDSON, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JAN-22

DAVIDSON, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JAN-21

DAVIDSON, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JAN-21

DAVIDSON, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-SEP-22

KRIGER, STEPHEN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JAN-22

NGUYEN, HAN, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-JUN-23

NGUYEN, HAN, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-JUL-23

NGUYEN, HAN, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

**SANICOLAS, MARIA THERESA,
DPM†**

Provider ID: N/A

610 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

**SANICOLAS, MARIA THERESA,
DPM†**

Provider ID: N/A

610 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

TSAI, GRACE, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-SEP-23

TSAI, GRACE, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-FEB-23

TSAI, GRACE, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

XU, DIXON, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-DEC-23

XU, DIXON, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-MAR-24

XU, DIXON, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-MAY-21

XU, DIXON, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

PSYCHIATRY

BOBO, JERRY, MD†

Provider ID: N/A

502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

BOBO, JERRY, MD†

Provider ID: N/A

502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

3035 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-AUG-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

3035 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-AUG-22

KUGEL, SAMUEL, MD†

Provider ID: N/A

502 EUCLID AVE STE 305
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JAN-21

KUGEL, SAMUEL, MD†

Provider ID: N/A

502 EUCLID AVE STE 305
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JAN-21

PSYCHOLOGIST

**BAHENA-COLLEY, SANDRA,
PSYD†**

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

**BAHENA-COLLEY, SANDRA,
PSYD†**

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

GALANT, DANIEL, PhD

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

GALANT, DANIEL, PhD

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

MIRANDA, CYNTHIA, PhD†

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

MIRANDA, CYNTHIA, PhD†

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

**REGISTERED PHYSICAL
THERAPIST**

CHENG, BRANDON, PT

Provider ID: N/A

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

DORSEY, KYLE, PT†

Provider ID: N/A

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-DEC-21

DORSEY, KYLE, PT†

Provider ID: N/A

3400 E 8TH ST STE 108

NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

HERMAN, RACHEL, PT†

Provider ID: N/A

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

HERMAN, RACHEL, PT†

Provider ID: N/A

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-NOV-21

KARANDE, PRACHI, PT†

Provider ID: N/A

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-JAN-22

NGUYEN, TIA, PT

Provider ID: N/A

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-MAR-24

NOVENCIDO, ANDREW, PT†

Provider ID: N/A

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

SUGGS, SARAH, PT

Provider ID: N/A

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-MAY-23

SURGERY PLASTIC

GUTTIKONDA, RAKHESH, DO

Provider ID: N/A

655 EUCLID AVE STE 200
NATIONAL CITY, CA 91950

Effective as of 01-DEC-23

ALLERGY IMMUNOLOGY

SCHWINDT, CHRISTINA, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 401
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

SCHWINDT, CHRISTINA, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 401
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

CARDIOLOGY

SARABI, DENNIS, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 610
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-21

CERTIFIED NURSE

PRACTITIONER

ANTONYAN, HOLLY, NPFT†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-22

DERMATOLOGY

AWADALLA, FARAH, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-22

AWADALLA, FARAH, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-22

AWADALLA, FARAH, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-22

BIERMAN, DINA, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
405
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-23

BIERMAN, DINA, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
405
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

BREITHAUPT, ANDREW, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-20

BREITHAUPT, ANDREW, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-19

BREITHAUPT, ANDREW, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-18

BREITHAUPT, ANDREW, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-18

ETTEFAGH, LELIA, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-21

FARSHIDI, ARTA, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
405
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

FARSHIDI, ARTA, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
405
NEWPORT BEACH, CA

92660

Effective as of 01-FEB-23

FARSHIDI, ARTA, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
405
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-23

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

FAZEL, NASIM, MD

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-24

FAZEL, NASIM, MD

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-JAN-24

FAZEL, NASIM, MD

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-DEC-23

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660
Effective as of 01-DEC-23

FAZEL, NASIM, MD

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-DEC-23

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660
Effective as of 01-DEC-23

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660
Effective as of 01-SEP-23

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660
Effective as of 01-OCT-23

FOREMAN, TANYA, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660
Effective as of 01-OCT-15

FOREMAN, TANYA, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660
Effective as of 01-SEP-18

FOREMAN, TANYA, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660
Effective as of 01-OCT-23

FOREMAN, TANYA, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660
Effective as of 01-JAN-17

FOWLER, VINCENT, MD†

Provider ID: N/A

240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA

92660

Effective as of 01-FEB-20

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660
Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660
Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660
Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660
Effective as of 01-JAN-24

HENDERSON, GREGORY, MD

Provider ID: N/A

1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660
Effective as of 01-OCT-23

HENDERSON, GREGORY, MD

Provider ID: N/A

<p>1441 AVOCADO AVE STE 409 NEWPORT BEACH, CA 92660 Effective as of 01-NOV-23</p> <p>HENDERSON, GREGORY, MD Provider ID: N/A</p> <p>360 SAN MIGUEL DR STE 309 NEWPORT BEACH, CA 92660 Effective as of 01-NOV-23</p> <p>KAMEL, JOSEPH, DO Provider ID: N/A</p> <p>360 SAN MIGUEL DR STE 501 NEWPORT BEACH, CA 92660 Effective as of 01-APR-23</p> <p>KAMEL, JOSEPH, DO Provider ID: N/A</p> <p>360 SAN MIGUEL DR STE 501 NEWPORT BEACH, CA 92660 Effective as of 01-MAR-24</p> <p>KAMEL, JOSEPH, DO Provider ID: N/A</p> <p>360 SAN MIGUEL DR STE 501 NEWPORT BEACH, CA 92660 Effective as of 01-MAR-24</p> <p>KARAVAN JAHROMI, MAHSA, MD† Provider ID: N/A</p> <p>1401 AVOCADO AVE STE 703 NEWPORT BEACH, CA 92660</p>	<p>Effective as of 01-SEP-19</p> <p>KHERADMAMAND, SHIVA, DO† Provider ID: N/A</p> <p>240 NEWPORT CENTER DR STE 105 NEWPORT BEACH, CA 92660 Effective as of 01-DEC-21</p> <p>KHERADMAMAND, SHIVA, DO† Provider ID: N/A</p> <p>240 NEWPORT CENTER DR STE 105 NEWPORT BEACH, CA 92660 Effective as of 01-DEC-21</p> <p>LANDER, JEFFREY, MD† Provider ID: N/A</p> <p>1401 AVOCADO AVE STE 703 NEWPORT BEACH, CA 92660 Effective as of 01-DEC-21</p> <p>LANDER, JEFFREY, MD† Provider ID: N/A</p> <p>1401 AVOCADO AVE STE 703 NEWPORT BEACH, CA 92660 Effective as of 01-DEC-21</p> <p>LANDER, JEFFREY, MD† Provider ID: N/A</p> <p>1441 AVOCADO AVE STE 806 NEWPORT BEACH, CA 92660 Effective as of 01-AUG-22</p> <p>LANDER, JEFFREY, MD† Provider ID: N/A</p> <p>1441 AVOCADO AVE STE 806 NEWPORT BEACH, CA 92660 Effective as of 01-DEC-22</p>	<p>806 NEWPORT BEACH, CA 92660 Effective as of 01-AUG-22</p> <p>LANDER, JEFFREY, MD† Provider ID: N/A</p> <p>1401 AVOCADO AVE STE 703 NEWPORT BEACH, CA 92660 Effective as of 01-JAN-23</p> <p>LANDER, JEFFREY, MD† Provider ID: N/A</p> <p>1441 AVOCADO AVE STE 806 NEWPORT BEACH, CA 92660 Effective as of 01-JAN-23</p> <p>LANDER, JEFFREY, MD† Provider ID: N/A</p> <p>1401 AVOCADO AVE STE 703 NEWPORT BEACH, CA 92660 Effective as of 01-DEC-22</p> <p>LANDER, JEFFREY, MD† Provider ID: N/A</p> <p>1441 AVOCADO AVE STE 806 NEWPORT BEACH, CA 92660 Effective as of 01-DEC-22</p> <p>LANDER, JEFFREY, MD† Provider ID: N/A</p> <p>400 NEWPORT CENTER DR STE 602 NEWPORT BEACH, CA 92660 Effective as of 01-DEC-22</p>
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LANDER, JEFFREY, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

LANDER, JEFFREY, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

LEDON, JENNIFER, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

LEDON, JENNIFER, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

LEDON, JENNIFER, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

LEDON, JENNIFER, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA

92660

Effective as of 01-JUL-23

LEDON, JENNIFER, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

LEDON, JENNIFER, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-23

LEDON, JENNIFER, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-23

LEDON, JENNIFER, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-23

LEDON, JENNIFER, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-23

LEDON, JENNIFER, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

LEVIN, JACQUELINE, DO†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

LEVIN, JACQUELINE, DO†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

LIEM, WIEKE, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

LIEM, WIEKE, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

LIEM, WIEKE, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-19

LIEM, WIEKE, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-19

LUCERO, RENEE, DO

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

MARTIN, STEPHANIE, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-21

MARTIN, STEPHANIE, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-21

MARTIN, STEPHANIE, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-APR-21

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA

92660

Effective as of 01-JAN-23

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-19

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-19

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-18

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-23

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-19

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-17

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-21

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-12

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-18

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-19

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA

92660

Effective as of 01-JAN-23

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-APR-21

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-12

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-APR-21

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

NAMI, NAVID, DO⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

NGUYEN, DENNIS, MD⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

NGUYEN, DENNIS, MD⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

NGUYEN, DENNIS, MD⁺

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-APR-21

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA

92660

Effective as of 01-MAY-21

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-19

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-19

ROSHDIEH, BABAK, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

ROSHDIEH, BABAK, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

ROSHDIEH, BABAK, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

ROSHDIEH, BABAK, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

ROSHDIEH, BABAK, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

ROSHDIEH, BABAK, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

ROSHDIEH, BABAK, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

SHIELL, RONALD, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA

92660

Teleservice

Effective as of 01-AUG-21

SHIELL, RONALD, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-AUG-21

SHIELL, RONALD, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-AUG-21

SHIELL, RONALD, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-DEC-21

SHIELL, RONALD, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-DEC-21

SHIELL, RONALD, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702

NEWPORT BEACH, CA

92660

Effective as of 01-OCT-23

SHIELL, RONALD, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-18

SHIELL, RONALD, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-17

ENDOCRINOLOGY

METABOLISM DIABETES

MOATTARI, ALI, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
502
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-20

SODHI, SANDEEP, MD†

Provider ID: N/A

369 SAN MIGUEL DR STE
200
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

SODHI, SANDEEP, MD†

Provider ID: N/A

369 SAN MIGUEL DR STE
200
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

SODHI, SANDEEP, MD†

Provider ID: N/A

369 SAN MIGUEL DR STE
200
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-21

SODHI, SANDEEP, MD†

Provider ID: N/A

369 SAN MIGUEL DR STE
200
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-21

GASTROENTEROLOGY

SAINI, SURINDER, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
807
NEWPORT BEACH, CA
92660

Effective as of 01-APR-11

SAINI, SURINDER, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
807
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-12

**HEMATOLOGY /
ONCOLOGY**

PATHAK, BHAVANA, MD†

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-21

PATHAK, BHAVANA, MD†

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-21

SACHELARIÉ, IRINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

SACHELARIÉ, IRINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

SACHELARIÉ, IRINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

SACHELARIÉ, IRINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

SACHELARIÉ, IRINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

**OBSTETRICS /
GYNECOLOGY**

AL-AZAWI, HIND, MD

Provider ID: N/A

366 SAN MIGUEL DR STE
209
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

SUGIHARA, CORINNE, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
608
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-11

SUGIHARA, CORINNE, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
608
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-11

OPHTHALMOLOGY

AGARWAL, MADHU, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 605
NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

AGARWAL, MADHU, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 605
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-21

AGARWAL, MADHU, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
307
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-18

AGARWAL, MADHU, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 605
NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

AGARWAL, MADHU, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 605
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-22

CIES, WILLIAM, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 404
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-12

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA

92660

Effective as of 01-DEC-20

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-18

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-20

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-17

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-17

GUPTA, MRINALI, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA

92660

Effective as of 01-NOV-20

GUPTA, MRINALI, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

GUPTA, MRINALI, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

GUPTA, MRINALI, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

HWANG, JOHN, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-17

HWANG, JOHN, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-17

HWANG, JOHN, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-18

HWANG, JOHN, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

HWANG, JOHN, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-20

HWANG, JOHN, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-18

LIU, WENJING, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
410
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-22

LIU, WENJING, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
410
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-20

MCGUIRE, DESMOND, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-20

MCGUIRE, DESMOND, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-14

MCGUIRE, DESMOND, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-17

MCGUIRE, DESMOND, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-17

OTOLARYNGOLOGY

BERTELSEN, CAITLIN, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†

Provider ID: N/A

400 NEWPORT CENTER

DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

**OTOLARYNGOLOGY /
OTOLOGY /
LARYNGOLOGY /
RHINOLOGY**

WILLNER, AYAL, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-12

WILLNER, AYAL, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-12

**PEDIATRIC
PULMONOLOGY**

HARRISON, AMY, MD

Provider ID: N/A

369 SAN MIGUEL DR STE
375
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-24

HARRISON, AMY, MD

Provider ID: N/A

369 SAN MIGUEL DR STE
375
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-24

HARRISON, AMY, MD

Provider ID: N/A

369 SAN MIGUEL DR STE
375

NEWPORT BEACH, CA
92660

Effective as of 01-FEB-24

HARRISON, AMY, MD

Provider ID: N/A

369 SAN MIGUEL DR STE
375
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-24

PEDIATRICS

HOLM, WILLIAM, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
802
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

SAFER, TERRA, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
105
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-23

PHYSICIANS ASSISTANT

CORTES, ELIZABETH, PA

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-23

KANE, KARA, PA†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA

92660

Effective as of 01-OCT-22

KANE, KARA, PA†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-22

KAUFMAN, BRITNEY, PA†

Provider ID: N/A

240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

KAUFMAN, BRITNEY, PA†

Provider ID: N/A

240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-15

KLEINSMITH, DARIN, PA†

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

LUCATERO, JENNIFER, PA†

Provider ID: N/A

240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-18

MOUNTAIN, KELLY, PA

Provider ID: N/A

1441 AVOCADO AVE STE
503
NEWPORT BEACH, CA
92660
Effective as of 01-APR-23

MOUNTAIN, KELLY, PA

Provider ID: N/A

1441 AVOCADO AVE STE
503
NEWPORT BEACH, CA
92660
Effective as of 01-APR-23

NORMAN, STACY, PA

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660
Effective as of 01-APR-23

NORMAN, STACY, PA

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660
Effective as of 01-APR-23

NORMAN, STACY, PA

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660
Effective as of 01-APR-23

NORMAN, STACY, PA

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660
Effective as of 01-APR-23

STANDEL, SARAH, PA†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660*
Effective as of 01-JUL-19

PODIATRIST

HAUPT, DAVID, DPM†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 706
NEWPORT BEACH, CA
92660
Effective as of 01-OCT-19

LEAMING, ROBERT, DPM

Provider ID: N/A

366 SAN MIGUEL DR STE
210
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-FEB-24

LEAMING, ROBERT, DPM

Provider ID: N/A

366 SAN MIGUEL DR STE
210
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-FEB-24

MERCADO, BRYANT, DPM

Provider ID: N/A

400 NEWPORT CENTER
DR STE 706
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-23

PSYCHOLOGIST

KEALEY, TAMMY, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660
Effective as of 01-JUN-23

KEALEY, TAMMY, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660
Effective as of 01-JUN-23

KEALEY, TAMMY, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660
Effective as of 01-JUN-23

KEALEY, TAMMY, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660
Effective as of 01-JUN-23

LIM, DEAN, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660
Effective as of 01-JUN-23

LIM, DEAN, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106

NEWPORT BEACH, CA
92660
Effective as of 01-JUN-23

LIM, DEAN, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

LIM, DEAN, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

SURGERY GENERAL

BONEV, VALENTINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

BONEV, VALENTINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

BONEV, VALENTINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

BONEV, VALENTINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

BONEV, VALENTINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

BURNS, ROBERT, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 500
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-12

SURGERY PLASTIC

MUDGE, BRADLEY, MD†

Provider ID: N/A

240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-SEP-21

MUDGE, BRADLEY, MD†

Provider ID: N/A

240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-SEP-21

MUDGE, BRADLEY, MD†

Provider ID: N/A

240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA

92660

Teleservice

Effective as of 01-JUL-12

RICHLAND, BRANDON, MD

Provider ID: N/A

1441 AVOCADO AVE STE 710
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-20

RICHLAND, BRANDON, MD

Provider ID: N/A

1441 AVOCADO AVE STE 710
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-20

RICHLAND, BRANDON, MD

Provider ID: N/A

1441 AVOCADO AVE STE 710
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-20

RICHLAND, BRANDON, MD

Provider ID: N/A

1441 AVOCADO AVE STE 710
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-24

RICHLAND, BRANDON, MD

Provider ID: N/A

1441 AVOCADO AVE STE 710
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-20

ROHING, JAMES, MD

Provider ID: N/A

1441 AVOCADO AVE STE
708
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

ROSING, JAMES, MD

Provider ID: N/A

1441 AVOCADO AVE STE
708
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

UROLOGY

AUERBACH, STEPHEN, MD

Provider ID: N/A

1401 AVOCADO AVE STE
608
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-19

ILBEIGI, PEDRAM, DO†

Provider ID: N/A

1401 AVOCADO AVE STE
608
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-19

PHAN, CU, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 409
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-18

PHAN, CU, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 409
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-12

PHAN, CU, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 409
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-12

PHAN, CU, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 409
NEWPORT BEACH, CA
92660

Effective as of 01-APR-11

FAMILY PRACTICE

SPORTS MEDICINE

YIM, EUGENE, MD†

Provider ID: N/A

21115 NEWPORT COAST DR
NEWPORT COAST, CA
92657

Effective as of 01-JAN-21

ANESTHESIOLOGY

TOWNE, BROOKE, MD

Provider ID: N/A

3998 VISTA WAY STE C
OCEANSIDE, CA 92056

Effective as of 01-JAN-24

**ANESTHESIOLOGY PAIN
MANAGEMENT**

BODDU, NAVNEET, MD

Provider ID: N/A

2125 S EL CAMINO REAL
STE 200
OCEANSIDE, CA 92054

Effective as of 01-JAN-23

COHEN, ZACHARY, MD†

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-NOV-21

COHEN, ZACHARY, MD†

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-OCT-21

COHEN, ZACHARY, MD†

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-OCT-21

COHEN, ZACHARY, MD†

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-JAN-23

COHEN, ZACHARY, MD†

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-JAN-24

DAIRO, BRANDON, MD†

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-JAN-23

FISHER, CASEY, MD

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-JUN-19

FISHER, CASEY, MD

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-JUL-21

LAWSON, ERIN, MD

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-JUL-23

LAWSON, ERIN, MD

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-DEC-23

TOWNE, BROOKE, MD

Provider ID: N/A

3998 VISTA WAY STE C
OCEANSIDE, CA 92056

Effective as of 01-DEC-23

CARDIAC

ELECTROPHYSIOLOGY

**PASHMFOROUSH,
MOHAMMAD, MD†**

Provider ID: N/A

2424 VISTA WAY STE 300
OCEANSIDE, CA 92054

Teleservice

Effective as of 01-JUN-21

CARDIOLOGY

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

605 CROUCH ST
OCEANSIDE, CA 92054

Effective as of 01-JUL-22

PARIKH, MILIND, DO†

Provider ID: N/A

605 CROUCH ST
OCEANSIDE, CA 92054

Effective as of 01-SEP-22

**RAJAMANICKAM, ANITHA,
MD†**

Provider ID: N/A

3907 WARING RD STE 3
OCEANSIDE, CA 92056

Effective as of 01-AUG-22

**CARDIOVASCULAR
DISEASE**

EL SHERIEF, KARIM, MD†

Provider ID: N/A

3230 WARING CT STE O
OCEANSIDE, CA 92056

Effective as of 01-SEP-21

KABRA, ASHISH, MD†

Provider ID: N/A

3907 WARING RD STE 3
OCEANSIDE, CA 92056

Effective as of 01-AUG-22

**RAJAMANICKAM, ANITHA,
MD†**

Provider ID: N/A

3907 WARING RD STE 3
OCEANSIDE, CA 92056

Effective as of 01-SEP-21

SAMANI, PARGOL, MD

Provider ID: N/A

3927 WARING RD STE C
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-MAY-24

SHEREV, DIMITRI, MD

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056

Effective as of 01-SEP-23

YUNG, AARON, MD†

Provider ID: N/A

2424 VISTA WAY STE 300
OCEANSIDE, CA 92054

Teleservice

Effective as of 01-JUN-21

**CERTIFIED
ACUPUNCTURIST**

LIPTON, GREGORY, LAC

Provider ID: N/A

701 SEAGAZE DR STE B
OCEANSIDE, CA 92054

Effective as of 01-SEP-21

**CERTIFIED NURSE
PRACTITIONER**

ANDOLINA, SARA, NP†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056

Effective as of 01-JAN-21

BAEK, KILHYO, NP

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057

Effective as of 01-JAN-24

BAEK, KILHYO, NP

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Effective as of 01-JAN-24

BAEK, KILHYO, NP

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054

Effective as of 01-FEB-24

BALDWIN, ANDREA, NP†

Provider ID: N/A

818 PIER VIEW WAY

OCEANSIDE, CA 92054
Effective as of 01-NOV-22

BALDWIN, ANDREA, NP†

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

CHAMBERLIN, KALIANA, NP

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-21

CHILAKA, SAMUEL, NP

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

CHIRIBOGA, MEGAN ELISE, NP

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-DEC-22

CHRISTY, TYLER, NPF

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

CHRISTY, TYLER, NPF

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

CORY, ALLISON, NP

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

CORY, ALLISON, NP

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

CORY, ALLISON, NP

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

EKLUND, BONNIE, NP

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-FEB-24

EKLUND, BONNIE, NP

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

FISHER-GAMEZ, LORI, NP

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-21

HALGEDAHL, YI, NP

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

HALGEDAHL, YI, NP

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

HALGEDAHL, YI, NP

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

HOWELL, AMANDA, NP

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

HOWELL, AMANDA, NP

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

HOWELL, AMANDA, NP

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

KESSLER, JENNIFER, NP

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-DEC-23

KESSLER, JENNIFER, NP

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-DEC-23

KESSLER, JENNIFER, NP

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-DEC-23

NAVA, PETER, NP

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

PATEMAN, CAROLYN, NP

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

PRITZKER, JOELY, NP

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-21

PRITZKER, JOELY, NP

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

PRITZKER, JOELY, NP

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

QUINN, ERIN, NP

Provider ID: N/A

3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-MAY-21

ROSE, LAURA, NP

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-DEC-23

SANTIAGO, AMANDA, NP

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-21

SHAHBAZ, LINNAE, NPF

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-MAR-24

SHAHBAZ, LINNAE, NPF

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-MAR-24

WAGNER, TASIA, NP

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

WILLIAMS, VERONICA, NPF

Provider ID: N/A

605 CROUCH ST
OCEANSIDE, CA 92054
Effective as of 01-AUG-22

WINDHAM, SUZONNE, NP

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

***CERTIFIED REGISTERED
NURSE MIDWIFE***

ALSTON, VICKIE, CRNM†

Provider ID: N/A

2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

KELLY, KATHERINE, CRNM†

Provider ID: N/A

2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

LASKY, LANA, CRNM

Provider ID: N/A

2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

MOMBERG, JESSICA, CRNM†

Provider ID: N/A

2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

PERLMAN, TAMARA, CRNM†

Provider ID: N/A

2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

SCHROEDER, MARY, NP

Provider ID: N/A

2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

517 N HORNE ST

OCEANSIDE, CA 92054
Effective as of 01-JUL-22

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

CHIROPRACTOR

ANDREWS, BRAD, DC

Provider ID: N/A

619 CROUCH ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

JU, NATHANIEL, DC†

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

JU, NATHANIEL, DC†

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

DERMATOLOGY

AGUIRRE, KRISTEN, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

AGUIRRE, KRISTEN, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-20

AGUIRRE, KRISTEN, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-FEB-24

ANGRA, KUNAL, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-DEC-21

ANGRA, KUNAL, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-22

ANGRA, KUNAL, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-NOV-20

GILBOA, RUTH, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-MAR-12

GILBOA, RUTH, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20

GILBOA, RUTH, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-22

GILBOA, RUTH, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

LEE, HELEN, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-NOV-22

LEE, HELEN, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-AUG-22

ROSS, ANDREW, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20

ROSS, ANDREW, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20

ROSS, ANDREW, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

ROSS, ANDREW, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-22

ROSS, ANDREW, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SAMADY, JOSEPH, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-22

SAMADY, JOSEPH, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SAMADY, JOSEPH, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-MAR-12

SAMADY, JOSEPH, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20

SAMADY, JOSEPH, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-APR-07

SAMADY, JOSEPH, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

SIRICHOTIRATANA, MELISSA, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-23

THIELE, JENS, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-MAR-12

THIELE, JENS, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

THIELE, JENS, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-09

THIELE, JENS, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-22

THIELE, JENS, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

TSE, YARDY, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

TSE, YARDY, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

VENKAT, ARUN, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-22

VENKAT, ARUN, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-13

VENKAT, ARUN, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20

VENKAT, ARUN, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

WAGNER, MEREDITH, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

WONG, DARRYL, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

WONG, DARRYL, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-MAR-12

WONG, DARRYL, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-22

ENDOCRINOLOGY
REPRODUCTIVE

COFFLER, MICKEY, MD†
Provider ID: N/A

3231 WARING CT STE M
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

FAMILY PRACTICE

DONNELL, MARTI, MD
Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054*
Effective as of 01-NOV-23

DONNELL, MARTI, MD
Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057*
Effective as of 01-NOV-23

DONNELL, MARTI, MD
Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054*
Effective as of 01-NOV-23

MARTINEZ, LESLY, MD
Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057*
Effective as of 01-APR-23

MARTINEZ, LESLY, MD
Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054*
Effective as of 01-APR-23

MARTINEZ, LESLY, MD
Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054*
Effective as of 01-APR-23

PANICKER, CIBU, MD
Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-SEP-18

PUDOL, CHRISTOPHER, DO
Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057*
Teleservice
Effective as of 01-MAR-24

PUDOL, CHRISTOPHER, DO
Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054*
Teleservice
Effective as of 01-MAR-24

PUDOL, CHRISTOPHER, DO
Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054*
Teleservice
Effective as of 01-MAR-24

VIDAL, MONICA, DO†
Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-AUG-22

VIDAL, MONICA, DO†
Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-AUG-22

VIDAL, MONICA, DO†
Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-AUG-22

ZAMPELLO, LISA, MD
Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-APR-23

FAMILY PRACTICE
SPORTS MEDICINE

STARK, ERIK, MD†
Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

GASTROENTEROLOGY

CHIAO, HELLEN, MD†
Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

CHIAO, HELLEN, MD†
Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

CHIAO, HELLEN, MD†
Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

CHIAO, HELLEN, MD†
Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

**DEVEREAUX, CHRISTOPHER,
MD†**

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

**DEVEREAUX, CHRISTOPHER,
MD†**

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

**DEVEREAUX, CHRISTOPHER,
MD†**

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

**DEVEREAUX, CHRISTOPHER,
MD†**

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

**DEVEREAUX, CHRISTOPHER,
MD†**

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-MAR-01

KROL, THOMAS, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUN-99

KROL, THOMAS, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

KROL, THOMAS, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

KROL, THOMAS, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

NOVO, MEGAN, MD

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-23

NOVO, MEGAN, MD

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-23

NOVO, MEGAN, MD

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUL-23

SHAD, JAVAID, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SHAD, JAVAID, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SHAD, JAVAID, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SHAD, JAVAID, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

SHAD, JAVAID, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-DEC-07

SHIM, MICHAEL, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

SHIM, MICHAEL, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-FEB-10

SHIM, MICHAEL, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SHIM, MICHAEL, MD†

Provider ID: N/A

3923 WARING RD STE A

OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SHIM, MICHAEL, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

VIERNES, MATTHEW, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

VIERNES, MATTHEW, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

VIERNES, MATTHEW, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-SEP-01

VIERNES, MATTHEW, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

**GYNECOLOGIC
ONCOLOGY**

ESKANDER, RAMEZ, MD†

Provider ID: N/A

4002 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-21

**HEMATOLOGY /
ONCOLOGY**

SINGH, HIMANI, MD†

Provider ID: N/A

3617 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SINGH, HIMANI, MD†

Provider ID: N/A

3617 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

INTERNAL MEDICINE

KHARADJIAN, TALAR, MD†

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-22

KHARADJIAN, TALAR, MD†

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-21

KHARADJIAN, TALAR, MD†

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

LIU, ANDREW, MD

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Effective as of 01-SEP-23

MACMURRAY, MICHAEL, MD

Provider ID: N/A

818 PIER VIEW WAY

OCEANSIDE, CA 92054
Effective as of 01-NOV-23

MOOLANI, UJJALA, MD

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Effective as of 01-MAY-23

PAROLY, WARREN, MD†

Provider ID: N/A

3617 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

**LICENSED CLINICAL
SOCIAL WORKER**

ACOSTA, AZUCENA, LCSW

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

ACOSTA, AZUCENA, LCSW

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

ACOSTA, AZUCENA, LCSW

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Teleservice
Effective as of 01-JAN-24

CRUZ, VANESSA, LCSW

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

CRUZ, VANESSA, LCSW

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-21

CRUZ, VANESSA, LCSW

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

**DOUGHERTY, CHRISTINE,
LCSW**

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

**DOUGHERTY, CHRISTINE,
LCSW**

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

**DOUGHERTY, CHRISTINE,
LCSW**

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

GODINEZ, BRENDA, LCSW

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

GODINEZ, BRENDA, LCSW

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

GODINEZ, BRENDA, LCSW

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

MENDEZ, ADRIANA, LCSW

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

MENDEZ, ADRIANA, LCSW

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

MENDEZ, ADRIANA, LCSW

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Teleservice
Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

SANCHEZ, ADRIANA, LCSW

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

SANCHEZ, ADRIANA, LCSW

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

SANCHEZ, ADRIANA, LCSW

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

SMITH, SONYA, LCSW

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

SMITH, SONYA, LCSW

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

SMITH, SONYA, LCSW

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

WILSON, CARLENE, LCSW

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

ZAPPONE, ALIDA, LCSW

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Teleservice
Effective as of 01-JAN-24

ZAPPONE, ALIDA, LCSW

Provider ID: N/A

818 PIER VIEW WAY

OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

ZAPPONE, ALIDA, LCSW

Provider ID: N/A
517 N HORNE ST
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

**MARRIAGE FAMILY
THERAPIST**

MEYERHOF, GRETA, MFT†

Provider ID: N/A
517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

MEYERHOF, GRETA, MFT†

Provider ID: N/A
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

MEYERHOF, GRETA, MFT†

Provider ID: N/A
4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

MEDICAL ONCOLOGY

PAROLY, WARREN, MD†

Provider ID: N/A
3617 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

NEPHROLOGY

KHARADJIAN, TALAR, MD†

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUN-21

KHARADJIAN, TALAR, MD†

Provider ID: N/A
3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUL-21

LIU, ANDREW, MD

Provider ID: N/A
3300 VISTA WAY
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-DEC-23

LIU, ANDREW, MD

Provider ID: N/A
3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

LIU, ANDREW, MD

Provider ID: N/A
3300 VISTA WAY
OCEANSIDE, CA 92056*
Teleservice
Effective as of 01-OCT-23

LIU, ANDREW, MD

Provider ID: N/A
3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Effective as of 01-NOV-23

**OBSTETRICS /
GYNECOLOGY**

BINDER, PRATIBHA, MD†

Provider ID: N/A
4002 VISTA WAY

OCEANSIDE, CA 92056
Effective as of 01-JUL-21

EBRAHIMI ADIB, TANNAZ, MD†

Provider ID: N/A
3927 WARING RD STE D
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

EBRAHIMI ADIB, TANNAZ, MD†

Provider ID: N/A
3927 WARING RD STE D
OCEANSIDE, CA 92056
Effective as of 01-JAN-19

MAZAREI, RAHELE, DO†

Provider ID: N/A
3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-MAY-21

MAZAREI, RAHELE, DO†

Provider ID: N/A
3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-MAR-20

PENVOSE-YI, JAN, MD†

Provider ID: N/A
2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

SCHWEIKERT, SUZANNE, MD†

Provider ID: N/A
2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

SCHWEIKERT, SUZANNE, MD†

Provider ID: N/A
2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-APR-15

SUNTAY, BERK, MD†

Provider ID: N/A

3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-MAY-21

SUNTAY, BERK, MD†

Provider ID: N/A

3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-JUN-21

OPHTHALMOLOGY

JACOBSEN, BRADLEY, MD

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-OCT-23

JACOBSEN, BRADLEY, MD

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-JUL-23

NGUYEN, VINCENT, MD†

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

NGUYEN, VINCENT, MD†

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-APR-20

ROBINSON, FANE, MD†

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-FEB-10

SHEILS, CATHERINE, MD

Provider ID: N/A

3637 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-24

SMITH, MARK, MD†

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-FEB-10

SMITH, MARK, MD†

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SONG, DELU, MD

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-OCT-23

SONG, DELU, MD

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

SONG, DELU, MD

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-JUL-23

OPTOMETRIST

GEE, JENNIFER, OD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

GEE, JENNIFER, OD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

GEE, JENNIFER, OD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

GEE, JENNIFER, OD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

KASAI, SARAH, OD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-DEC-23

KASAI, SARAH, OD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-DEC-23

KIM, MICHAEL, OD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

KIM, MICHAEL, OD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

KIM, MICHAEL, OD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

KIM, MICHAEL, OD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

MORA, WENDY, OD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

MORA, WENDY, OD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

MORA, WENDY, OD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

MORA, WENDY, OD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

RICH, RYAN, OD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

RICH, RYAN, OD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

RICH, RYAN, OD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

RICH, RYAN, OD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

RING, ROBERT, OD†

Provider ID: N/A

3998 VISTA WAY STE 204
OCEANSIDE, CA 92056
Effective as of 01-SEP-22

TAM, EMILY, OD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

TAM, EMILY, OD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

TAM, EMILY, OD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

TAM, EMILY, OD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

OTOLARYNGOLOGY

CARROLL, SARAH, MD†

Provider ID: N/A

3907 WARING RD STE 1

OCEANSIDE, CA 92056
Effective as of 01-MAY-21

CARROLL, SARAH, MD†

Provider ID: N/A

3907 WARING RD STE 1
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

CARROLL, SARAH, MD†

Provider ID: N/A

3907 WARING RD STE 1
OCEANSIDE, CA 92056
Effective as of 01-OCT-21

**OTOLARYNGOLOGY /
OTOLOGY /
LARYNGOLOGY /
RHINOLOGY**

BERRY, JULIE, MD

Provider ID: N/A

3909 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-APR-23

JACOBS, ROBERT, MD†

Provider ID: N/A

3907 WARING RD STE 1A
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

JACOBS, ROBERT, MD†

Provider ID: N/A

3907 WARING RD STE 1A
OCEANSIDE, CA 92056
Effective as of 01-JUN-99

KUSHNARYOV, ANTON, MD

Provider ID: N/A

3909 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-APR-23

REISMAN, BRUCE, MD†

Provider ID: N/A

3907 WARING RD STE 1
OCEANSIDE, CA 92056

Effective as of 01-JUN-99

PEDIATRICS

CURLEY, EDWARD, MD†

Provider ID: N/A

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Effective as of 01-FEB-15

RONAN, KEVIN, MD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057

Effective as of 01-MAY-23

ZACHRY, ALISON, MD†

Provider ID: N/A

605 CROUCH ST
OCEANSIDE, CA 92054

Effective as of 01-SEP-22

ZACHRY, ALISON, MD†

Provider ID: N/A

619 CROUCH ST
OCEANSIDE, CA 92054

Effective as of 01-SEP-22

ZACHRY, ALISON, MD†

Provider ID: N/A

3220 MISSION AVE STE 1
OCEANSIDE, CA 92058

Effective as of 01-SEP-22

ZACHRY, ALISON, MD†

Provider ID: N/A

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Effective as of 01-SEP-22

ZACHRY, ALISON, MD†

Provider ID: N/A

2210 MESA DR STE 5
OCEANSIDE, CA 92054

Effective as of 01-SEP-22

**PHYSICAL MEDICINE /
REHABILITATION**

CURRY, JASON, MD†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

FISHER, CASEY, MD

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-JAN-21

PERRIZO, NATHAN, DO

Provider ID: N/A

3998 VISTA WAY STE 108
OCEANSIDE, CA 92056

Effective as of 01-SEP-21

RICHARDSON, HENRY, MD†

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-MAY-23

PHYSICIANS ASSISTANT

BASIN, NATALIE, PA

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-DEC-23

BASIN, NATALIE, PA

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-AUG-23

BEITTER, KEERSTIN, PA†

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-JAN-23

BRODSKY, DENNIS, PA

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-FEB-22

COWAN, JOHN, PA†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

GLASSER, DANIEL, PA

Provider ID: N/A

605 CROUCH ST
OCEANSIDE, CA 92054

Effective as of 01-JUL-22

KUPIS, ROBERT, PA

Provider ID: N/A

605 CROUCH ST
OCEANSIDE, CA 92054

Effective as of 01-SEP-22

PAUL, ROBERT, PA†

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-FEB-22

POLLINGTON, CHRISTOPHER, PA

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-OCT-23

RAMOS, ELENA, PA

Provider ID: N/A

605 CROUCH ST BLDG C
OCEANSIDE, CA 92054

Effective as of 01-AUG-23

REUSCH, KEVIN, PA

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-OCT-23

SKULSKY, EVA, PA†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056

Effective as of 01-JAN-21

THEPVONGSA, MELISSA, PA

Provider ID: N/A

605 CROUCH ST BLDG C
OCEANSIDE, CA 92054

Effective as of 01-SEP-22

THOMAS, ROGER, PA

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-JUL-23

WALLACE, STEPHANIE, PA

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057

Effective as of 01-FEB-24

WRIGHT, DEREK, PA

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056

Effective as of 01-AUG-23

PODIATRIST

BOBICK, BRIAN, DPM†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

BOBICK, BRIAN, DPM†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

BROOKS, JEFFREY, DPM

Provider ID: N/A

3230 WARING CT STE M
OCEANSIDE, CA 92056

Effective as of 01-APR-21

HAN, JAMES, DPM

Provider ID: N/A

2119 S EL CAMINO REAL
OCEANSIDE, CA 92054

Effective as of 01-DEC-11

SPRINGER, DEWAIN, DPM†

Provider ID: N/A

2191 S EL CAMINO REAL
STE 101
OCEANSIDE, CA 92054

Effective as of 01-JUL-18

PSYCHIATRY

BELL, JENNIFER, DO

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057

Effective as of 01-FEB-24

BELL, JENNIFER, DO

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057

Effective as of 01-FEB-24

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

520 N COAST HWY STE 103
OCEANSIDE, CA 92054

Effective as of 01-AUG-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

520 N COAST HWY STE 103
OCEANSIDE, CA 92054

Effective as of 01-AUG-22

CHRISTIANSON, WARREN, DO

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054

Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057

Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-AUG-21

PATEL, MITESH, MD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

PULMONARY DISEASES

CORONA, FRANK, MD

Provider ID: N/A

3231 WARING CT STE D
OCEANSIDE, CA 92056
Effective as of 01-JUN-99

CORONA, FRANK, MD

Provider ID: N/A

3907 WARING RD STE 2
OCEANSIDE, CA 92056
Effective as of 01-AUG-23

VISEROI, MARIUS, MD†

Provider ID: N/A

3231 WARING CT STE D
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

YAMANAKA, MARK, MD

Provider ID: N/A

3907 WARING RD STE 2
OCEANSIDE, CA 92056
Effective as of 01-AUG-23

RADIATION ONCOLOGY

HOOPES, DAVID, MD

Provider ID: N/A

4002 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

RASH, DOMINIQUE, MD

Provider ID: N/A

4002 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

URBANIC, JAMES, MD

Provider ID: N/A

4002 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

**REGISTERED PHYSICAL
THERAPIST**

AMBROSE, CHRISTOPHER, PT

Provider ID: N/A

467 COLLEGE BLVD STE 6
OCEANSIDE, CA 92057
Effective as of 01-DEC-21

BOUCHARD, REID, PT

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Effective as of 01-OCT-21

BOUTELLE, BARBARA, PT

Provider ID: N/A

467 COLLEGE BLVD STE 6
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

BOUTELLE, DAVID, PT

Provider ID: N/A

467 COLLEGE BLVD STE 6
OCEANSIDE, CA 92057
Effective as of 01-DEC-21

BOUTELLE, BARBARA, PT

Provider ID: N/A

457 COLLEGE BLVD STE 6
OCEANSIDE, CA 92057
Effective as of 01-FEB-24

DOULL, MATTHEW, PT

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-JUN-23

FARRAR, COURTNEY, PT†

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-JAN-23

FARRAR, COURTNEY, PT†

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-JAN-23

GARBER, MARC, PT

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-OCT-21

LANGIS, TANYA, PT

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-OCT-21

MCGEE, JACQUELINE, PT

Provider ID: N/A

467 COLLEGE BLVD STE 6
OCEANSIDE, CA 92057

Effective as of 01-DEC-21

OSORIO, SANTIAGO, PT

Provider ID: N/A

2424 VISTA WAY STE 120
OCEANSIDE, CA 92054

Effective as of 01-SEP-22

PENNINGTON, JENNIFER, PT

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-OCT-21

TAMAYO, SYDNIE, PT

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-OCT-23

WILSON, JENNIFER, PT

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-OCT-21

RHEUMATOLOGY

BEJKO, ETELEVA, MD

Provider ID: N/A

3998 VISTA WAY STE E
OCEANSIDE, CA 92056

Effective as of 01-JAN-24

BRION, PAUL, MD

Provider ID: N/A

3998 VISTA WAY STE E
OCEANSIDE, CA 92056

Effective as of 01-FEB-24

SURGERY

CARDIOVASCULAR

WU, DARRELL, MD†

Provider ID: N/A

3156 VISTA WAY STE 100
OCEANSIDE, CA 92056

Effective as of 01-JUL-21

SURGERY COLON

SURGERY

NASSERY, KRISTEN, MD†

Provider ID: N/A

3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-JAN-21

NASSERY, KRISTEN, MD†

Provider ID: N/A

3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-SEP-21

SURGERY GENERAL

DEEMER, ANDREW, MD†

Provider ID: N/A

3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-SEP-21

DEEMER, ANDREW, MD†

Provider ID: N/A

3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-JAN-21

JAMSHIDI-NEZHAD,

MOHAMMAD, DO

Provider ID: N/A

3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-JAN-21

SEIDEN, GRANT, MD†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

WAKILY, HUSSNA, MD†

Provider ID: N/A

3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-SEP-21

WAKILY, HUSSNA, MD†

Provider ID: N/A

3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-JAN-21

SURGERY HAND

DAUGHERTY, DAVID, MD†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

HARTMAN, ANDREW, MD†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

SEIDEN, GRANT, MD†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

SURGERY ORTHOPEDIC

AMORY, DAVID, MD†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

DAUGHERTY, DAVID, MD†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

KANE, NORMAN, MD†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

KANE, NORMAN, MD†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

STARK, ERIK, MD†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

UROLOGY

BOONJINDASUP, AARON, MD

Provider ID: N/A

3907 WARING RD STE 4
OCEANSIDE, CA 92056

Effective as of 01-SEP-21

FRASIER, BRADLEY, MD†

Provider ID: N/A

3609 VISTA WAY
OCEANSIDE, CA 92056

Effective as of 01-JUN-99

FRASIER, BRADLEY, MD†

Provider ID: N/A

3609 VISTA WAY
OCEANSIDE, CA 92056

Effective as of 01-JAN-21

FRASIER, BRADLEY, MD†

Provider ID: N/A

3609 VISTA WAY
OCEANSIDE, CA 92056

Effective as of 01-SEP-21

GUERENA, MICHAEL, MD†

Provider ID: N/A

3609 VISTA WAY
OCEANSIDE, CA 92056

Effective as of 01-SEP-21

GUERENA, MICHAEL, MD†

Provider ID: N/A

3609 VISTA WAY
OCEANSIDE, CA 92056

Effective as of 01-JAN-21

GUERENA, MICHAEL, MD†

Provider ID: N/A

3609 VISTA WAY
OCEANSIDE, CA 92056

Effective as of 01-JUN-99

PHILLIPS, JASON, MD†

Provider ID: N/A

3609 VISTA WAY
OCEANSIDE, CA 92056

Effective as of 01-JAN-15

PHILLIPS, JASON, MD†

Provider ID: N/A

3907 WARING RD STE 4
OCEANSIDE, CA 92056

Effective as of 01-SEP-21

SHAPIRO, ROBERT, MD

Provider ID: N/A

3609 VISTA WAY
OCEANSIDE, CA 92056

Effective as of 01-AUG-23

VILCHIS, CAROLINE, MD†

Provider ID: N/A

3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-DEC-13

VILCHIS, CAROLINE, MD†

Provider ID: N/A

3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

VILCHIS, CAROLINE, MD†

Provider ID: N/A

3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

**CERTIFIED NURSE
PRACTITIONER**

ADDO, BELINDA, NP†

Provider ID: N/A

524 W 4TH ST STE B
PERRIS, CA 92570
Effective as of 01-OCT-22

ONUOHA, NOJA, NP†

Provider ID: N/A

1675 N PERRIS BLVD STE G1
PERRIS, CA 92571
Effective as of 01-SEP-22

CHIROPRACTOR

SCHRIEFER, NOAH, DC†

Provider ID: N/A

1675 N PERRIS BLVD STE G
PERRIS, CA 92571
Effective as of 01-SEP-22

TRAINER, JASON, DC†

Provider ID: N/A

1675 N PERRIS BLVD STE G1
PERRIS, CA 92571
Effective as of 01-JUL-22

NEUROLOGY CHILD

ARCA, CHRIS, MD

Provider ID: N/A

215 W 4TH ST
PERRIS, CA 92570
Effective as of 01-NOV-23

PEDIATRICS

LEE, ALAN, MD†

Provider ID: N/A

215 W 4TH ST
PERRIS, CA 92570*
Effective as of 01-AUG-20

LEE, ALAN, MD†

Provider ID: N/A

215 W 4TH ST
PERRIS, CA 92570*
Effective as of 01-AUG-20

**PREVENTATIVE MEDICINE
GENERAL**

LAFONTANT, JEAN, MD†

Provider ID: N/A

524 W 4TH ST STE B
PERRIS, CA 92570
Effective as of 01-SEP-22

LAFONTANT, JEAN, MD†

Provider ID: N/A

524 W 4TH ST STE B
PERRIS, CA 92570
Effective as of 01-SEP-22

LAFONTANT, JEAN, MD†

Provider ID: N/A

524 W 4TH ST STE B
PERRIS, CA 92570

Effective as of 01-JAN-21

ANESTHESIOLOGY

PRASAD, RUPA, MD†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064
Teleservice
Effective as of 01-NOV-23

**ANESTHESIOLOGY PAIN
MANAGEMENT**

COHEN, ZACHARY, MD

Provider ID: N/A

15725 POMERADO RD STE
201
POWAY, CA 92064
Effective as of 01-JAN-23

COHEN, ZACHARY, MD†

Provider ID: N/A

15725 POMERADO RD STE
210
POWAY, CA 92064
Effective as of 01-JAN-24

FISHER, CASEY, MD

Provider ID: N/A

15725 POMERADO RD STE
201
POWAY, CA 92064
Effective as of 01-APR-23

PRASAD, RUPA, MD†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064
Teleservice
Effective as of 01-NOV-21

CARDIOLOGY

BAYAT, HAMED, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

CHEN, ANDREW, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

MULVIHILL, DANIEL, MD†

Provider ID: N/A

15611 POMERADO RD FL 4
POWAY, CA 92064
Effective as of 01-SEP-22

SERRY, ROD, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

**VANICHSARN, CHRISTOPHER,
MD†**

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-MAR-24

**CARDIOVASCULAR
DISEASE**

NANAVATI, VIMAL, MD

Provider ID: N/A

15706 POMERADO RD STE
104
POWAY, CA 92064
Effective as of 01-FEB-23

SHEREV, DIMITRI, MD

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064
Effective as of 01-SEP-23

ZAKOV, KAMEN, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

**CERTIFIED NURSE
PRACTITIONER**

BISHOP, LESLIE, NP†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064
Teleservice
Effective as of 01-JAN-21

TRAN, DAPHNE, NP

Provider ID: N/A

15611 POMERADO RD
POWAY, CA 92064
Effective as of 01-FEB-23

WILLIAMS, SHANTRICE, NP

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064
Effective as of 01-FEB-24

WRIGHT, KIMBERLY, NP†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-JAN-21

CLINICAL

NEUROPSYCHOLOGIST

KAUP, ALLISON, PhD†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064
Teleservice
Effective as of 01-MAR-21

DERMATOLOGY

ARMSTRONG, PATRICK, MD

Provider ID: N/A

15721 POMERADO RD STE
300
POWAY, CA 92064
Effective as of 01-MAR-24

ARMSTRONG, PATRICK, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

BROGAN, JACQUELINE, MD

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064
Effective as of 01-FEB-24

CELANO, NICHOLAS, MD

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064
Effective as of 01-JAN-24

CELANO, NICHOLAS, MD

Provider ID: N/A

15725 POMERADO RD STE

102
POWAY, CA 92064
Effective as of 01-NOV-23

CHIANG, JENNIFER, MD

Provider ID: N/A
15725 POMERADO RD STE
102
POWAY, CA 92064
Effective as of 01-JAN-24

GONZALEZ, JOSE, MD

Provider ID: N/A
15725 POMERADO RD STE
102
POWAY, CA 92064
Effective as of 01-FEB-24

JOU, PAUL, MD†

Provider ID: N/A
15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

LIN, SHINKO, MD

Provider ID: N/A
15725 POMERADO RD STE
102
POWAY, CA 92064
Effective as of 01-MAR-24

NELSON, AISLYN, MD

Provider ID: N/A
15725 POMERADO RD STE
102
POWAY, CA 92064
Effective as of 01-FEB-24

SATEESH, BROOKE, MD

Provider ID: N/A
15725 POMERADO RD STE
102
POWAY, CA 92064
Effective as of 01-JAN-24

TYAGI, ABHILASHA, MD

Provider ID: N/A
15725 POMERADO RD STE
102
POWAY, CA 92064
Effective as of 01-JAN-24

UEBELHOER, NATHAN, DO†

Provider ID: N/A
15725 POMERADO RD STE
102
POWAY, CA 92064
Effective as of 01-JAN-24

**ENDOCRINOLOGY
METABOLISM DIABETES**

SCHNEIDER, DARIUS, MD

Provider ID: N/A
15525 POMERADO RD STE
A1
POWAY, CA 92064
Effective as of 01-JAN-23

SCHNEIDER, DARIUS, MD

Provider ID: N/A
15525 POMERADO RD STE
A1
POWAY, CA 92064
Effective as of 01-DEC-22

FAMILY PRACTICE

NAJAND, SADAF, MD†

Provider ID: N/A
15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

WHITE, KERI, MD†

Provider ID: N/A
15611 POMERADO RD STE
400

POWAY, CA 92064
Effective as of 01-SEP-22

GASTROENTEROLOGY

ZAKKO, MARAM, MD†

Provider ID: N/A
15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-JAN-21

INTERNAL MEDICINE

LIU, ANDREW, MD

Provider ID: N/A
15708 POMERADO RD STE
N-205
POWAY, CA 92064
Effective as of 01-SEP-23

MANSOUR, DAVID, DO†

Provider ID: N/A
13010 POWAY RD
POWAY, CA 92064
Effective as of 01-AUG-22

MOOLANI, UJJALA, MD

Provider ID: N/A
15708 POMERADO RD STE
N-205
POWAY, CA 92064
Effective as of 01-MAY-23

REDDY, SMITHA, MD†

Provider ID: N/A
15725 POMERADO RD STE
117
POWAY, CA 92064
Effective as of 01-SEP-22

REDDY, SMITHA, MD†

Provider ID: N/A
15725 POMERADO RD STE
117

POWAY, CA 92064
Effective as of 01-JAN-21

REDDY, SMITHA, MD†

Provider ID: N/A

15725 POMERADO RD STE
117

POWAY, CA 92064
Effective as of 01-JAN-23

THAPER, MOHINDERPAL, MD†

Provider ID: N/A

15611 POMERADO RD STE
575

POWAY, CA 92064
Effective as of 01-JAN-21

**LICENSED CLINICAL
SOCIAL WORKER**

BELINSKY, MARIA, LCSW

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-FEB-24

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A

15708 POMERADO RD STE
N-205

POWAY, CA 92064
Effective as of 01-MAY-23

BOISKIN, MARK, MD†

Provider ID: N/A

15708 POMERADO RD STE
N-205

POWAY, CA 92064
Effective as of 01-JUL-22

BOISKIN, MARK, MD

Provider ID: N/A

15644 POMERADO RD STE

104
POWAY, CA 92064
Effective as of 01-JAN-24

BOISKIN, MARK, MD†

Provider ID: N/A

15708 POMERADO RD STE
N-205

POWAY, CA 92064
Effective as of 01-JAN-21

BOISKIN, MARK, MD†

Provider ID: N/A

15708 POMERADO RD STE
N-205

POWAY, CA 92064
Effective as of 01-JAN-16

GREENSTEIN, JOSHUA, MD†

Provider ID: N/A

15708 POMERADO RD STE
N-205

POWAY, CA 92064
Effective as of 01-JUL-22

NEYAZ, MOHAMMED, DO

Provider ID: N/A

15708 POMERADO RD STE
N-205

POWAY, CA 92064
Effective as of 01-NOV-23

SHAPIRO, MARK, MD†

Provider ID: N/A

15708 POMERADO RD STE
N-205

POWAY, CA 92064
Teleservice

Effective as of 01-JUL-22

NEUROLOGY

DELANEY, MICHAEL, MD†

Provider ID: N/A

15611 POMERADO RD STE

505
POWAY, CA 92064
Teleservice
Effective as of 01-AUG-19

DELANEY, MICHAEL, MD†

Provider ID: N/A

15611 POMERADO RD STE
505

POWAY, CA 92064
Teleservice

Effective as of 01-JAN-21

DELANEY, MICHAEL, MD†

Provider ID: N/A

15611 POMERADO RD STE
505

POWAY, CA 92064
Teleservice

Effective as of 01-JAN-21

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A

15611 POMERADO RD STE
505

POWAY, CA 92064
Effective as of 01-NOV-21

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A

15611 POMERADO RD STE
505

POWAY, CA 92064
Effective as of 01-FEB-22

HO, GILBERT, MD

Provider ID: N/A

15708 POMERADO RD STE
N103

POWAY, CA 92064*
Effective as of 01-OCT-23

LUHAR, RIYA, DO

Provider ID: N/A

15611 POMERADO RD STE

505
POWAY, CA 92064
Teleservice
Effective as of 01-JAN-23

LUHAR, RIYA, DO

Provider ID: N/A
15611 POMERADO RD STE
505
POWAY, CA 92064
Teleservice
Effective as of 01-AUG-23

WANG, ANCHI, MD†

Provider ID: N/A
15611 POMERADO RD STE
505
POWAY, CA 92064
Effective as of 01-JAN-21

WANG, CHUNYANG, MD†

Provider ID: N/A
15611 POMERADO RD STE
505
POWAY, CA 92064
Teleservice
Effective as of 01-JAN-24

WANG, CHUNYANG, MD†

Provider ID: N/A
15611 POMERADO RD STE
505
POWAY, CA 92064
Teleservice
Effective as of 01-NOV-23

**OBSTETRICS /
GYNECOLOGY**

FAN, LI, MD†

Provider ID: N/A
15525 POMERADO RD STE
C1
POWAY, CA 92064*

Effective as of 01-NOV-21

OPHTHALMOLOGY

LOZIER, JEFFREY, MD†

Provider ID: N/A
15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

OPTOMETRIST

KIM, MICHELLE, OD

Provider ID: N/A
15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

**PHYSICAL MEDICINE /
REHABILITATION**

BULLOCK, ANDREW, DO†

Provider ID: N/A
15644 POMERADO RD STE
204
POWAY, CA 92064
Effective as of 01-JAN-21

BULLOCK, ANDREW, DO†

Provider ID: N/A
15644 POMERADO RD STE
204
POWAY, CA 92064
Effective as of 01-JUL-22

BULLOCK, ANDREW, DO†

Provider ID: N/A
15644 POMERADO RD STE
204
POWAY, CA 92064
Effective as of 01-SEP-22

FISHER, CASEY, MD

Provider ID: N/A

15725 POMERADO RD STE
210
POWAY, CA 92064
Effective as of 01-JAN-21

TAHAEI, SEYED, MD†

Provider ID: N/A
15708 POMERADO RD STE
N-207
POWAY, CA 92064
Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

ASTOURIAN, PATRICK, PA†

Provider ID: N/A
15725 POMERADO RD STE
117
POWAY, CA 92064
Teleservice
Effective as of 01-SEP-22

CAMERON, KENDALL, PA

Provider ID: N/A
15725 POMERADO RD STE
117
POWAY, CA 92064
Teleservice
Effective as of 01-AUG-22

CHATFIELD, ALEXANDRA, PA†

Provider ID: N/A
15611 POMERADO RD STE
525
POWAY, CA 92064
Effective as of 01-FEB-21

GRINDLE, SILVIA, PA†

Provider ID: N/A
13525 MIDLAND RD STE F
POWAY, CA 92064
Effective as of 01-JAN-21

HUANG, STEPHANIE, PA†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064

Effective as of 01-JAN-21

RAHIM, ARIANNA, PA

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064

Effective as of 01-OCT-23

WEBB, SHANNON, PA

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064

Teleservice

Effective as of 01-MAY-23

PODIATRIST

BANKS, JAMINELLI, DPM†

Provider ID: N/A

15706 POMERADO RD STE
S-102
POWAY, CA 92064

Effective as of 01-SEP-22

CHU, ANDREW, DPM†

Provider ID: N/A

15706 POMERADO RD STE
S-102
POWAY, CA 92064

Effective as of 01-SEP-22

CHU, ANDREW, DPM†

Provider ID: N/A

15706 POMERADO RD STE
S-102
POWAY, CA 92064

Effective as of 01-NOV-21

HAN, KYOUNG, DPM

Provider ID: N/A

15706 POMERADO RD STE
102
POWAY, CA 92064*

Effective as of 01-NOV-21

NEGRON, RICARDO, DPM

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-JAN-21

READ, TRENTON, DPM

Provider ID: N/A

15706 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-APR-23

SMITH, COLLIN, DPM†

Provider ID: N/A

15706 POMERADO RD STE
S102
POWAY, CA 92064

Effective as of 01-SEP-22

SMITH, COLLIN, DPM†

Provider ID: N/A

15706 POMERADO RD STE
S102
POWAY, CA 92064

Effective as of 01-FEB-21

SMITH, COLLIN, DPM†

Provider ID: N/A

15706 POMERADO RD STE
S102
POWAY, CA 92064

Effective as of 01-DEC-21

PSYCHIATRY

ANDERSEN, CLAIRE, MD

Provider ID: N/A

13020 POWAY RD

POWAY, CA 92064

Effective as of 01-JAN-21

ANDERSEN, CLAIRE, MD

Provider ID: N/A

13020 POWAY RD
POWAY, CA 92064

Effective as of 01-JAN-21

MODHWADIA, MAMTA, MD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-FEB-24

MODHWADIA, MAMTA, MD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-FEB-24

PEDERSEN, SUESAN, MD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-AUG-22

PEDERSEN, SUESAN, MD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-AUG-22

**POSTLETHWAITE,
ALEJANDRA, MD†**

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-JAN-24

**POSTLETHWAITE,
ALEJANDRA, MD†**

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-JAN-24

PSYCHIATRY CHILD

ANDERSEN, CLAIRE, MD

Provider ID: N/A

13020 POWAY RD
POWAY, CA 92064

Effective as of 01-JAN-21

ANDERSEN, CLAIRE, MD

Provider ID: N/A

13020 POWAY RD
POWAY, CA 92064

Effective as of 01-JAN-21

PSYCHOLOGIST

KAUP, ALLISON, PhD†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-FEB-24

KAUP, ALLISON, PhD†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-NOV-23

KAUP, ALLISON, PhD†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-FEB-24

KAUP, ALLISON, PhD†

Provider ID: N/A

15611 POMERADO RD STE

505

POWAY, CA 92064

Teleservice

Effective as of 01-NOV-23

MEJIAS, JUAN, PhD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-JAN-24

MEJIAS, JUAN, PhD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-JAN-24

**VALLEZ-BARLAM, ANDREA,
PhD**

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-JAN-24

**VALLEZ-BARLAM, ANDREA,
PhD**

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-DEC-23

**VALLEZ-BARLAM, ANDREA,
PhD**

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-JAN-24

**VALLEZ-BARLAM, ANDREA,
PhD**

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-DEC-23

PULMONARY DISEASES

BENDER, FRANK, MD†

Provider ID: N/A

15611 POMERADO RD STE
580
POWAY, CA 92064

Effective as of 01-SEP-22

RHEUMATOLOGY

RAO, SOUMYA, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064

Effective as of 01-SEP-22

REDDY, SMITHA, MD†

Provider ID: N/A

15725 POMERADO RD STE
117
POWAY, CA 92064

Effective as of 01-SEP-22

REDDY, SMITHA, MD†

Provider ID: N/A

15725 POMERADO RD STE
117
POWAY, CA 92064

Effective as of 01-DEC-18

SURGERY ORTHOPEDIC

BALIKIAN, PHILIP, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064

Teleservice

Effective as of 01-JAN-21

BRIED, JAMES, MD†

Provider ID: N/A

15611 POMERADO RD STE

525
POWAY, CA 92064
Effective as of 01-SEP-22

COHEN, BRAD, MD†

Provider ID: N/A
15611 POMERADO RD STE
525
POWAY, CA 92064
Effective as of 01-SEP-22

UROLOGY

ANTHONY, JULIAN, MD

Provider ID: N/A
15611 POMERADO RD FL 4
POWAY, CA 92064
Effective as of 01-MAR-24

PE, MARK-RALLY, MD†

Provider ID: N/A
12630 MONTE VISTA RD
STE 103
POWAY, CA 92064
Effective as of 01-SEP-22

CHIROPRACTOR

LOVERN, JENNIFER, DC†

Provider ID: N/A
220 ROTANZI ST
RAMONA, CA 92065
Effective as of 01-JUL-22

FAMILY PRACTICE

HARDISON, CHARLES, MD†

Provider ID: N/A
211 13TH ST
RAMONA, CA 92065*
Effective as of 01-SEP-22

INTERNAL MEDICINE

YUNG, DORIS, MD†

Provider ID: N/A
220 ROTANZI ST
RAMONA, CA 92065
Effective as of 01-DEC-18

PEDIATRICS

ZACHRY, ALISON, MD†

Provider ID: N/A
220 ROTANZI ST
RAMONA, CA 92065
Effective as of 01-SEP-22

**REGISTERED PHYSICAL
THERAPIST**

BOUTELLE, DAVID, PT

Provider ID: N/A
850 MAIN ST STE 105
RAMONA, CA 92065
Effective as of 01-FEB-24

BOUTELLE, BARBARA, PT

Provider ID: N/A
850 MAIN ST STE 105
RAMONA, CA 92065
Effective as of 01-FEB-24

CHIROPRACTOR

PIERSON, MICHAEL, DC

Provider ID: N/A
22411 ANTONIO PKWY STE
C215
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-18

DERMATOLOGY

DICESARE, DANIEL, MD

Provider ID: N/A
22032 EL PASEO STE 150
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-NOV-19

DICESARE, DANIEL, MD

Provider ID: N/A
22032 EL PASEO STE 150
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-NOV-19

GUIDE, SHIREEN, MD†

Provider ID: N/A
29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-17

GUIDE, SHIREEN, MD†

Provider ID: N/A
29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-16

GUIDE, SHIREEN, MD†

Provider ID: N/A
29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-16

GUIDE, SHIREEN, MD†

Provider ID: N/A
29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-AUG-12

GUIDE, SHIREEN, MD†

Provider ID: N/A
29829 SANTA MARGARITA
PKWY STE 500

RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-AUG-12

GUIDE, SHIREEN, MD†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-AUG-12

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-JUL-21

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-JUL-21

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-JUN-18

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-JAN-23

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-MAR-19

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-MAR-19

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-OCT-23

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-NOV-21

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-NOV-21

SHIELL, RONALD, MD†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688

Teleservice

Effective as of 01-DEC-21

SHIELL, RONALD, MD†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688

Teleservice

Effective as of 01-JAN-17

WANG, JAMES, MD†

Provider ID: N/A

29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-APR-20

WANG, JAMES, MD†

Provider ID: N/A

29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-JUL-18

WANG, JAMES, MD†

Provider ID: N/A

29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-SEP-19

WANG, JAMES, MD†

Provider ID: N/A

29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-SEP-19

WANG, JAMES, MD†

Provider ID: N/A

29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-SEP-19

WANG, JAMES, MD†

Provider ID: N/A

29833 SANTA MARGARITA
PKWY STE 100

RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-SEP-19

WANG, JAMES, MD†

Provider ID: N/A

29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-SEP-19

ENDOCRINOLOGY

METABOLISM DIABETES

HAMIDI, AFSHIN, MD

Provider ID: N/A

30511 AVENIDA DE LAS
FLORES
1064
RANCHO SANTA
MARGARITA, CA 92688

Teleservice

Effective as of 01-SEP-23

HAMIDI, AFSHIN, MD

Provider ID: N/A

30511 AVENIDA DE LAS
FLORES
1064
RANCHO SANTA
MARGARITA, CA 92688

Teleservice

Effective as of 01-SEP-23

INTERNAL MEDICINE

GORE, GWENDOLYN, MD†

Provider ID: N/A

29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688*

Effective as of 01-FEB-13

GORE, GWENDOLYN, MD†

Provider ID: N/A

29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688*

Effective as of 01-MAY-12

PHYSICIANS ASSISTANT

KANE, KARA, PA†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-OCT-22

PODIATRIST

ANGAROLA, JEFF, DPM

Provider ID: N/A

29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-APR-11

ANGAROLA, JEFF, DPM

Provider ID: N/A

29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-JAN-22

ANGAROLA, JEFF, DPM

Provider ID: N/A

29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-JAN-22

ANGAROLA, JEFF, DPM

Provider ID: N/A

29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-JAN-22

ANGAROLA, JEFF, DPM

Provider ID: N/A

29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-MAY-12

ANGAROLA, JEFF, DPM

Provider ID: N/A

29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-MAY-12

**ANESTHESIOLOGY PAIN
MANAGEMENT**

MAASUMI, KASRA, MD

Provider ID: N/A

30212 TOMAS STE 180
RANCHO STA MARG, CA
92688

Teleservice

Effective as of 01-FEB-24

MAASUMI, KASRA, MD

Provider ID: N/A

30212 TOMAS STE 180
RANCHO STA MARG, CA
92688

Teleservice

Effective as of 01-FEB-24

MAASUMI, KASRA, MD

Provider ID: N/A

30212 TOMAS STE 180
RANCHO STA MARG, CA

92688
Teleservice
Effective as of 01-FEB-24

ALLERGY IMMUNOLOGY

DYER, MARC, MD

Provider ID: N/A
665 CAMINO DE LOS MARES STE 201
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-17

ANESTHESIOLOGY

GERAYLI, AFSHIN, MD†

Provider ID: N/A
647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

GERAYLI, AFSHIN, MD†

Provider ID: N/A
647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

ANESTHESIOLOGY PAIN MANAGEMENT

BETTS, ANDRES, MD†

Provider ID: N/A
665 CAMINO DE LOS MARES STE 202
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-16

BETTS, ANDRES, MD†

Provider ID: N/A
665 CAMINO DE LOS MARES STE 202
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-16

BETTS, ANDRES, MD†

Provider ID: N/A
665 CAMINO DE LOS MARES STE 202
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-16

GERAYLI, AFSHIN, MD†

Provider ID: N/A
647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A
647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-19

GERAYLI, AFSHIN, MD†

Provider ID: N/A
647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A
647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A
647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-23

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-20

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A
647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-20

CARDIAC ELECTROPHYSIOLOGY

DRURY, PAUL, MD†

Provider ID: N/A
724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-24

DRURY, PAUL, MD†

Provider ID: N/A
724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-24

CARDIOLOGY

DRURY, PAUL, MD†

Provider ID: N/A
724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-23

DRURY, PAUL, MD†

Provider ID: N/A
724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-SEP-19

DRURY, PAUL, MD†

Provider ID: N/A
724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-FEB-23

DRURY, PAUL, MD†

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-JAN-23

DRURY, PAUL, MD†

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-JAN-23

KUO, ALLEN, MD†

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-SEP-20

KUO, ALLEN, MD†

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-SEP-20

KUO, ALLEN, MD†

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-SEP-20

VAN, HO HAI, MD†

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-FEB-23

VAN, HO HAI, MD†

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-DEC-21

VAN, HO HAI, MD†

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-DEC-21

VAN, HO HAI, MD†

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-DEC-21

**CARDIOVASCULAR
DISEASE**

KUO, ALLEN, MD†

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-FEB-23

**CERTIFIED NURSE
PRACTITIONER**

PARK, SE, NP

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672

Effective as of 01-JUL-23

WONG, KRISTLE, NP

Provider ID: N/A

1031 AVENIDA PICO STE
203
SAN CLEMENTE, CA 92673

Effective as of 01-NOV-23

CHIROPRACTOR

THOMPSON, RUSSELL, DC†

Provider ID: N/A

629 CAMINO DE LOS
MARES STE 104
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-18

DERMATOLOGY

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-NOV-19

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-23

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-22

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-DEC-21

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-DEC-21

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

FOREMAN, TANYA, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-18

FOREMAN, TANYA, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

FOREMAN, TANYA, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-21

FOREMAN, TANYA, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-21

GUIDE, SHIREEN, MD†

Provider ID: N/A

629 CAMINO DE LOS

MARES STE 105
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-16

GUIDE, SHIREEN, MD†

Provider ID: N/A

629 CAMINO DE LOS
MARES STE 105
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-16

GUIDE, SHIREEN, MD†

Provider ID: N/A

629 CAMINO DE LOS
MARES STE 105
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-17

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-20

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-MAR-23

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-18

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-18

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-18

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-23

SHIELL, RONALD, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Teleservice
Effective as of 01-SEP-18

SHIELL, RONALD, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Teleservice
Effective as of 01-OCT-23

SHIELL, RONALD, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-17

SHIELL, RONALD, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Teleservice

Effective as of 01-MAR-19

SHIELL, RONALD, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Teleservice

Effective as of 01-DEC-21

GASTROENTEROLOGY

GUJRAL, NAVJYOT, MD†

Provider ID: N/A

655 CAMINO LOS MARES
123
SAN CLEMENTE, CA 92673

Effective as of 01-MAY-12

GUJRAL, NAVJYOT, MD†

Provider ID: N/A

655 CAMINO LOS MARES
123
SAN CLEMENTE, CA 92673

Effective as of 01-APR-11

HASSANEIN, TAREK, MD†

Provider ID: N/A

675 CAMINO DE LOS
MARES STE 301
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-18

HASSANEIN, TAREK, MD†

Provider ID: N/A

675 CAMINO LOS MARES
210
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-18

HASSANEIN, TAREK, MD†

Provider ID: N/A

675 CAMINO DE LOS
MARES STE 301
SAN CLEMENTE, CA 92673

Effective as of 01-MAY-22

ROSSARO, LORENZO, MD†

Provider ID: N/A

675 CAMINO DE LOS
MARES STE 301
SAN CLEMENTE, CA 92673

Effective as of 01-MAY-22

ROSSARO, LORENZO, MD†

Provider ID: N/A

675 CAMINO DE LOS
MARES STE 210
SAN CLEMENTE, CA 92673

Effective as of 01-JUN-21

NEUROLOGY

PATEL, HITESH, MD†

Provider ID: N/A

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

Effective as of 01-DEC-21

PATEL, HITESH, MD†

Provider ID: N/A

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

Effective as of 01-DEC-21

PATEL, HITESH, MD†

Provider ID: N/A

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

Effective as of 01-DEC-21

PATEL, HITESH, MD†

Provider ID: N/A

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

Effective as of 01-DEC-21

**OBSTETRICS /
GYNECOLOGY**

BAILEY, THOMAS, MD†

Provider ID: N/A

665 CAMINO LOS MARES
303
SAN CLEMENTE, CA 92672

Effective as of 01-MAR-01

BAILEY, THOMAS, MD†

Provider ID: N/A

665 CAMINO LOS MARES
303
SAN CLEMENTE, CA 92672

Effective as of 01-JAN-18

JOHNSON, SUSAN, MD†

Provider ID: N/A

1031 AVENIDA PICO STE
204
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-22

JOHNSON, SUSAN, MD†

Provider ID: N/A

1031 AVENIDA PICO STE
204
SAN CLEMENTE, CA 92673

Effective as of 01-JUL-22

JOHNSON, SUSAN, MD†

Provider ID: N/A

1031 AVENIDA PICO STE
204
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-20

PRIESTLEY, ANGELIKA, MD

Provider ID: N/A
 1031 AVENIDA PICO STE
 204
 SAN CLEMENTE, CA 92673
 Effective as of 01-OCT-22

RAMIREZ, SARA, MD†

Provider ID: N/A
 665 CAMINO DE LOS
 MARES
 SAN CLEMENTE, CA 92673
 Effective as of 01-SEP-10

RAMIREZ, SARA, MD†

Provider ID: N/A
 665 CAMINO DE LOS
 MARES
 SAN CLEMENTE, CA 92673
 Effective as of 01-JAN-18

SALCIDO, CRAIG, MD†

Provider ID: N/A
 665 CAMINO DE LOS
 MARES STE 303A
 SAN CLEMENTE, CA 92673
 Effective as of 01-JAN-18

SALCIDO, CRAIG, MD†

Provider ID: N/A
 665 CAMINO DE LOS
 MARES STE 303A
 SAN CLEMENTE, CA 92673
 Effective as of 01-JAN-18

OPHTHALMOLOGY

AHMAD, ASHRAF, MD†

Provider ID: N/A
 665 CAMINO DE LOS
 MARES STE 102
 SAN CLEMENTE, CA 92673
 Effective as of 01-OCT-23

AHMAD, ASHRAF, MD†

Provider ID: N/A

665 CAMINO DE LOS
 MARES STE 102
 SAN CLEMENTE, CA 92673
 Effective as of 01-SEP-22

BANUELOS, LYDIA, MD†

Provider ID: N/A
 653 CAMINO DE LOS
 MARES STE 107
 SAN CLEMENTE, CA 92673
 Effective as of 01-DEC-22

BANUELOS, LYDIA, MD

Provider ID: N/A
 653 CAMINO DE LOS
 MARES STE 103
 SAN CLEMENTE, CA 92673
 Effective as of 01-FEB-23

DHOOT, SONIA, MD†

Provider ID: N/A
 665 CAMINO DE LOS
 MARES STE 102
 SAN CLEMENTE, CA 92673
 Effective as of 01-JAN-19

DHOOT, SONIA, MD†

Provider ID: N/A
 665 CAMINO DE LOS
 MARES STE 102
 SAN CLEMENTE, CA 92673
 Effective as of 01-JAN-19

DHOOT, SONIA, MD†

Provider ID: N/A
 665 CAMINO DE LOS
 MARES STE 102
 SAN CLEMENTE, CA 92673
 Effective as of 01-OCT-23

DHOOT, SONIA, MD†

Provider ID: N/A
 665 CAMINO DE LOS
 MARES STE 102
 SAN CLEMENTE, CA 92673

Effective as of 01-SEP-22

GUJRAL, SATVINDER, MD†

Provider ID: N/A
 665 CAMINO DE LOS
 MARES STE 102
 SAN CLEMENTE, CA 92673
 Effective as of 01-SEP-22

GUJRAL, SATVINDER, MD†

Provider ID: N/A
 665 CAMINO DE LOS
 MARES STE 102
 SAN CLEMENTE, CA 92673
 Effective as of 01-OCT-23

GWYNN, DAVID, MD

Provider ID: N/A
 653 CAMINO DE LOS
 MARES STE 103
 SAN CLEMENTE, CA 92673
 Effective as of 01-FEB-23

GWYNN, DAVID, MD

Provider ID: N/A
 653 CAMINO DE LOS
 MARES STE 103
 SAN CLEMENTE, CA 92673
 Effective as of 01-JAN-24

GWYNN, DAVID, MD

Provider ID: N/A
 653 CAMINO DE LOS
 MARES STE 103
 SAN CLEMENTE, CA 92673
 Effective as of 01-JAN-24

GWYNN, DAVID, MD

Provider ID: N/A
 653 CAMINO DE LOS
 MARES STE 103
 SAN CLEMENTE, CA 92673
 Effective as of 01-JAN-24

GWYNN, DAVID, MD

Provider ID: N/A

653 CAMINO DE LOS MARES STE 103
SAN CLEMENTE, CA 92673

Effective as of 01-MAR-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-APR-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-APR-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

665 CAMINO LOS MARES 102
SAN CLEMENTE, CA 92673

Effective as of 01-APR-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

665 CAMINO LOS MARES 102

SAN CLEMENTE, CA 92673

Effective as of 01-APR-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

665 CAMINO LOS MARES 102
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-22

JACOBS, JEFFREY, MD†

Provider ID: N/A

665 CAMINO LOS MARES 102
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO DE LOS MARES STE 103
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-17

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO LOS MARES 107
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-15

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO DE LOS MARES STE 103
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-18

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO LOS MARES 107
SAN CLEMENTE, CA 92673

Effective as of 01-MAR-10

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO LOS MARES 107
SAN CLEMENTE, CA 92673

Effective as of 01-MAR-23

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO LOS MARES 107
SAN CLEMENTE, CA 92673

Effective as of 01-MAY-12

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO LOS MARES 107
SAN CLEMENTE, CA 92673

Effective as of 01-APR-11

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO DE LOS MARES STE 103
SAN CLEMENTE, CA 92673

Effective as of 01-MAY-23

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO DE LOS MARES STE 103
SAN CLEMENTE, CA 92673

Effective as of 01-MAY-23

KELLER, CHARLES, MD

Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-22

KELLER, CHARLES, MD

Provider ID: N/A

665 CAMINO DE LOS

MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

KERSTEN, DIANA, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

KERSTEN, DIANA, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-APR-23

KERSTEN, DIANA, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-APR-23

KIM, BRIAN, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

KIM, EDWARD, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

KIM, BRIAN, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

KIM, EDWARD, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-22

NOGUCHI, JONATHAN, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

ROUHANI, BEHNAZ, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

ROUHANI, BEHNAZ, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-22

SALEHI-HAD, HANI, MD†

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-JUN-21

SALEHI-HAD, HANI, MD†

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-JUN-21

SALEHI-HAD, HANI, MD†

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-JUN-21

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-22

WANG, YE, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-19

WANG, YE, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-19

OPTOMETRIST

**CHOI-SIRITARATIWAT,
ISABELL, OD†**

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

**CHOI-SIRITARATIWAT,
ISABELL, OD†**

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-JUN-19

**CHOI-SIRITARATIWAT,
ISABELL, OD†**

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-JUN-19

**CHOI-SIRITARATIWAT,
ISABELL, OD†**

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

LEIGHT, TERRA, OD†

Provider ID: N/A

685 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-22

LEIGHT, TERRA, OD†

Provider ID: N/A

685 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

NG, REBECCA, OD†

Provider ID: N/A

653 CAMINO LOS MARES
103
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-11

NG, REBECCA, OD†

Provider ID: N/A

653 CAMINO LOS MARES
103
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-18

NG, REBECCA, OD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 107
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-23

STEFANIDIS, NICOLETTA, OD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-22

STEFANIDIS, NICOLETTA, OD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

STEFANIDIS, NICOLETTA, OD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-FEB-18

STEFANIDIS, NICOLETTA, OD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-FEB-18

TERADA, SEIJU, OD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

TERADA, SEIJU, OD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-22

OTOLARYNGOLOGY

CROCKETT, DENNIS, MD†

Provider ID: N/A

675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-18

**OTOLARYNGOLOGY /
OTOLOGY /
LARYNGOLOGY /
RHINOLOGY**

CROCKETT, DENNIS, MD†

Provider ID: N/A

675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673

Effective as of 01-JUL-19

CROCKETT, DENNIS, MD†

Provider ID: N/A

675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673

Effective as of 01-JUL-19

WELLS, PHILLIP, MD†

Provider ID: N/A

675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-18

WELLS, PHILLIP, MD†

Provider ID: N/A

675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-08

WELLS, PHILLIP, MD†

Provider ID: N/A

675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673

Effective as of 01-NOV-14

PEDIATRICS

DWINELL, LAUREN, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 200
SAN CLEMENTE, CA 92673

Effective as of 01-JUL-23

PHYSICIANS ASSISTANT

ESHOIEE, MIRIAM, PA†

Provider ID: N/A

224 AVENIDA DEL MAR STE
B
SAN CLEMENTE, CA 92672

Effective as of 01-AUG-20

MOHALE, SHARON, PA†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-18

NELMS, MICHAEL, PA†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-21

NORMAN, STACY, PA

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-23

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672

Effective as of 01-NOV-22

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672

Effective as of 01-NOV-22

WANG, ALICE, PA

Provider ID: N/A

831 VIA SUERTE STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-FEB-24

PODIATRIST

HEHE, KYLE, DPM

Provider ID: N/A

665 CAMINO DE LOS
MARES
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-23

HEHE, KYLE, DPM

Provider ID: N/A

665 CAMINO DE LOS
MARES
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-23

LEAMING, ROBERT, DPM

Provider ID: N/A

655 CAMINO DE LOS
MARES STE 120
SAN CLEMENTE, CA 92673

Teleservice

Effective as of 01-FEB-24

LEAMING, ROBERT, DPM

Provider ID: N/A

655 CAMINO DE LOS
MARES STE 120
SAN CLEMENTE, CA 92673

Teleservice

Effective as of 01-FEB-24

SURGERY HAND

FRANKLIN, ADAM, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-APR-18

FRANKLIN, ADAM, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-APR-18

SURGERY

NEUROLOGICAL

PATEL, HITESH, MD†

Provider ID: N/A

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

Effective as of 01-NOV-21

SURGERY ORTHOPEDIC

GIALAMAS, GUS, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 109
SAN CLEMENTE, CA 92673
Effective as of 01-FEB-18

GIALAMAS, GUS, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 109
SAN CLEMENTE, CA 92673
Effective as of 01-FEB-18

VAN DER REIS, WILLIAM, MD†

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 109
SAN CLEMENTE, CA 92673
Effective as of 01-MAY-12

VAN DER REIS, WILLIAM, MD†

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 109
SAN CLEMENTE, CA 92673
Effective as of 01-APR-11

UROLOGY

BUI, DON, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

BUI, DON, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-DEC-23

BUI, DON, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA

STE A
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-23

ELKHOURY, FUAD, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

HO, TAMMY, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

KIM, MOSES, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

KIM, MOSES, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-23

MEAGLIA, JAMES, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-23

MEAGLIA, JAMES, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

NAKAMURA, LEAH, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

RANDALL, JOSH, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

SINGH, KARAN, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

SPITZ, AARON, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

SU, DANIEL, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

ADDICTIVE MEDICINE

HEINRICI, ALEKA, MD

Provider ID: N/A

☐ 286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

Teleservice

Effective as of 01-FEB-24

**SALGUERO GALLAND, MARIO,
MD**

Provider ID: N/A

☐ 4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

**SALGUERO GALLAND, MARIO,
MD†**

Provider ID: N/A

☐ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-SEP-21

**SALGUERO GALLAND, MARIO,
MD**

Provider ID: N/A

☐ 4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

**SALGUERO GALLAND, MARIO,
MD**

Provider ID: N/A

☐ 4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

**SALGUERO GALLAND, MARIO,
MD**

Provider ID: N/A

☐ 4175 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

**ADVANCED HEART
FAILURE AND
TRANSPLANT
CARDIOLOGY**

HOAGLAND, PETER, MD†

Provider ID: N/A

☐ 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

JASKI, BRIAN, MD†

Provider ID: N/A

☐ 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-JAN-21

AEROSPACE MEDICINE

BRUNO, EMILY, MD

Provider ID: N/A

☐ 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-JUL-22

BRUNO, EMILY, MD

Provider ID: N/A

☐ 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-JUL-22

ALLERGY IMMUNOLOGY

ALKATIB, RHONDA, MD†

Provider ID: N/A

☐ 2655 CAMINO DEL RIO N
STE 120
SAN DIEGO, CA 92108

Effective as of 01-SEP-22

ALKATIB, RHONDA, MD†

Provider ID: N/A

☐ 2655 CAMINO DEL RIO N
STE 425

SAN DIEGO, CA 92108

Effective as of 01-APR-22

ALKATIB, RHONDA, MD†

Provider ID: N/A

☐ 2655 CAMINO DEL RIO N
STE 425

SAN DIEGO, CA 92108

Effective as of 01-OCT-21

COHEN, GARY, MD

Provider ID: N/A

☐ 9833 PACIFIC HEIGHTS
BLVD STE J

SAN DIEGO, CA 92121

Effective as of 01-FEB-07

COHEN, GARY, MD

Provider ID: N/A

☐ 9833 PACIFIC HEIGHTS
BLVD STE J

SAN DIEGO, CA 92121

Effective as of 01-OCT-95

KIM, ALEXANDER, MD

Provider ID: N/A

☐ 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JUN-23

MERCANDETTI, ALEX, MD†

Provider ID: N/A

☐ 3965 5TH AVE STE 430
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-NOV-20

OSTROM, NANCY, MD†

Provider ID: N/A

☐ 5776 RUFFIN RD
SAN DIEGO, CA 92123

Effective as of 01-JAN-13

SHARMA, KUSUM, MD

Provider ID: N/A

10672 WEXFORD ST STE
280

SAN DIEGO, CA 92131

Effective as of 01-JAN-23

SHARMA, KUSUM, MD

Provider ID: N/A

10672 WEXFORD ST STE
280

SAN DIEGO, CA 92131

Effective as of 01-JAN-21

SHARMA, KUSUM, MD

Provider ID: N/A

10672 WEXFORD ST STE
280

SAN DIEGO, CA 92131

Effective as of 01-SEP-15

ANESTHESIOLOGY

**BECERRA SONGOLO, TOSHA,
MD**

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

CHIEN, SHELBY, MD†

Provider ID: N/A

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

DOBECKI, DOUGLAS, MD†

Provider ID: N/A

5395 RUFFIN RD STE 202
SAN DIEGO, CA 92123

Effective as of 01-JAN-22

FILIPOVIC, MAYA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-APR-23

FUNDINGSLAND, BRENT, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUL-21

GAYAM, SAJJAN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-22

GROVEY, BRITTANY, MD†

Provider ID: N/A

8901 ACTIVITY RD STE 100
SAN DIEGO, CA 92126

Effective as of 01-JAN-21

GROVEY, BRITTANY, MD†

Provider ID: N/A

8901 ACTIVITY RD STE 104
SAN DIEGO, CA 92126

Effective as of 01-APR-21

LEE, GEMAYEL, MD†

Provider ID: N/A

8901 ACTIVITY RD STE 100
SAN DIEGO, CA 92126

Effective as of 01-JAN-21

NARLA, VINOD, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

NGO, DONALD, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

ROY, KEVIN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

SAID, ENGY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-OCT-21

SAID, ENGY, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 100

SAN DIEGO, CA 92127

Effective as of 01-OCT-21

SUYDAM, STEVEN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

THOMPSON, SANDRA, MD†

Provider ID: N/A

4033 3RD AVE STE 200
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-DEC-22

TOLIVER, KEVIN, MD

Provider ID: N/A

4060 4TH AVE STE 408
SAN DIEGO, CA 92103

Effective as of 01-JAN-23

TULLY, JEFFREY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-21

TZENG, ERIC, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

VAN NOORD, BRANDON, MD†

Provider ID: N/A

3969 4TH AVE STE 208
SAN DIEGO, CA 92103
Effective as of 01-FEB-19

VAUGHN, DOUGLAS, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ANESTHESIOLOGY

CRITICAL CARE MEDICINE

KRAUSE, MARTIN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

**ANESTHESIOLOGY PAIN
MANAGEMENT**

CHISHOLM, CHRISTOPHER, MD

Provider ID: N/A

16466 BERNARDO CENTER
DR STE 150
SAN DIEGO, CA 92128
Effective as of 01-JUN-20

CHONG, TIMOTHY, MD†

Provider ID: N/A

16466 BERNARDO CENTER
DR STE 150
SAN DIEGO, CA 92128
Effective as of 01-SEP-17

COHEN, ZACHARY, MD

Provider ID: N/A

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

DAIRO, BRANDON, MD†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice
Effective as of 01-NOV-22

GROVEY, BRITTANY, MD†

Provider ID: N/A

8901 ACTIVITY RD STE 104
SAN DIEGO, CA 92126
Effective as of 01-FEB-21

LEE, GEMAYEL, MD†

Provider ID: N/A

8901 ACTIVITY RD STE 104
SAN DIEGO, CA 92126
Effective as of 01-FEB-21

LEE, GEMAYEL, MD†

Provider ID: N/A

8901 ACTIVITY RD STE 104
SAN DIEGO, CA 92126
Effective as of 01-APR-21

RICHARDSON, HENRY, MD†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Effective as of 01-MAY-21

THOMPSON, SANDRA, MD†

Provider ID: N/A

4033 3RD AVE STE 430
SAN DIEGO, CA 92103
Effective as of 01-DEC-22

VAN NOORD, BRANDON, MD†

Provider ID: N/A

3969 4TH AVE STE 208
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

VAN NOORD, BRANDON, MD†

Provider ID: N/A

3969 4TH AVE STE 208
SAN DIEGO, CA 92103
Effective as of 01-MAR-23

VAN NOORD, BRANDON, MD†

Provider ID: N/A

3969 4TH AVE STE 208
SAN DIEGO, CA 92103
Effective as of 01-FEB-19

AUDIOLOGIST

BAXTER, STEPHANIE, AuD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

BAXTER, STEPHANIE, AuD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

BAXTER, STEPHANIE, AuD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

HARRIS, GENEVIEVE, AuD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

HERRERA, CHARITY, AuD†

Provider ID: N/A

9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

HORNER, HEATHER, AuD†

Provider ID: N/A

9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-JUN-22

HORNER, HEATHER, AuD†

Provider ID: N/A

6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120

Teleservice

Effective as of 01-JUN-22

SHASKY, GARY, AuD†

Provider ID: N/A

9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

TSANG, JOYCE, AuD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

WILLIAMS, ALICIA, AuD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUL-21

CARDIAC

ELECTROPHYSIOLOGY

ATHILL, CHARLES, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

CHOI, ANTHONY, MD

Provider ID: N/A

3131 BERGER AVE
SAN DIEGO, CA 92123

Effective as of 01-OCT-23

LERNER, JONATHAN, MD

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JUL-23

LERNER, JONATHAN, MD

Provider ID: N/A

412 WASHINGTON ST
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

MAI, TUAN, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103

Effective as of 01-MAR-20

MAI, TUAN, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

PATEL, JIGAR, DO†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103

Effective as of 01-DEC-22

PATEL, JIGAR, DO†

Provider ID: N/A

4060 4TH AVE STE 650

SAN DIEGO, CA 92103
Effective as of 01-FEB-23

SHAH, ABHISHEK, MD

Provider ID: N/A

412 WASHINGTON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JAN-23

WADHWA, MANISH, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512

SAN DIEGO, CA 92103

Effective as of 01-SEP-15

CARDIOLOGY

CARAMBAS, CLARITA, MD†

Provider ID: N/A

9190 MIRA MESA BLVD
SAN DIEGO, CA 92126

Effective as of 01-SEP-22

CARAZO, MATTHEW, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

CHUNG, KIYON, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103

Effective as of 01-JUL-22

CHUNG, KIYON, MD†

Provider ID: N/A

4060 4TH AVE STE 650

SAN DIEGO, CA 92103*
Effective as of 01-NOV-12

CRUZ RODRIGUEZ, JOSE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

FRIEDMAN, RICHARD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

FRIEDMAN, RICHARD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

GLASSMAN, JERROLD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

GLASSMAN, JERROLD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-MAR-13

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

7901 FROST ST
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

LY, NANCY, MD†

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-JAN-23

LY, NANCY, MD†

Provider ID: N/A

292 EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-JUL-22

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

MULLVAIN, JEFFRY, MD†

Provider ID: N/A

4060 4TH AVE STE 500
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

NARAYANAN, MEENA, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

NGUYEN, BRYANT, MD†

Provider ID: N/A

4440 EUCLID AVE STE A
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

NGUYEN, TRI, MD†

Provider ID: N/A

7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
Teleservice
Effective as of 01-APR-24

NGUYEN, TRI, MD†

Provider ID: N/A

4206 44TH ST
SAN DIEGO, CA 92115*
Teleservice
Effective as of 01-SEP-22

PITT, WILLIAM, MD†

Provider ID: N/A

6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120
Effective as of 01-SEP-15

SALAMI, ALI, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

SCLAR, CRAIG, MD

Provider ID: N/A

3880 MURPHY CANYON
RD STE 120
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-DEC-23

SCLAR, CRAIG, MD

Provider ID: N/A

3880 MURPHY CANYON
RD STE 120
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-DEC-23

SCOTT, EMILY, MD†

Provider ID: N/A

4060 4TH AVE STE 500
SAN DIEGO, CA 92103
Effective as of 01-NOV-12

SHEREV, DIMITRI, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-JAN-24

**CARDIOVASCULAR
DISEASE**

ABELHAD, NADIA, MD

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-JAN-24

ABELHAD, NADIA, MD

Provider ID: N/A

412 WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

BHATT, JIKEN, MD

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

CARLSON, STEVEN, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Teleservice
Effective as of 01-APR-21

CARLSON, STEVEN, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Teleservice

Effective as of 01-JAN-21

CARLSON, STEVEN, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Teleservice
Effective as of 01-SEP-22

CHUNG, KIYON, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-AUG-16

CHUNG, KIYON, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

COX, JUSTIN, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-SEP-21

DIGGS, THOMAS, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-JAN-14

DO, HULBERT, MD

Provider ID: N/A

412 WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-OCT-23

DO, HULBERT, MD

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-OCT-23

DURAN, EDWARD, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

DURAN, EDWARD, MD

Provider ID: N/A

2131 3RD AVE
SAN DIEGO, CA 92101
Effective as of 01-DEC-23

FRIEDMAN, RICHARD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

FRIEDMAN, RICHARD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JAN-14

GARIBYAN, VARTAN, DO†

Provider ID: N/A

4060 4TH AVE STE 500
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

GLASSMAN, JERROLD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-AUG-20

GLASSMAN, JERROLD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-NOV-23

HOURANI, RAYAN, MD

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-FEB-23

KERAMATI, SHAHIN, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

KERAMATI, SHAHIN, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-MAY-11

KHAN, HASHIM, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-APR-21

KIMURA, BRUCE, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-MAY-11

LY, NANCY, MD†

Provider ID: N/A

4844 UNIVERSITY AVE STE
A

SAN DIEGO, CA 92105
Effective as of 01-JAN-21

LY, NANCY, MD†

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-NOV-23

LY, NANCY, MD†

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-JUN-23

MAI, TUAN, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

MEHTA, HIRSCH, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-SEP-22

MULLVAIN, JEFFRY, MD†

Provider ID: N/A

4060 4TH AVE STE 500
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

NANAVATI, VIMAL, MD†

Provider ID: N/A

16776 BERNARDO CENTER

DR STE 209

SAN DIEGO, CA 92128

Teleservice

Effective as of 01-FEB-23

NANAVATI, VIMAL, MD

Provider ID: N/A

11939 RANCHO BERNARDO
RD STE 120
SAN DIEGO, CA 92128
Teleservice
Effective as of 01-AUG-23

NARAYANAN, MEENA, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-APR-21

NARAYANAN, MEENA, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-SEP-22

NARULA, ARVIN, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

NAYAK, KESHAV, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-MAY-19

NAYAK, KESHAV, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

NGUYEN, TRI, MD†

Provider ID: N/A

4551 EL CAJON BLVD
SAN DIEGO, CA 92115

Teleservice

Effective as of 01-JAN-23

NISHIMURA, MARIN, MD

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-MAR-23

OMRAN, JAD, MD

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-FEB-23

PARIKH, MILIND, DO†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-SEP-22

PARIZO, JUSTIN, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-SEP-21

PATEL, JIGAR, DO

Provider ID: N/A

4060 FOURTH AVENUE,
STE 650
SAN DIEGO, CA 92103

Effective as of 01-MAR-24

PITT, WILLIAM, MD†

Provider ID: N/A

6386 ALVARADO CT STE

101

SAN DIEGO, CA 92120

Effective as of 01-SEP-22

PROHASKA, THOMAS, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

SALAMI, ALI, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103

Effective as of 01-MAY-11

SARSAM, LUAY, MD

Provider ID: N/A

412 WASHINGTON ST
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JUL-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-SEP-22

SHAH, KULIN, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JAN-23

SHAH, KULIN, MD†

Provider ID: N/A

412 WASHINGTON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-23

SHEREV, DIMITRI, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115

Effective as of 01-FEB-21

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

412 WASHINGTON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JAN-23

WILLIAMS, JEFFREY, MD

Provider ID: N/A

4033 3RD AVE STE 204
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

ZAVARO, SUHAIL, MD

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-FEB-23

CERTIFIED

ACUPUNCTURIST

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

ARELLANO, JACQUELINE, LAC†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

ARELLANO, JACQUELINE, LAC†

Provider ID: N/A

9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
Effective as of 01-MAR-21

ARELLANO, JACQUELINE, LAC†

Provider ID: N/A

9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131
Effective as of 01-MAR-21

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

4910 DIRECTORS PL
SAN DIEGO, CA 92121
Effective as of 01-FEB-24

CALLISON, YANHUI, LAC

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

CALLISON, YANHUI, LAC

Provider ID: N/A

4167 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice
Effective as of 01-OCT-23

JULIAN, FIDES, LAC†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

JULIAN, FIDES, LAC

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

JULIAN, FIDES, LAC†

Provider ID: N/A

9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131
Effective as of 01-MAR-21

JULIAN, FIDES, LAC†

Provider ID: N/A

9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
Effective as of 01-MAR-21

JULIAN, FIDES, LAC

Provider ID: N/A

4910 DIRECTORS PL
SAN DIEGO, CA 92121
Effective as of 01-FEB-24

LAM, KHANH, LAC†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice
Effective as of 01-SEP-21

LAM, KHANH, LAC†

Provider ID: N/A

3434 MIDWAY DR STE 2001

SAN DIEGO, CA 92110
Teleservice
Effective as of 01-NOV-22

MURRAY, STEVEN, LAC†

Provider ID: N/A

9333 GENESEE AVE STE 220
SAN DIEGO, CA 92121
Effective as of 01-AUG-21

MURRAY, STEVEN, LAC†

Provider ID: N/A

9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131
Effective as of 01-AUG-21

MURRAY, STEVEN, LAC

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

MURRAY, STEVEN, LAC†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

MURRAY, STEVEN, LAC

Provider ID: N/A

4910 DIRECTORS PL
SAN DIEGO, CA 92121
Effective as of 01-FEB-24

NOVAK, ERIKA, LAC

Provider ID: N/A

3282 GOVERNOR DR
SAN DIEGO, CA 92122
Teleservice
Effective as of 01-NOV-22

SEITZ, GRETCHEN, LAC

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-JAN-21

SEITZ, GRETCHEN, LAC

Provider ID: N/A

9995 CARMEL MOUNTAIN
RD STE B10-B11
SAN DIEGO, CA 92129
Effective as of 01-JAN-21

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

4910 DIRECTORS PL
SAN DIEGO, CA 92121
Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC†

Provider ID: N/A

9333 GENESEE AVE
SAN DIEGO, CA 92121
Effective as of 01-DEC-21

TANG-RITCHIE, LENG, LAC†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

TANG-RITCHIE, LENG, LAC†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

**CERTIFIED NURSE
PRACTITIONER**

AGUILA, YESENIA, NP

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-FEB-24

ALSTEEN, STEPHANIE, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

AMOS, MARIA, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ANTHONY, SHARON, NP†

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103*
Effective as of 01-DEC-21

ASHMAN, ELLEN, NP†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

ASHMAN, ELLEN, NP†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

ATILLO, RONALD MAR, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

BATAC, NADINE, NP†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Effective as of 01-DEC-22

BILOTTA, NATALIE, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

BINAVI, HOWNAZ, NP†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

BINAVI, HOWNAZ, NP†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

BUI, ANH, NPF

Provider ID: N/A

7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
Teleservice
Effective as of 01-NOV-23

BURNEY, BRAEANNE, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CAMAQUIN, MIA, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

**CAMARGO-LOWTHERS,
ANGELICA, NP**

Provider ID: N/A

8010 FROST ST STE 220
SAN DIEGO, CA 92123
Effective as of 01-JUL-23

**CAMARGO-LOWTHERS,
ANGELICA, NP†**

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

**CAMARGO-LOWTHERS,
ANGELICA, NP†**

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

CARDENAS, MIRIAM, NPF

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

CARDENAS, MIRIAM, NPF

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

CASE, ERINN, NP

Provider ID: N/A

3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Effective as of 01-JAN-21

**CELESTIN-RAMSEY, AKANKE,
NPF**

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114

Teleservice

Effective as of 01-DEC-21

CHANTALA, ELIZABETH, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CHAVEZ, ALEXANDRIA, NP†

Provider ID: N/A

4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

CHEATHAM, BRITTANY, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CHEN, KATIE, NP

Provider ID: N/A

4440 EUCLID AVE STE A
SAN DIEGO, CA 92115
Effective as of 01-MAR-24

CHOATE, BERNADETTE, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

CHOATE, BERNADETTE, NP†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

CHRISMAN, JESSICA, NP

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

COLEMAN, PAGE, NP

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-FEB-24

CONNER, PAMELA, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

CONNOR, CAROLINE, NP†

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-JUN-21

CONNOR, CAROLINE, NP†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-21

CUTLER, APRYL, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

DE DIOS, SARAH, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

DE LARA, KAROL JOHN, NP

Provider ID: N/A

4440 EUCLID AVE STE A
SAN DIEGO, CA 92115
Effective as of 01-MAR-24

DEBSKI, LAUREN, NPF

Provider ID: N/A

1016 OUTER RD
SAN DIEGO, CA 92154
Effective as of 01-JUL-22

DEL VECCHIO, MEGAN, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-SEP-23

DEL VECCHIO, MEGAN, NP

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-SEP-23

**DHARKAR SURBER, SAPNA,
NP**

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

**DHARKAR SURBER, SAPNA,
NP**

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

DILLEN, REBECCA, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

DO, ELAINE, NP

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

Effective as of 01-JUL-22

DOAN, ANGELA, NP†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

DOAN, ANGELA, NP†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

DRISCOLL, KARRIE, NP†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

DRISCOLL, SUSAN, NP

Provider ID: N/A

1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Effective as of 01-OCT-23

DWYER, ERIN, NP†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

DWYER, ERIN, NP†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

DWYER, ERIN, NP

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

DWYER, ERIN, NP

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DWYER, ERIN, NP

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-FEB-24

ERICKSON, LISA, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

ERICKSON, LISA, NP†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

FEIZI, SEDI, NP†

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-JAN-21

FEROLIE, PAM, NP

Provider ID: N/A

375 CAMINO DE LA REINA
STE C
SAN DIEGO, CA 92108
Effective as of 01-DEC-23

FILIPPELLO, LAUREN, NPF

Provider ID: N/A

3863 CLAIREMONT DR
SAN DIEGO, CA 92117

Teleservice

Effective as of 01-OCT-23

GIORGI, ASHLEY, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

GIORGI, ASHLEY, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

GOMEZ, LESLIE, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

GOMEZ, LESLIE, NP

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

GOMEZ, LESLIE, NP

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

GONZALEZ, LISA, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

GORDON, DANIELLE, NP†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JAN-21

GROSS, KIMBERLY, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

GROSS, KIMBERLY, NP†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-AUG-22

HA, THU, NP

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

HA, THU, NP

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

HALE, EMILY, NPF

Provider ID: N/A

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-MAY-23

HARVEY, DELFINA, NP

Provider ID: N/A

3490 PALM AVE
SAN DIEGO, CA 92154

Effective as of 01-JUL-23

HILL, GENIELYN, NP

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126

Effective as of 01-MAY-23

HILLIARD, THESALONICA, NP

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126

Effective as of 01-SEP-22

HOOPER, BONNIE, NP†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-JAN-21

HOOPER, BONNIE, NP†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

HORNFELD, COURTNEY, NP

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

INSTONE, SUSAN, NP

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

Effective as of 01-SEP-22

INSTONE, SUSAN, NP

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

JENKINS, ERIN, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-AUG-22

JENKINS, ERIN, NP

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

JENSEN, ADRIENNE, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-APR-23

JENSEN, ADRIENNE, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

JONES, CHRISTA, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

JONES, CHRISTA, NP

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

KAHL, NICHOLAS, NP

Provider ID: N/A

12843 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130
Effective as of 01-JAN-21

KI, TRISH, NP†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

KI, TRISH, NP†

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

KYI, MYA, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-MAR-24

LEE, MINDY, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

LEE, MINDY, NP

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

LEE, MINDY, NP

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

MADGEDI, SHEILA, NP†

Provider ID: N/A

4282 GENESEE AVE STE
204
SAN DIEGO, CA 92117
Teleservice
Effective as of 01-JUL-21

MANZANO, EUNICE, NP†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

MANZANO, EUNICE, NP†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

MAROSOK, MICHELLE, NP

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-NOV-23

MARTINEZ, CAROLYN, NP

Provider ID: N/A

1016 OUTER RD
SAN DIEGO, CA 92154
Effective as of 01-AUG-22

MAYOYO, MARILYNN, NP

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-MAR-23

MCCLAIN, MEGAN, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

MCGILLOWAY, MELANIE, NP†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

MCGOWAN, GLAIZA ANN, NP

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

MCGOWAN, GLAIZA ANN, NP

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

MEDILO, LOVELLA, NP

Provider ID: N/A

4033 3RD AVE STE 200
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-DEC-22

MEDINA, RUBELETA, NP

Provider ID: N/A

9995 CARMEL MOUNTAIN
RD STE B1011
SAN DIEGO, CA 92129
Effective as of 01-FEB-23

MELTZER, VIRGINIA, NP†

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

MELTZER, VIRGINIA, NP†

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

MEYER, ISAAC, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

MEYER, ISAAC, NP

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

MICK, SHARON, NP

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

MOONEY, PATRICIA, NP†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JAN-24

MOONEY, PATRICIA, NP†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-MAY-21

MORENO, EMILY, NP†

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-MAY-21

MULVEY, CAOILFHIONN, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

MWAURA, WAIRIMU, NP†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JUN-21

NAGATA, CERAH, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

NAGATA, CERAH, NP

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

NETZEL, JENNIFER, NP†

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Effective as of 01-AUG-22

NETZEL, JENNIFER, NP†

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-AUG-22

NETZEL, JENNIFER, NP†

Provider ID: N/A

9333 GENESEE AVE
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

NGO-BIGGE, ANGELA, NP

Provider ID: N/A

7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111

Teleservice
Effective as of 01-JUN-23

NOCEDA, ANA, NP†

Provider ID: N/A
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

NOCEDA, ANA, NP†

Provider ID: N/A
4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-SEP-22

OREJEL, EDITH, NP

Provider ID: N/A
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-23

OREJEL, EDITH, NP

Provider ID: N/A
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-23

ORPILLA, IMELDA, NP

Provider ID: N/A
10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-AUG-21

ORPILLA, IMELDA, NP

Provider ID: N/A
9995 CARMEL MOUNTAIN
RD STE B10-B11
SAN DIEGO, CA 92129
Effective as of 01-JAN-21

PACE, RACHELLE, NP

Provider ID: N/A
4510 EXECUTIVE DR

SAN DIEGO, CA 92121
Effective as of 01-JAN-24

PACE, RACHELLE, NP

Provider ID: N/A
350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

PACE, RACHELLE, NP

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

PATIAG, DANIEL, NP

Provider ID: N/A
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PATIAG, DANIEL, NP

Provider ID: N/A
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PEREZ, ALLYSSA, NP†

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

PEREZ, ALLYSSA, NP

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

PEREZ, ALLYSSA, NP†

Provider ID: N/A
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

PETTIS, BETH, NP†

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

POLIZZI, BRITTANY, NP†

Provider ID: N/A
3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-JUN-22

QUINTO, CINDY, NP

Provider ID: N/A
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

QUINTO, CINDY, NP

Provider ID: N/A
4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-SEP-22

RADMAN, MIRKA, NP

Provider ID: N/A
6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-AUG-23

RAJAEI, NILOUFAR, NP†

Provider ID: N/A
8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-AUG-22

REAL, MARIA, NP

Provider ID: N/A
4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

REAL, MARIA, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-OCT-23

REDDY, PRIYA, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Effective as of 01-NOV-22

REDDY, PRIYA, NP

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Effective as of 01-NOV-22

REGEV, SHANEE, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

REGEV, SHANEE, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-APR-23

REINER, GAIL, NP†

Provider ID: N/A

4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121

Effective as of 01-OCT-21

REINER, GAIL, NP

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

RENZAS, JENNIFER, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUL-21

RENZAS, JENNIFER, NP

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUL-21

ROBERTSON, RACHAEL, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-22

RODENMEYER, EVE, NP

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-JUL-22

RODENMEYER, EVE, NP

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-JUL-22

ROSCOE, SYDNEY, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAR-24

ROSCOE, SYDNEY, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-MAR-24

ROSCOE, SYDNEY, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-MAR-24

ROSS, CRYSTAL, NP†

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

ROSSI, CATHERINE, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

ROZO, JOSE, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

RUFO, ROSAVIDA, NP

Provider ID: N/A

10672 WEXFORD ST STE
280

SAN DIEGO, CA 92131

Effective as of 01-JUN-23

SABIN, NANCY, NP

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

SABIN, NANCY, NP

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

SALINAS, NIECEL, NP†

Provider ID: N/A

200 W ARBOR DR

SAN DIEGO, CA 92103
Effective as of 01-AUG-22

SALOTTI, JOANIE, NP†

Provider ID: N/A

☑ 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

SALOTTI, JOANIE, NP†

Provider ID: N/A

☑ 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

SANTANGELO, JOANNE, NP

Provider ID: N/A

☑ 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

SANTANGELO, JOANNE, NP

Provider ID: N/A

☑ 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

SATTERWHITE, MAURINE, NP

Provider ID: N/A

☑ 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

SATTERWHITE, MAURINE, NP

Provider ID: N/A

☑ 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

SCOTT, KELLY, NP

Provider ID: N/A

☑ 2630 1ST AVE
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JUL-22

SEARS-WILEY, ELIZABETH, NP†

Provider ID: N/A

☑ 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-21

SHARMA, RAKHI, NP

Provider ID: N/A

☑ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

SIETSMA, ALEXANDRA, NP†

Provider ID: N/A

☑ 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

SMITH, JENNIFER, NP†

Provider ID: N/A

☑ 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

SMITH, JENNIFER, NP†

Provider ID: N/A

☑ 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

SNYDER, KIRSTIN, NP

Provider ID: N/A

☑ 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-APR-23

SNYDER, KIRSTIN, NP

Provider ID: N/A

☑ 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

SOLOMON, AMANDA, NP

Provider ID: N/A

☑ 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SOLOMON, AMANDA, NP

Provider ID: N/A

☑ 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

SPAULDING, ENJOLI, NP

Provider ID: N/A

☑ 8010 FROST ST STE 510
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-AUG-23

SPAULDING, ENJOLI, NP

Provider ID: N/A

☑ 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-MAY-23

STAHL, STEPHANIE, NP†

Provider ID: N/A

☑ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

SUHIR, ERIN, NP

Provider ID: N/A

☑ 4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-MAR-24

SWEENEY, ZSA ZSA, NP

Provider ID: N/A

☑ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUL-21

TEJADA BRAS, SANDY, NP

Provider ID: N/A

2929 HEALTH CENTER DR
SAN DIEGO, CA 92123*

Effective as of 01-JUL-22

TILLEY, MONICA, NPF

Provider ID: N/A

12843 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130

Effective as of 01-DEC-21

TOMICICH, STEPHANIE, NP

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Effective as of 01-FEB-24

TOMICICH, STEPHANIE, NP

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Effective as of 01-JAN-24

TOMICICH, STEPHANIE, NP

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-FEB-24

TOMICICH, STEPHANIE, NP

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

TOPIK, AMANDA, NP†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

TOPIK, AMANDA, NP†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

TOWNS, ARTA, NP

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

TOWNS, ARTA, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

TRAN, DAPHNE, NP

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

VILLALOBOS, REBECA, NP†

Provider ID: N/A

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Effective as of 01-DEC-22

VILLALOBOS, REBECA, NP†

Provider ID: N/A

823 GATEWAY CENTER
WAY
SAN DIEGO, CA 92102
Effective as of 01-DEC-22

**VILLANUEVA DE GUTIE,
BERENICE, NP**

Provider ID: N/A

4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105
Teleservice
Effective as of 01-MAY-21

WIETZKE, MATTHEW, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

WIETZKE, MATTHEW, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

WILLEY, MARTI, NP†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Teleservice

Effective as of 01-JAN-21

WILLEY, MARTI, NP†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Teleservice

Effective as of 01-JUN-21

WILLIAMS, BREAHA, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-DEC-21

WILLIAMS, BREAHA, NP

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-DEC-21

WONG, MAYBELLE, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

WONG, MAYBELLE, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

WOO, ANDY, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

YARTSEVA, YULIYA, NP

Provider ID: N/A

3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Effective as of 01-JAN-21

YEO, ALEXANDRIA, NP

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

**CERTIFIED REGISTERED
NURSE ANESTHETIST**

AMADOR, LINDSAY, CRNA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CALABRIA, MEGAN, CRNA

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

CANTRELL, SARAH, CRNA

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

COLE, JASON, CRNA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

DOLLAND, STEVEN, CRNA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

DULAY, JOTI, CRNA

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

EVANS, CATHERINE, CRNA

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

FIEDLER, DEREK, CRNA

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

GONZALEZ, LISA, CRNA

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

GRIFFIN, SETH, CRNA

Provider ID: N/A

200 W ARBOR DR

SAN DIEGO, CA 92103
Effective as of 01-SEP-23

JOHNSTON, RACHEL, CRNA

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

**POLIKOWSKI, SAMANTHA,
CRNA†**

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

POLLOM, JESSICA, CRNA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

RAMIREZ, NICOLE, CRNA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ROADMAN, KEENE, CRNA

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SACKS, BRENT, CRNA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-21

SNODGRASS, JULIE, CRNA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

VINCENT, BERLIN, CRNA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

**CERTIFIED REGISTERED
NURSE MIDWIFE**

CHOI, NATHALIE, CRNM

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

CHOI, NATHALIE, CRNM

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

CORRY, ANDREA, CRNM

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

CORRY, ANDREA, CRNM

Provider ID: N/A

7910 FROST ST
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

CORRY, ANDREA, CRNM

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-SEP-23

CORRY, ANDREA, CRNM

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-SEP-23

CORTES, CHRISTINE, CRNM†

Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

EKHOLM, JANNA, CRNM†

Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

**ELY-KONOSKE, RACHEL,
CRNM**

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-DEC-23

**ELY-KONOSKE, RACHEL,
CRNM**

Provider ID: N/A

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Effective as of 01-DEC-23

**ELY-KONOSKE, RACHEL,
CRNM**

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

GUNTHER, HOPE, CRNM†

Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

MAST, ASHLEY, CRNM

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-OCT-23

NATHAN, CARLY, CRNM

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

NATHAN, CARLY, CRNM

Provider ID: N/A

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Effective as of 01-AUG-23

PERDION, KAREN, CRNM†

Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

RAY, BROOKE, CRNM†

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-SEP-21

STRAUSS, JOANNA E, CRNM

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-MAY-21

TAYLOR, INGE, CRNM†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

VU HILL, ERICA, NP†

Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

CHIROPRACTOR

ASSADIAN, MEHRAK, DC

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

BEATTY, ZACHARY, DC

Provider ID: N/A

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Effective as of 01-JUL-22

CABALLERO, JAMES, DC

Provider ID: N/A

9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129
Effective as of 01-NOV-23

CABALLERO, JAMES, DC

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-NOV-23

CASTRO, DAVID, DC†

Provider ID: N/A

1016 OUTER RD
SAN DIEGO, CA 92154
Effective as of 01-AUG-22

DORADO, SUE, DC

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-OCT-23

GILIBERTO, JOSEPH, DC†

Provider ID: N/A

9995 CARMEL MOUNTAIN
RD STE D

SAN DIEGO, CA 92129

Effective as of 01-AUG-22

GILIBERTO, JOSEPH, DC†

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-AUG-22

HALEY, STEVEN, DC

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

LE, BRANDON, DC

Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

LE, BRANDON, DC

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

LUU, DANIEL, DC†

Provider ID: N/A

4419 EUCLID AVE STE 105
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

LUU, DANIEL, DC†

Provider ID: N/A

4419 EUCLID AVE STE 105
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

ROSENBERG, ERIK, DC

Provider ID: N/A

7612 LINDA VISTA RD STE
109

SAN DIEGO, CA 92111

Effective as of 01-NOV-23

SU, VENNES, DC

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-OCT-23

DERMATOLOGY

AHLUWALIA, JUSLEEN, MD

Provider ID: N/A

9878 HIBERT ST STE 100
SAN DIEGO, CA 92131
Effective as of 01-DEC-20

ANGRA, KUNAL, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-JUL-21

ANGRA, KUNAL, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-JUL-21

ANGRA, KUNAL, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-DEC-22

ANGRA, KUNAL, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JUL-21

ANGRA, KUNAL, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JUL-21

BOEN, MONICA, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-MAR-20

BOEN, MONICA, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-JAN-21

BOEN, MONICA, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-SEP-22

BOEN, MONICA, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-SEP-22

BRADSHAW, MICHAEL, MD

Provider ID: N/A

9878 HIBERT ST STE 100
SAN DIEGO, CA 92131

Effective as of 01-JUL-16

BRAUN, TARA, MD

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-MAR-24

BROUHA, BROOK, MD

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Effective as of 01-NOV-23

BROUHA, BROOK, MD

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

BROUHA, BROOK, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-SEP-22

BROUHA, BROOK, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-JAN-21

BROUHA, BROOK, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-JAN-21

BROUHA, BROOK, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-JUN-18

CALAME, ANTOANELLA, MD†

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

Effective as of 01-JUL-22

CHEN, BRYAN, MD

Provider ID: N/A

9878 HIBERT ST STE 100
SAN DIEGO, CA 92131†

Effective as of 01-JUL-16

CHEN, BRYAN, MD

Provider ID: N/A

9878 HIBERT ST STE 100
SAN DIEGO, CA 92131

Effective as of 01-JUL-16

DELA ROSA, KRISTINA, MD

Provider ID: N/A

9878 HIBERT ST STE 100
SAN DIEGO, CA 92131

Effective as of 01-AUG-17

DELA ROSA, KRISTINA, MD

Provider ID: N/A

9878 HIBERT ST STE 100
SAN DIEGO, CA 92131

Effective as of 01-JAN-18

**ERICKSON, CHRISTOPHER,
MD†**

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

Effective as of 01-JUL-22

GERSTENFELD, ERIC, MD

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

GLADSJO, JULIE, MD

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-FEB-23

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-DEC-23

HAMMAN, MICHAEL, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-SEP-21

HAMMAN, MICHAEL, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350A
SAN DIEGO, CA 92121

Effective as of 01-NOV-23

HAMMAN, MICHAEL, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350A
SAN DIEGO, CA 92121

Effective as of 01-JUN-17

HAMMAN, MICHAEL, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-JAN-21

HAMMAN, MICHAEL, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JAN-21

HAMMAN, MICHAEL, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JAN-21

HAMMAN, MICHAEL, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-SEP-22

HAN, AMY, MD

Provider ID: N/A

4060 4TH AVE STE 209
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

HAN, AMY, MD

Provider ID: N/A

6386 ALVARADO CT STE
209
SAN DIEGO, CA 92120

Effective as of 01-FEB-22

HEMPERLY, STEPHEN, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Effective as of 01-SEP-22

HEMPERLY, STEPHEN, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

HEMPERLY, STEPHEN, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

HIGHTOWER, GEORGE, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

KASSAB, GHADA, MD

Provider ID: N/A

3737 MORAGA AVE STE
A206
SAN DIEGO, CA 92117

Effective as of 01-MAR-23

KASSAB, GHADA, MD

Provider ID: N/A

3737 MORAGA AVE STE
A206
SAN DIEGO, CA 92117

Effective as of 01-JUL-23

KASSAB, GHADA, MD

Provider ID: N/A

3737 MORAGA AVE STE
A206
SAN DIEGO, CA 92117

Effective as of 01-JAN-21

KAUNITZ, GENEVIEVE, MD†

Provider ID: N/A

8899 UNIVERSITY CENTER
LN STE 350
SAN DIEGO, CA 92122

Effective as of 01-OCT-21

KEEL, DOUGLAS, DO

Provider ID: N/A

8899 UNIVERSITY CENTER
LN STE 150
SAN DIEGO, CA 92122

Effective as of 01-JAN-21

LEE, MICHAEL, MD

Provider ID: N/A

3965 5TH AVE STE 200
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

LUPTON, JASON, MD

Provider ID: N/A

12395 EL CAMINO REAL
STE 207
SAN DIEGO, CA 92130
Effective as of 01-MAR-16

LYFORD, WILLIS, MD

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-MAY-23

MAFONG, ERICK, MD

Provider ID: N/A

4060 4TH AVE STE 209
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

MAFONG, ERICK, MD

Provider ID: N/A

6386 ALVARADO CT STE
209
SAN DIEGO, CA 92120
Effective as of 01-FEB-22

NAHM, WALTER, MD†

Provider ID: N/A

7695 CARDINAL CT STE
200
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

NAHM, WALTER, MD†

Provider ID: N/A

7695 CARDINAL CT STE
200
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

NAHM, WALTER, MD†

Provider ID: N/A

7695 CARDINAL CT STE
200
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

PELLE, MICHELLE, MD†

Provider ID: N/A

3965 5TH AVE STE 200
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

REED, KELLY, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JAN-21

REED, KELLY, DO†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

RILEY, JESSICA, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-MAR-20

RILEY, JESSICA, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-NOV-23

RILEY, JESSICA, DO†

Provider ID: N/A

9339 GENESEE AVE STE
350

SAN DIEGO, CA 92121
Effective as of 01-JAN-21

SCHMIEDECKE, RUDY, MD

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-JUL-23

SHAHAN, FRED, MD

Provider ID: N/A

6367 ALVARADO CT STE
107
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

SHAHAN, FRED, MD

Provider ID: N/A

6367 ALVARADO CT STE
107
SAN DIEGO, CA 92120
Effective as of 01-JAN-14

SHIELL, RONALD, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

SHIELL, RONALD, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

SHIELL, RONALD, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

**SIRICHOTIRATANA, MELISSA,
MD†**

Provider ID: N/A

4765 CARMEL MOUNTAIN RD STE 201
SAN DIEGO, CA 92130
Effective as of 01-JAN-23

SOON, SEAVER, MD

Provider ID: N/A

3737 4TH AVE
SAN DIEGO, CA 92103
Effective as of 01-MAR-23

STEIN, ALEXANDER, MD†

Provider ID: N/A

6280 JACKSON DR STE 8
SAN DIEGO, CA 92119
Effective as of 01-SEP-22

TOMPKINS, STACY, MD

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-NOV-23

TOMPKINS, STACY, MD†

Provider ID: N/A

9339 GENESEE AVE STE 350A
SAN DIEGO, CA 92121
Effective as of 01-DEC-22

TOMPKINS, STACY, MD†

Provider ID: N/A

9339 GENESEE AVE STE 350A
SAN DIEGO, CA 92121
Effective as of 01-JUL-22

TOMPKINS, STACY, MD†

Provider ID: N/A

9339 GENESEE AVE STE 350A
SAN DIEGO, CA 92121
Effective as of 01-JUL-22

TSE, YARDY, MD†

Provider ID: N/A

4765 CARMEL MOUNTAIN RD STE 201
SAN DIEGO, CA 92130
Effective as of 01-SEP-22

TSE, YARDY, MD†

Provider ID: N/A

4765 CARMEL MOUNTAIN RD STE 201
SAN DIEGO, CA 92130
Effective as of 01-SEP-21

VENKAT, ARUN, MD†

Provider ID: N/A

4765 CARMEL MOUNTAIN RD STE 201
SAN DIEGO, CA 92130
Effective as of 01-APR-20

ZALESKI LARSEN, LISA, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22

ZALESKI LARSEN, LISA, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JAN-21

ZALESKI LARSEN, LISA, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JAN-21

ZUBAIR, RAHEEL, MD

Provider ID: N/A

9339 GENESEE AVE STE

350

SAN DIEGO, CA 92121
Effective as of 01-DEC-23

ZUBAIR, RAHEEL, MD

Provider ID: N/A

9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

ZUBAIR, RAHEEL, MD

Provider ID: N/A

9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121*
Effective as of 01-NOV-23

DERMATOLOGY

DERMATOPATHOLOGY

CALAME, ANTOANELLA, MD†

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Effective as of 01-JAN-23

ERICKSON, CHRISTOPHER, MD†

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

SHEN, HONGGANG, MD

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JUL-19

EMERGENCY MEDICINE

ALKATIB, RHONDA, MD†

Provider ID: N/A

2655 CAMINO DEL RIO N

STE 120
SAN DIEGO, CA 92108
Effective as of 01-AUG-20

CASTELLANO, TIFFANY, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

CHEN, ALICE, MD†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

COYNE, CHRISTOPHER, MD†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

DICKSON, MATTHEW, DO†
Provider ID: N/A
1628 PALM AVE
SAN DIEGO, CA 92154
Effective as of 01-JAN-21

GUEFEN, URI, MD
Provider ID: N/A
555 W C ST STE 102
SAN DIEGO, CA 92101
Effective as of 01-SEP-23

HARE, MARC, MD
Provider ID: N/A
6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Effective as of 01-APR-23

**HARRELL-BURDER, BEVERLY,
MD†**
Provider ID: N/A
950 S EUCLID AVE

SAN DIEGO, CA 92114
Effective as of 01-JUL-22

HOGUE, BRENNAN, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

JURKOWSKI, LEONARD, MD†
Provider ID: N/A
3830 VALLEY CENTRE DR
STE 702
SAN DIEGO, CA 92130
Effective as of 01-JAN-21

KUTZ, CRAIG, MD†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

LIOTTA, BENJAMIN, MD†
Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-DEC-21

MUELLER, MATTHEW, DO†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

PARK, JAY, MD†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

YU, ELAINE, DO
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

ENDOCRINOLOGY METABOLISM DIABETES

EKANAYAKE, PREETHIKA, MD†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

EKANAYAKE, PREETHIKA, MD†
Provider ID: N/A
4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

FIRST, BRIAN, MD†
Provider ID: N/A
4282 GENESEE AVE STE
103
SAN DIEGO, CA 92117
Effective as of 01-JAN-14

GUERIN, CHRIS, MD†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

HOSEIN, NADEEN, MD
Provider ID: N/A
4077 5TH AVE STE 35
SAN DIEGO, CA 92103
Effective as of 01-FEB-23

IYENGAR, RAVI, MD
Provider ID: N/A
4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

IYENGAR, RAVI, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-APR-23

NAGELBERG, JODI, MD†

Provider ID: N/A

☐ 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

NAGELBERG, JODI, MD†

Provider ID: N/A

☐ 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

NAGELBERG, JODI, MD†

Provider ID: N/A

☐ 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-NOV-21

NAGELBERG, JODI, MD†

Provider ID: N/A

☐ 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Effective as of 01-NOV-21

SANDLER, JEFFREY, MD

Provider ID: N/A

☐ 4060 4TH AVE STE 340
SAN DIEGO, CA 92103
Effective as of 01-OCT-23

SANDLER, JEFFREY, MD

Provider ID: N/A

☐ 4060 4TH AVE STE 340
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

SANDLER, JEFFREY, MD

Provider ID: N/A

☐ 4060 4TH AVE STE 340
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

SHAH, NANDI, MD

Provider ID: N/A

☐ 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

SHAH, NANDI, MD

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

STRAHM, LISA, MD†

Provider ID: N/A

☐ 1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
Effective as of 01-JUL-20

TANTISIRA, LALITA, MD†

Provider ID: N/A

☐ 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

ENDOCRINOLOGY

REPRODUCTIVE

DANESHMAND, SAID, MD

Provider ID: N/A

☐ 11515 EL CAMINO REAL STE
100
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

FOYOUZI-YOUSEFI,

NASTARAN, MD

Provider ID: N/A

☐ 11425 EL CAMINO REAL
SAN DIEGO, CA 92130
Effective as of 01-JUN-23

FRIEDMAN, BROOKE, MD†

Provider ID: N/A

☐ 11425 EL CAMINO REAL
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

FAMILY PRACTICE

**ALVAREZ-ESTRADA, MIGUEL,
MD†**

Provider ID: N/A

☐ 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Effective as of 01-SEP-23

BERNADETT, ALEX, MD†

Provider ID: N/A

☐ 10505 SORRENTO VALLEY
RD STE 200
SAN DIEGO, CA 92121
Effective as of 01-FEB-23

BERNADETT, ALEX, MD†

Provider ID: N/A

☐ 6699 ALVARADO RD STE
2100
SAN DIEGO, CA 92120
Effective as of 01-FEB-23

CAMPBELL, BRIANNA, MD

Provider ID: N/A

☐ 950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-MAY-23

DENYSIAK, JACQUELINE, MD†

Provider ID: N/A

☐ 3969 4TH AVE STE 203
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-DEC-20

HILL, LINDA, MD†

Provider ID: N/A

☐ 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

HILL, LINDA, MD†

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

JOLICOEUR, MEGAN, DO

Provider ID: N/A

9333 GENESEE AVE
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

JOLICOEUR, MEGAN, DO

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Effective as of 01-JUN-23

JOLICOEUR, MEGAN, DO

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

JOLICOEUR, MEGAN, DO

Provider ID: N/A

8899 UNIVERSITY CENTER
LN STE 350
SAN DIEGO, CA 92122
Effective as of 01-JUN-23

KUROSAKA, MOMO, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

KUROSAKA, MOMO, MD†

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-AUG-22

LARA, LESLEY, MD†

Provider ID: N/A

1016 OUTER RD
SAN DIEGO, CA 92154
Effective as of 01-AUG-22

LYNCH, SHAUNA, DO

Provider ID: N/A

1075 CAMINO DEL RIO S
SAN DIEGO, CA 92108
Effective as of 01-SEP-22

MARSTON, JACQUELINE, DO

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

ORTIZ, KENNETH, MD†

Provider ID: N/A

316 25TH ST
SAN DIEGO, CA 92102
Teleservice
Effective as of 01-MAY-23

PERESS, LILIA, MD

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-24

PERESS, LILIA, MD

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-24

RODRIGUEZ, NATALIE, MD

Provider ID: N/A

1685 HOLLISTER ST
SAN DIEGO, CA 92154*
Effective as of 01-NOV-23

**SHEKER-DICKSON, KIMBERLY,
DO†**

Provider ID: N/A

1628 PALM AVE
SAN DIEGO, CA 92154
Effective as of 01-JAN-21

SOPHY, ELIZABETH, MD†

Provider ID: N/A

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Effective as of 01-SEP-22

**SUMMERS-DAY, COURTNEY,
MD†**

Provider ID: N/A

1016 OUTER RD
SAN DIEGO, CA 92154
Effective as of 01-JUL-22

FAMILY PRACTICE

GERIATRIC MEDICINE

MILLER, SCOTT, MD†

Provider ID: N/A

9878 CARMEL MOUNTAIN
RD STE B
SAN DIEGO, CA 92129
Effective as of 01-JAN-21

FAMILY PRACTICE

SPORTS MEDICINE

UDOWENKO, MARINA, DO

Provider ID: N/A

375 CAMINO DE LA REINA
STE C
SAN DIEGO, CA 92108
Effective as of 01-JUN-23

GASTROENTEROLOGY

CHANDRADAS, SAJIV, MD†

Provider ID: N/A

4060 4TH AVE STE 240
SAN DIEGO, CA 92103

Effective as of 01-JUL-17

CUBAS, IVAN, MD†

Provider ID: N/A

☒ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-DEC-14

CUBAS, IVAN, MD†

Provider ID: N/A

☒ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-MAR-15

CUBAS, IVAN, MD†

Provider ID: N/A

☒ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-JAN-21

CUMMINS, ANDREW, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 240
SAN DIEGO, CA 92103

Effective as of 01-JAN-15

DESTA, TADDESE, MD†

Provider ID: N/A

☒ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-JAN-21

DESTA, TADDESE, MD†

Provider ID: N/A

☒ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-SEP-15

DESTA, TADDESE, MD†

Provider ID: N/A

☒ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-JAN-14

DUBOIS, SUJA, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 240
SAN DIEGO, CA 92103

Effective as of 01-SEP-20

FICK, DARYL, MD

Provider ID: N/A

☒ 4060 4TH AVE STE 240
SAN DIEGO, CA 92103

Effective as of 01-AUG-23

GADDIPATI, KISHORE, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 240
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

GISH, ROBERT, MD†

Provider ID: N/A

☒ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-21

GISH, ROBERT, MD†

Provider ID: N/A

☒ 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-21

HASAN, AWS, MD

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

HASSANEIN, TAREK, MD†

Provider ID: N/A

☒ 995 GATEWAY CENTER
WAY STE 105
SAN DIEGO, CA 92102

Effective as of 01-SEP-22

HUA, MENG, MD†

Provider ID: N/A

☒ 6699 ALVARADO RD STE
2306

SAN DIEGO, CA 92120

Effective as of 01-SEP-22

KLAPHEKE, ROBERT, MD†

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-21

MITTAL, YASH, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 240
SAN DIEGO, CA 92103

Effective as of 01-MAR-20

NOVO, MEGAN, MD

Provider ID: N/A

☒ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-MAY-23

NOVO, MEGAN, MD

Provider ID: N/A

☒ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-JAN-23

REDDY, JOSEPH, MD†

Provider ID: N/A

☒ 6699 ALVARADO RD STE
2301

SAN DIEGO, CA 92120

Effective as of 01-AUG-20

REDDY, JOSEPH, MD†

Provider ID: N/A

☒ 6699 ALVARADO RD STE
2301

SAN DIEGO, CA 92120

Effective as of 01-JUL-22

REDDY, JOSEPH, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2301

SAN DIEGO, CA 92120

Effective as of 01-JAN-14

SCHAEFFER, CYNTHIA, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-APR-21

SCHAEFFER, CYNTHIA, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-SEP-15

SHAFFER, KATHERINE, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-MAR-19

SHAFFER, KATHERINE, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-OCT-18

SHAFFER, KATHERINE, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-JAN-21

SHAH, SHAILJA, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

SHAH, SHAILJA, MD†

Provider ID: N/A

200 W ARBOR DR

SAN DIEGO, CA 92103

Effective as of 01-AUG-21

SHPANER, ALEXANDER, MD†

Provider ID: N/A

6719 ALVARADO RD STE
206

SAN DIEGO, CA 92120

Effective as of 01-SEP-22

STIPHO, SALLY, MD†

Provider ID: N/A

4060 4TH AVE STE 240
SAN DIEGO, CA 92103

Effective as of 01-SEP-20

SYAL, GAURAV, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

SYAL, GAURAV, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

THOMAS, CARLTON, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-JAN-21

THOMAS, CARLTON, MD†

Provider ID: N/A

1855 1ST AVE STE 200B
SAN DIEGO, CA 92101

Effective as of 01-MAR-16

THOMAS, CARLTON, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-JAN-14

THOMAS, CARLTON, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-SEP-15

YOUSSEF, FADY, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

YOUSSEF, FADY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

GENERAL PRACTICE

NGUYEN, HUONG, MD†

Provider ID: N/A

4444 EL CAJON BLVD STE
6

SAN DIEGO, CA 92115*

Effective as of 01-APR-21

GENETIC COUNSELOR

FOYOUZI-YOUSEFI,

NASTARAN, MD

Provider ID: N/A

11425 EL CAMINO REAL
SAN DIEGO, CA 92130

Effective as of 01-JUN-23

GENETICS MEDICAL

JONES, MARILYN, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
200

SAN DIEGO, CA 92121

Effective as of 01-JUN-21

**GYNECOLOGIC
ONCOLOGY**

BAHADOR, AFSHIN, MD

Provider ID: N/A

9340 CAMINO DE LA SIESTA STE 204
SAN DIEGO, CA 92108
Effective as of 01-APR-23

DUGGAN, BRIDGETTE, MD

Provider ID: N/A

9340 CAMINO DE LA SIESTA STE 204
SAN DIEGO, CA 92108
Effective as of 01-MAY-23

NYAKUDARIKA, NATSAI, MD

Provider ID: N/A

9340 CAMINO DE LA SIESTA STE 204
SAN DIEGO, CA 92108
Effective as of 01-JUL-23

GYNECOLOGY

WILLIAMS, ALISA, MD†

Provider ID: N/A

5555 RESERVOIR DR STE 307
SAN DIEGO, CA 92120
Effective as of 01-JAN-20

**HEARING AID DEALER /
SUPPLIER**

ANAYA, MANUEL, MA†

Provider ID: N/A

9340 CLAIREMONT MESA BLVD STE D
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

ANDERSON, ELAINE, MA†

Provider ID: N/A

9340 CLAIREMONT MESA BLVD STE D
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

ANDERSON, ELAINE, MA†

Provider ID: N/A

6367 ALVARADO CT
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

ANDERSON, ELAINE, MA†

Provider ID: N/A

6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

DANDURAND, JOHN, MA†

Provider ID: N/A

6367 ALVARADO CT
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-JAN-21

DANDURAND, JOHN, MA†

Provider ID: N/A

9340 CLAIREMONT MESA BLVD STE D
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-MAY-22

DAVIS, KELLE, MA†

Provider ID: N/A

9340 CLAIREMONT MESA BLVD STE D
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

DAVIS, KELLE, MA†

Provider ID: N/A

9340 CLAIREMONT MESA BLVD
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

DAVIS, KELLE, MA†

Provider ID: N/A

6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

**HEMATOLOGY /
ONCOLOGY**

AHMED, SYED, MD

Provider ID: N/A

7432 LA MANTANZA
SAN DIEGO, CA 92127
Effective as of 01-FEB-24

ANDREY, JEFFREY, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103*
Effective as of 01-APR-23

ANDREY, JEFFREY, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

BASERI, BABAK, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-APR-24

BASERI, BABAK, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103*
Effective as of 01-APR-23

BASERI, BABAK, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103

Effective as of 01-JUL-22

BESSUDO, ALBERTO, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Teleservice

Effective as of 01-JAN-21

BESSUDO, ALBERTO, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Teleservice

Effective as of 01-NOV-21

CHEN, YU-WEI, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

COGGAN, JAMES, DO

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123

Effective as of 01-NOV-22

EISENBERG, STEVEN, DO†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Effective as of 01-JAN-21

FISHER, JENNIFER, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123

Effective as of 01-JAN-14

FISHER, JENNIFER, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123

Effective as of 01-DEC-08

FRAKES, LAURIE, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Teleservice

Effective as of 01-NOV-21

MARJON, PHILIP, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103*

Effective as of 01-APR-23

MARJON, PHILIP, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103

Effective as of 01-JUL-22

MARJON, PHILIP, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103

Effective as of 01-MAY-22

MESLEH SHAYEB, AKRAM, MD†

Provider ID: N/A

9333 GENESEE AVE STE
310
SAN DIEGO, CA 92121

Effective as of 01-NOV-21

NAIDZIONAK, ULADZISLAU, MD†

Provider ID: N/A

7930 FROST ST STE 405
SAN DIEGO, CA 92123

Effective as of 01-JUL-22

NGUYEN, ANTHONY, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-AUG-23

PARSI, HOOMAN, MD

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

QUINN, CATHERINE, MD

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123

Effective as of 01-APR-23

RAZZAQUE, SAQIB, MD

Provider ID: N/A

7377 VIA CRESTA RD
SAN DIEGO, CA 92129

Effective as of 01-FEB-24

REDFERN, CHARLES, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123

Effective as of 01-JAN-14

REDFERN, CHARLES, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123

Effective as of 01-SEP-15

RICE, KRISTEN, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-SEP-15

RICE, KRISTEN, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-JUN-11

SARWARI, NAWID, MD

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-NOV-22

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103*
Effective as of 01-APR-23

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-MAY-22

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

3965 5TH AVE STE 230

SAN DIEGO, CA 92103
Effective as of 01-JUL-23

SHAIKH, ANWER, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

SHENOY, CASIE, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-FEB-18

SHIEH, MARIE, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-DEC-16

SULLIVAN, JESSICA, DO

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

SULLIVAN, JESSICA, DO

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-DEC-23

**HOSPICE AND PALLIATIVE
MEDICINE**

RUBENZIK, TAMARA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-21

RUBENZIK, TAMARA, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-21

HOSPITALIST MD/DO

DJEKIC, KRISTINA, DO†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

FIRESTEIN, CATHERINE, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

HAMMOND, CHARLES, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-21

SHINDO, YURI, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

TONG, ALEXANDER, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

YANG, BENJAMIN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

YASSIN, HAZEM, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

INFECTIOUS DISEASE

ALDOUS, JEANNETTE, MD†

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-JUL-22

CAPERNA, JOSEPH, MD†

Provider ID: N/A

2333 1ST AVE STE 104
SAN DIEGO, CA 92101
Effective as of 01-JUL-21

KUPPALLI, KRUTIKA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

MARTIN, THOMAS, MD†

Provider ID: N/A

4168 FRONT ST FL 3
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

MARTIN, THOMAS, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

**RAMIREZ SANCHEZ, CLAUDIA,
MD**

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

INTERNAL MEDICINE

AIZIN, VITALI, MD

Provider ID: N/A

3802 NATIONAL AVE
SAN DIEGO, CA 92113
Effective as of 01-OCT-23

AL-SALEH, YADANI, MD†

Provider ID: N/A

3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Effective as of 01-MAR-23

BALL, SHELDON, MD

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-OCT-22

BALL, SHELDON, MD

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-OCT-22

BRAZEL, DANIELLE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

BRAZEL, DANIELLE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

CHAU, JOHN, MD†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-MAY-23

CHAU, JOHN, MD†

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-MAY-23

**CHONGKRAIRATANAKUL,
TEPSIRI, MD†**

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

CSAPOCZI, PETER, MD

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114
Teleservice
Effective as of 01-JAN-21

DASHI, ARBEN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

DAVIS, JASON, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

DAVIS, JASON, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-NOV-23

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-NOV-16

GADIYARAM, VARUNA, MD

Provider ID: N/A

200 W ARBOR DR

SAN DIEGO, CA 92103
Effective as of 01-SEP-23

GELBERG, ANNA, MD†

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

GRUNVALD, EDUARDO, MD†

Provider ID: N/A
4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

GRUNVALD, EDUARDO, MD†

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

HAMMES, JOHN, MD†

Provider ID: N/A
4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-NOV-23

HAMMES, JOHN, MD†

Provider ID: N/A
4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

HASTIE, ELIZABETH, MD†

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

JAIN, SUPRABHA, MD

Provider ID: N/A
6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121

Teleservice
Effective as of 01-OCT-22

JIANG, JUN, MD†

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

KATSNELSON, MARCELLA, DO

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

KAUFER, DAVID, MD

Provider ID: N/A
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD†

Provider ID: N/A
3633 CAMINO DEL RIO S
STE 300
SAN DIEGO, CA 92108
Effective as of 01-MAR-21

LAMANTIA, MICHELE, MD†

Provider ID: N/A
950 S EUCLID AVE
SAN DIEGO, CA 92114*
Effective as of 01-AUG-17

LIU, ANDREW, MD

Provider ID: N/A
4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

LIU, ANDREW, MD

Provider ID: N/A
8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

LIU, ANDREW, MD

Provider ID: N/A
6402 EL CAJON BLVD STE
100&102
SAN DIEGO, CA 92115
Effective as of 01-SEP-23

LUND, GUY, MD†

Provider ID: N/A
8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

MARTINEZ, ARMANDO, MD†

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

MOOLANI, UJJALA, MD

Provider ID: N/A
6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-MAY-23

MOOLANI, UJJALA, MD

Provider ID: N/A
8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

NAMAZY, DAVID, MD†

Provider ID: N/A
6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-JAN-24

NARANJO, RODRIGO, MD†

Provider ID: N/A
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

NARANJO, RODRIGO, MD†

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

NGUYEN, VIET, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-OCT-20

NOKES, BRANDON, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

PITT, WILLIAM, MD†

Provider ID: N/A

6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120
Effective as of 01-JAN-23

SONG, ALEXANDER, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

TANTISIRA, LALITA, MD†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

TANTISIRA, LALITA, MD†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

TOPPEN, WILLIAM, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

TRIVEDI, MEHUL, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

TRIVEDI, MEHUL, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

YANG, JENNY, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

YANG, JENNY, MD†

Provider ID: N/A

4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
Effective as of 01-AUG-21

**INTERNAL MEDICINE
CRITICAL CARE MEDICINE**

BOROK, ZEA, MD†

Provider ID: N/A

4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

BOROK, ZEA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

BOROK, ZEA, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

JAFFE, GILAD, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

JAFFE, GILAD, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-SEP-23

MERCANDETTI, ALEX, MD†

Provider ID: N/A

3965 5TH AVE STE 430
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-19

SULLIVAN, LAUREN, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

SULLIVAN, LAUREN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

SULLIVAN, LAUREN, MD

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-SEP-23

INTERVENTIONAL

CARDIOLOGY

JOHN, ALAN, MD

Provider ID: N/A

☐ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-MAY-23

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

☐ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-MAY-23

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

☐ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-DEC-22

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

☐ 412 WASHINGTON ST
SAN DIEGO, CA 92103

Effective as of 01-DEC-22

SHAH, KULIN, MD†

Provider ID: N/A

☐ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-APR-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

☐ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-APR-23

LICENSED CLINICAL

SOCIAL WORKER

ALVAREZ, DIANA, LCSW

Provider ID: N/A

☐ 4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105

Teleservice

Effective as of 01-APR-21

BASHAM, CLAUDIA, LCSW

Provider ID: N/A

☐ 3025 BEYER BLVD STE E101
SAN DIEGO, CA 92154

Teleservice

Effective as of 01-NOV-21

BIGGER, ALAINA, LCSW

Provider ID: N/A

☐ 4849 RONSON CT STE 207
SAN DIEGO, CA 92111

Effective as of 01-AUG-23

BROWN, EDEN, LCSW†

Provider ID: N/A

☐ 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-FEB-22

DIAZ, JAENAI, LCSW

Provider ID: N/A

☐ 350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

DSOUZA, NICOLE, LCSW†

Provider ID: N/A

☐ 330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

ESCAMILLA, KARLA, LCSW†

Provider ID: N/A

☐ 950 S EUCLID AVE
SAN DIEGO, CA 92114

Effective as of 01-DEC-21

GONZALEZ, ADRIANA, LCSW

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

GONZALEZ, ADRIANA, LCSW

Provider ID: N/A

☐ 4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-JUN-23

HAMM, DEANNA, LCSW

Provider ID: N/A

☐ 350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

JASSO-RAMIREZ, MARTHA, LCSW

Provider ID: N/A

☐ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-SEP-21

KHAMISA, SORAIYA, LCSW

Provider ID: N/A

☐ 4520 EXECUTIVE DR STE A
SAN DIEGO, CA 92121

Effective as of 01-JUN-23

LOWE, LINDSAY, LCSW

Provider ID: N/A

☐ 350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

RABBAN, DIANA, LCSW

Provider ID: N/A

☐ 286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

Teleservice

Effective as of 01-NOV-22

SACHS, MELISSA, LCSW†

Provider ID: N/A

☐ 4690 EL CAJON BLVD

SAN DIEGO, CA 92115
Teleservice
Effective as of 01-MAR-21

**SCHWARTZMAN, BENJAMIN,
LCSW**

Provider ID: N/A
4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

**SCHWARTZMAN, BENJAMIN,
LCSW**

Provider ID: N/A
4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-DEC-22

**SCHWARTZMAN, BENJAMIN,
LCSW**

Provider ID: N/A
4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-FEB-23

**SCHWARTZMAN, BENJAMIN,
LCSW**

Provider ID: N/A
4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

WEAVER, MARINEL, LCSW†

Provider ID: N/A
286 EUCLID AVE STE 302
SAN DIEGO, CA 92114
Teleservice
Effective as of 01-DEC-21

WRIGHT, STEPHANIE, LCSW

Provider ID: N/A
10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-JAN-24

**LICENSED PROFESSIONAL
CLINICAL COUNSELOR**

TITOVA, ANASTASIA, LPCC
Provider ID: N/A
4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

TITOVA, ANASTASIA, LPCC
Provider ID: N/A
4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-FEB-23

**MARRIAGE FAMILY
THERAPIST**

GULOTTA, SAMANTHA, MFT
Provider ID: N/A
9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Effective as of 01-JUN-23

HOLLEMAN, KEVIN, DO
Provider ID: N/A
8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-APR-23

KUEK, JOHN, MFT
Provider ID: N/A
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-APR-21
LIDLAW, JOHN, MFT
Provider ID: N/A
10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-JAN-24

SAMORA, ANTHONY, MFT
Provider ID: N/A
438 CAMINO DEL RIO S
STE 106
SAN DIEGO, CA 92108
Effective as of 01-DEC-22

SCHLOSSER, TARA, MFT
Provider ID: N/A
330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

SUTTLE, CAROLYN, MFT†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

VILLAGOMEZ, JOSHUA, MFT
Provider ID: N/A
330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

ZAYAS, MARIO, MFT
Provider ID: N/A
3025 BEYER BLVD STE
E-101
SAN DIEGO, CA 92154
Effective as of 01-JAN-21

**MATERNAL AND FETAL
MEDICINE**

AHN, JENNIFER, MD†

Provider ID: N/A

12264 EL CAMINO REAL
STE 204
SAN DIEGO, CA 92130
Effective as of 01-FEB-21

BERGGREN, ERICA, MD†

Provider ID: N/A

12264 EL CAMINO REAL
STE 204
SAN DIEGO, CA 92130
Effective as of 01-JAN-21

DOWLING, DAVID, MD†

Provider ID: N/A

12264 EL CAMINO REAL
STE 204
SAN DIEGO, CA 92130
Effective as of 01-JAN-21

EMERUWA, UKACHI, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

EMERUWA, UKACHI, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

EMERUWA, UKACHI, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

GOLLIN, YVONNE, MD†

Provider ID: N/A

12264 EL CAMINO REAL
STE 204
SAN DIEGO, CA 92130
Effective as of 01-JAN-21

MEDICAL ONCOLOGY

KOSSMAN, STEVEN, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-SEP-15

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

AL-DAHMAN, ZAID, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-MAY-23

AL-DAHMAN, ZAID, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-MAY-23

AL-DAHMAN, ZAID, MD

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

BEHREND, TERRY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

BEHREND, TERRY, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

BEHREND, TERRY, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

BEHREND, TERRY, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-JUL-22

BEHREND, TERRY, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-MAR-16

BOISKIN, MARK, MD

Provider ID: N/A

9610 GRANITE RIDGE DR
STE B
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

**CALDERON MOLINA, JUAN,
MD**

Provider ID: N/A

9610 GRANITE RIDGE DR
STE B
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

**CHONGKRAIRATANAKUL,
TEPSIRI, MD†**

Provider ID: N/A

8010 FROST ST STE 510

SAN DIEGO, CA 92123
Effective as of 01-SEP-21

DAVIS, JASON, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-SEP-20

DAVIS, JASON, MD†

Provider ID: N/A

7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DAVIS, JASON, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

DAVIS, JASON, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-MAR-15

DAVIS, JASON, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

DAVIS, JASON, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

DAVIS, JASON, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-NOV-23

FARAVARDEH, ARMAN, MD

Provider ID: N/A

8010 FROST ST STE 100
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-NOV-16

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

HAMMES, JOHN, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

HAMMES, JOHN, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-MAR-15

HAMMES, JOHN, MD†

Provider ID: N/A

4060 4TH AVE STE 220

SAN DIEGO, CA 92103*

Effective as of 01-JAN-24

HUSSAIN, SHAHID, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Teleservice

Effective as of 01-AUG-23

KHAING, KATHY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

LE, CHARLES, MD†

Provider ID: N/A

4440 EUCLID AVE STE A
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

LE, CHARLES, MD†

Provider ID: N/A

4440 EUCLID AVE
SAN DIEGO, CA 92115
Effective as of 01-JUL-21

LUND, GUY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

LUND, GUY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-NOV-16

LUND, GUY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123

Effective as of 01-SEP-22

NAMAZY, DAVID, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE 100
SAN DIEGO, CA 92115
Effective as of 01-JUL-22

NAMAZY, DAVID, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE 100
SAN DIEGO, CA 92115
Effective as of 01-APR-17

NAMAZY, DAVID, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE 100
SAN DIEGO, CA 92115
Effective as of 01-JUN-23

NGUYEN, VIET, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

QUEVEDO, JUAN, MD†

Provider ID: N/A

995 GATEWAY CENTER WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-SEP-22

QUEVEDO, JUAN, MD†

Provider ID: N/A

995 GATEWAY CENTER WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-SEP-20

QUEVEDO, JUAN, MD†

Provider ID: N/A

995 GATEWAY CENTER WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-NOV-23

QUEVEDO, JUAN, MD†

Provider ID: N/A

995 GATEWAY CENTER WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-AUG-21

RAHIMI, SINA, DO†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-MAR-23

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

SETHI, SUPREET, MD

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

SHAPIRO, MARK, MD

Provider ID: N/A

9610 GRANITE RIDGE DR STE B
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

STEER, DYLAN, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

STEINBERG, STEVEN, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

ZHONG, YAN, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JUL-22

ZHONG, YAN, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-MAR-22

ZHONG, YAN, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-NOV-22

ZHONG, YAN, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-MAY-22

NEUROLOGY

BINDAL, ANKUR, MD†

Provider ID: N/A

6496 WEATHERS PL STE 100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

BOBO, JERRY, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

FREDERICK, ALIYA, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

GRISOLIA, JAMES, MD†

Provider ID: N/A

4033 3RD AVE STE 410
SAN DIEGO, CA 92103
Effective as of 01-SEP-20

GUPTA, VISHAL, DO

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

GUTFLAIS, ERIC, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HAAS, RICHARD, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HAAS, RICHARD, MD†

Provider ID: N/A

200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

HAAS, RICHARD, MD†

Provider ID: N/A

4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121
Effective as of 01-OCT-21

HEADLEY, ALISON, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HUSSAIN, SHAHID, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-MAR-24

KARANJIA, NAVAZ, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

KARANJIA, NAVAZ, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

KHAMISHON, BORIS, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2301
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

KHAMISHON, BORIS, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2301
SAN DIEGO, CA 92120
Effective as of 01-AUG-20

KHAMISHON, BORIS, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2301
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

KHAMISHON, BORIS, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2301
SAN DIEGO, CA 92120
Effective as of 01-JAN-14

KURESHI, SOHAIB, MD†

Provider ID: N/A

3750 CONVOY ST STE 301
SAN DIEGO, CA 92111
Effective as of 01-SEP-20

LASKER, BRUCE, MD†

Provider ID: N/A

3737 MORAGA AVE STE A5
SAN DIEGO, CA 92117
Effective as of 01-FEB-07

MALIK, SUDHIR, MD†

Provider ID: N/A

4033 3RD AVE STE 420
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

MALIK, SUDHIR, MD†

Provider ID: N/A

4033 3RD AVE STE 420
SAN DIEGO, CA 92103
Effective as of 01-OCT-19

MALIK, SUDHIR, MD†

Provider ID: N/A

4033 3RD AVE STE 420
SAN DIEGO, CA 92103
Effective as of 01-DEC-20

QAYOUMI, WALI, MD†

Provider ID: N/A

4510 EXECUTIVE DR STE

325
SAN DIEGO, CA 92121
Effective as of 01-OCT-21

QAYOUMI, WALI, MD

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

RAYNOWSKA, JENELLE, MD

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

RAYNOWSKA, JENELLE, MD

Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-APR-23

RIGGINS, NINA, MD

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SCHORR, EMILY, MD

Provider ID: N/A
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-MAR-24

SCHORR, EMILY, MD

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

SCHORR, EMILY, MD

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-MAR-24

SCHULTE, JESSICA, MD

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SIAVOSHI, SARA, DO

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SIAVOSHI, SARA, DO[†]

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

SIAVOSHI, SARA, DO[†]

Provider ID: N/A
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-FEB-22

TUASON, NORBERTO, MD[†]

Provider ID: N/A
438 CAMINO DEL RIO S
STE 106
SAN DIEGO, CA 92108
Teleservice
Effective as of 01-NOV-23

WIEGAND, SARAH, DO

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

NEUROLOGY CHILD

SATTAR, SHIFTEH, MD

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

NUCLEAR MEDICINE

ALEXANDER, SINDU, MD[†]

Provider ID: N/A
330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ALEXANDER, SINDU, MD[†]

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CHOI, ESTHER, MD

Provider ID: N/A
330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CHOI, ESTHER, MD

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

KIPPER, MICHAEL, MD

Provider ID: N/A
330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

METH, ERNIE, MD

Provider ID: N/A
3444 KEARNY VILLA RD
STE 1
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-NOV-21

SHARIF TABRIZI, AHMAD, MD

Provider ID: N/A
200 W ARBOR DR

SAN DIEGO, CA 92103
Effective as of 01-JUL-23

SHARIF TABRIZI, AHMAD, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

**OBSTETRICS /
GYNECOLOGY**

AL-MSHHDANI, AYSER, MD

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

ASLIAN, AZITA, MD†

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-SEP-22

BLAKE, GARY, MD†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

BRAHMBHATT, BHOOMI, MD

Provider ID: N/A

2918 5TH AVE STE 100
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CARDENAS, MICHAEL, MD

Provider ID: N/A

2918 5TH AVE STE 100
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

CARDENAS, MICHAEL, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

CARDENAS, MICHAEL, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

CASTILLO, MARIA, MD†

Provider ID: N/A

7930 FROST ST STE 103
SAN DIEGO, CA 92123
Effective as of 01-FEB-21

CHAC, RICK, MD†

Provider ID: N/A

550 WASHINGTON ST STE
331
SAN DIEGO, CA 92103
Effective as of 01-NOV-22

CHUAN, SANDY, MD†

Provider ID: N/A

11425 EL CAMINO REAL
SAN DIEGO, CA 92130
Effective as of 01-FEB-16

CONTRERAS, MICHELLE, MD†

Provider ID: N/A

550 WASHINGTON ST STE
331
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-FEB-22

DAVIS, TRACIE, MD

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

DELCORE, LAURA, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

DELCORE, LAURA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

DELCORE, LAURA, MD†

Provider ID: N/A

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Effective as of 01-AUG-22

DELCORE, LAURA, MD†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-AUG-22

DELCORE, LAURA, MD†

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

☐ 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

**FOLCH TORRES-AGUIAR,
BEATRIZ, MD†**

Provider ID: N/A

☐ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-AUG-22

FRUGONI, GINA, MD†

Provider ID: N/A

☐ 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

GELLENS, ANDREW, MD†

Provider ID: N/A

☐ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-NOV-21

HARVEY, SCOTT, MD†

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-21

HARVEY, SCOTT, MD†

Provider ID: N/A

☐ 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-MAY-21

HUI, KIM, MD†

Provider ID: N/A

☐ 2918 5TH AVE STE 100

SAN DIEGO, CA 92103
Effective as of 01-SEP-15

JAIME, CINDY, MD†

Provider ID: N/A

☐ 2918 5TH AVE STE 100
SAN DIEGO, CA 92103
Effective as of 01-JUN-18

JENKINS, ENCHANTA, MD†

Provider ID: N/A

☐ 4050 BEYER BLVD
SAN DIEGO, CA 92173
Effective as of 01-JUN-22

KHAN, ALIYA, MD†

Provider ID: N/A

☐ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-NOV-21

MACKAY, GILLIAN, MD

Provider ID: N/A

☐ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-DEC-23

MACKAY, GILLIAN, MD

Provider ID: N/A

☐ 6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-DEC-23

MELLENDEZ, ARIANA, MD

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

MELLENDEZ, ARIANA, MD

Provider ID: N/A

☐ 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

MENDEZ, DIEGO, MD

Provider ID: N/A

☐ 950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-APR-23

**MEURICE, MARIELLE
ERENDIRA LUCILLE, MD†**

Provider ID: N/A

☐ 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

**MEURICE, MARIELLE
ERENDIRA LUCILLE, MD†**

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

NGUYEN, NICOLE, MD†

Provider ID: N/A

☐ 12395 EL CAMINO REAL
STE 117
SAN DIEGO, CA 92130
Effective as of 01-DEC-14

PARK, SUSANNA, MD

Provider ID: N/A

☐ 11425 EL CAMINO REAL
SAN DIEGO, CA 92130
Effective as of 01-APR-16

PICKETT, CHARLOTTE, MD

Provider ID: N/A

☐ 6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A

☐ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

PINSON, KELSEY, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-SEP-21

PINSON, KELSEY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-21

PINSON, KELSEY, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
200

SAN DIEGO, CA 92121

Effective as of 01-SEP-21

SCHMIDT, LILA, MD

Provider ID: N/A

3969 4TH AVE STE 207
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

SEFA-BOAKYE, KOFI, MD†

Provider ID: N/A

286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

Effective as of 01-JUL-22

SHUCKETT, ARIEL, MD†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-JUL-22

TAJРАН, DEENA, MD†

Provider ID: N/A

10737 CAMINO RUIZ STE 114
SAN DIEGO, CA 92126

Effective as of 01-JAN-21

THOMSON, SAMANTHA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-OCT-21

THOMSON, SAMANTHA, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-OCT-21

TRUJILLO, JENNIFER, DO†

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114

Effective as of 01-JUL-22

**VAN DEN HEUVEL, KELLY,
MD†**

Provider ID: N/A

2918 5TH AVE STE 100
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

VU, LAC, MD

Provider ID: N/A

5555 RESERVOIR DR STE

205

SAN DIEGO, CA 92120

Effective as of 01-JUL-23

WILLIAMS, ALISA, MD†

Provider ID: N/A

5555 RESERVOIR DR STE
307

SAN DIEGO, CA 92120*

Effective as of 01-JAN-20

**OCCUPATIONAL
MEDICINE**

JACKSON, CODY, MD

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-MAY-22

**OCCUPATIONAL
THERAPIST**

ARRIESGADO, MINNETT, OT

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JUN-23

CHOW, JENNIFER, OT

Provider ID: N/A

3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111

Effective as of 01-DEC-23

CHOW, JENNIFER, OT

Provider ID: N/A

3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111

Effective as of 01-DEC-23

CUA, NICOLE, OT

Provider ID: N/A

3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111
Effective as of 01-MAR-24

FARHAT, KELLI, OT

Provider ID: N/A

3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111
Effective as of 01-APR-22

HUDSON, BONNIE, OT

Provider ID: N/A

4445 EASTGATE MALL STE
103
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

HUDSON, BONNIE, OT

Provider ID: N/A

88 E BONITA RD
STE C
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

LOPEZ, ALYSSA-NICOLE, OT

Provider ID: N/A

3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111
Effective as of 01-DEC-23

MANECKE, KRISTEN, OT

Provider ID: N/A

9333 GENESEE AVE STE
350B
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

ONCOLOGY MEDICAL

EISENBERG, STEVEN, DO†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

FLORES, EDNA, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

FRAKES, LAURIE, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JAN-21

SHAIKH, ANWER, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103*
Effective as of 01-APR-23

SHENOY, CASIE, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-JAN-18

OPHTHALMOLOGY

ARNETT, JUSTIN, MD

Provider ID: N/A

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

ARNETT, JUSTIN, MD

Provider ID: N/A

4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

ARNETT, JUSTIN, MD

Provider ID: N/A

200 W ARBOR DR

SAN DIEGO, CA 92103
Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

AVALLONE, THOMAS, MD†

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-APR-23

AVALLONE, THOMAS, MD

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-MAR-24

AVALLONE, THOMAS, MD†

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

BINDER, NICHOLAS, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-MAR-18

BOECKMANN, JESSICA, MD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-JAN-21

BOLO, KYLE, MD

Provider ID: N/A

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

BOLO, KYLE, MD

Provider ID: N/A

4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

BOLO, KYLE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

CHANG, TOM, MD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

CHOPLIN, NEIL, MD†

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

CHOPLIN, NEIL, MD†

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

CHOPLIN, NEIL, MD†

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-APR-22

COURIS, MICHAEL, MD†

Provider ID: N/A

3969 4TH AVE STE 301
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

CU-UNJIENG, ANDREW, MD†

Provider ID: N/A

4060 4TH AVE STE 405
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

ESLANI, MEDI, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

ESLANI, MEDI, MD

Provider ID: N/A

4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

ESLANI, MEDI, MD

Provider ID: N/A

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

GUALTIERI, CHRISTOPHER, MD†

Provider ID: N/A

3969 4TH AVE STE 300
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

GUALTIERI, CHRISTOPHER, MD†

Provider ID: N/A

3969 4TH AVE STE 300
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

HAAK, LOGAN, MD†

Provider ID: N/A

1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
Effective as of 01-JAN-24

HANDLER, SUZANNE, MD†

Provider ID: N/A

3969 4TH AVE STE 301
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

HSU, CHRISTOPHER, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-MAY-22

HUDSON, HENRY, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-APR-23

HUDSON, HENRY, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-22

HUYNH, PAUL, MD†

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JAN-21

HUYNH, PAUL, MD†

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JAN-21

HUYNH, PAUL, MD†

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-22

JACOBSEN, BRADLEY, MD

Provider ID: N/A

7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123
Effective as of 01-OCT-23

JIN, MAN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

KEEFE, KELLY, MD†

Provider ID: N/A

3969 4TH AVE STE 301
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

KHAN, FAHAD, MD†

Provider ID: N/A

233 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

KHAN, FAHAD, MD†

Provider ID: N/A

233 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-22

KHAN, FAHAD, MD†

Provider ID: N/A

233 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

KHATIB, NORA, MD†

Provider ID: N/A

4060 4TH AVE STE 640
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

KHATIB, NORA, MD†

Provider ID: N/A

233 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

LANG, PAUL, MD

Provider ID: N/A

4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

LANG, PAUL, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

MANI, NASRIN, MD

Provider ID: N/A

1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Effective as of 01-JUN-23

MCGRAW, JOSEPH, MD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

**MORRISON-REYES, JOSHUA,
MD†**

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

**MORRISON-REYES, JOSHUA,
MD†**

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

**MORRISON-REYES, JOSHUA,
MD†**

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JUN-18

**MORRISON-REYES, JOSHUA,
MD†**

Provider ID: N/A

6945 EL CAJON BLVD

SAN DIEGO, CA 92115
Effective as of 01-MAR-23

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-APR-23

MORTON, ASA, MD†

Provider ID: N/A
3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-APR-22

MORTON, ASA, MD†

Provider ID: N/A
3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

MORTON, ASA, MD†

Provider ID: N/A
3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

MOSS, JASON, MD†

Provider ID: N/A
5555 RESERVOIR DR STE
201
SAN DIEGO, CA 92120
Effective as of 01-JAN-23

NGUYEN, VINCENT, MD

Provider ID: N/A
7695 CARDINAL CT STE S
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

NGUYEN, VINCENT, MD†

Provider ID: N/A
7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123

Effective as of 01-APR-20

PATEL, GITANE, MD†

Provider ID: N/A
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-MAR-18

PATEL, SARJAN, MD†

Provider ID: N/A
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-14

PATEL, SARJAN, MD†

Provider ID: N/A
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

PATEL, GITANE, MD†

Provider ID: N/A
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

PATEL, SARJAN, MD†

Provider ID: N/A
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PATEL, SARJAN, MD†

Provider ID: N/A
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-AUG-20

PERRY, ARTHUR, MD

Provider ID: N/A
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-APR-23

PHAN, RYAN, MD

Provider ID: N/A
10737 CAMINO RUIZ STE
100
SAN DIEGO, CA 92126
Effective as of 01-APR-23

PHAN, RYAN, MD

Provider ID: N/A
4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-APR-23

PHAN, RYAN, MD†

Provider ID: N/A
10737 CAMINO RUIZ
SAN DIEGO, CA 92126
Effective as of 01-OCT-22

PHAN, RYAN, MD†

Provider ID: N/A
10737 CAMINO RUIZ
SAN DIEGO, CA 92126
Effective as of 01-SEP-22

PHAN, RYAN, MD

Provider ID: N/A
4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-JAN-24

PONS, MAURICIO, MD

Provider ID: N/A
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Effective as of 01-MAY-23

PRABHU, SUJATA, MD†

Provider ID: N/A
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-APR-22

PRABHU, SUJATA, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-FEB-18

PRABHU, SUJATA, MD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PRABHU, SUJATA, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

PRABHU, SUJATA, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

PRABHU, SUJATA, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-AUG-20

PRABHU, SUJATA, MD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-DEC-20

PUIG LLANO, MANUEL, MD

Provider ID: N/A

4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

RAHMATNEJAD, KAMRAN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

ROBINSON, FANE, MD†

Provider ID: N/A

7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123
Effective as of 01-SEP-15

ROBINSON, FANE, MD

Provider ID: N/A

7695 CARDINAL CT STE S
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

ROESKE, RICHMOND, MD

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

ROESKE, RICHMOND, MD

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

ROESKE, RICHMOND, MD

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-SEP-23

SATTERFIELD, KELLIE, MD

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

SATTERFIELD, KELLIE, MD

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

SHEILS, CATHERINE, MD

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-FEB-24

SHEILS, CATHERINE, MD

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121

Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

SHOJI, MARISSA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

SHOJI, MARISSA, MD

Provider ID: N/A

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

SMITH, MARK, MD

Provider ID: N/A

7695 CARDINAL CT STE S
SAN DIEGO, CA 92123

Effective as of 01-JAN-23

SMITH, WILLIAM, MD

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121

Effective as of 01-DEC-23

SONG, DELU, MD

Provider ID: N/A

7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123

Effective as of 01-DEC-23

SONG, DELU, MD

Provider ID: N/A

7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123

Effective as of 01-OCT-23

WAINESS, REID, MD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Effective as of 01-JAN-21

WARLEN, MARK, MD†

Provider ID: N/A

3720 3RD AVE
SAN DIEGO, CA 92103

Effective as of 01-FEB-07

YAMADA, KENTARO, MD†

Provider ID: N/A

1040 UNIVERSITY AVE STE
B209A
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

YAMADA, KENTARO, MD†

Provider ID: N/A

1040 UNIVERSITY AVE STE
B209A
SAN DIEGO, CA 92103

Effective as of 01-DEC-22

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Effective as of 01-JAN-21

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Effective as of 01-JAN-21

ZHAO, TAILUN, MD

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Effective as of 01-JAN-24

OPTOMETRIST

AOTO, KIM, OD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

AOTO, KIM, OD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

AOTO, KIM, OD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Effective as of 01-JAN-21

AOTO, KIM, OD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

AOTO, KIM, OD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Effective as of 01-SEP-22

AOTO, KIM, OD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Effective as of 01-SEP-22

DOAN, DORA, OD

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-SEP-21

DYER, SHARON, OD

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-FEB-24

DYER, SHARON, OD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

EL-MOGHRABI, ROULA, OD†

Provider ID: N/A

9855 ERMA RD STE 105
SAN DIEGO, CA 92131
Effective as of 01-SEP-22

HAN, SUL KI, OD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-DEC-22

HO, HOANG MINH, OD

Provider ID: N/A

4206 44TH ST
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

HO, HOANG MINH, OD

Provider ID: N/A

7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
Effective as of 01-JAN-21

HO, HOANG MINH, OD

Provider ID: N/A

10737 CAMINO RUIZ STE
215-220
SAN DIEGO, CA 92126
Effective as of 01-JAN-21

JOMOC, CAITLIN, OD

Provider ID: N/A

16950 VIA TAZON

SAN DIEGO, CA 92127
Effective as of 01-FEB-24

JOMOC, CAITLIN, OD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

JULAZADEH, SARA, OD†

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

KHALIL, VADY, OD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-NOV-22

KHALIL, VADY, OD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-NOV-22

KIM, PHILIP, OD†

Provider ID: N/A

4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-MAR-22

MARR, RYAN, OD

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-DEC-22

MARR, RYAN, OD

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-DEC-22

RING, ROBERT, OD

Provider ID: N/A

13223 BLACK MOUNTAIN
RD STE 6
SAN DIEGO, CA 92129
Effective as of 01-FEB-24

SCHWAB, GARY, OD†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

SCHWAB, GARY, OD†

Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

TAUNTON, PHILIP, OD†

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

TAUNTON, PHILIP, OD†

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

TONNU, ANH, OD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

TONNU, ANH, OD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

TONNU, ANH, OD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

TONNU, ANH, OD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-JAN-21

VINH, JOHN, OD†

Provider ID: N/A

2240 E PLAZA BLVD
STE F AND G
SAN DIEGO, CA 92102
Effective as of 01-SEP-20

VINH, JOHN, OD†

Provider ID: N/A

2240 E PLAZA BLVD
STE F AND G
SAN DIEGO, CA 92102
Effective as of 01-JAN-21

YU, CAROL, OD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

YU, CAROL, OD

Provider ID: N/A

4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

YU, CAROL, OD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-SEP-23

**ORAL MAXILLOFACIAL
SURGEON**

ELI, BRADLEY, DMD

Provider ID: N/A

5830 OBERLIN DR STE 202
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

MEHROTRA, SACHI, DDS

Provider ID: N/A

5830 OBERLIN DR STE 202
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

OTOLARYNGOLOGY

ABDOU, RAMI, MD†

Provider ID: N/A

5405 OBERLIN DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

BANTHIA, VISHAL, MD†

Provider ID: N/A

5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-AUG-21

BANTHIA, VISHAL, MD†

Provider ID: N/A

5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-SEP-21

BRUMUND, KEVIN, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

BRUMUND, KEVIN, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122
Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

CALZADA, AUDREY, MD†

Provider ID: N/A

5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Effective as of 01-OCT-22

CALZADA, AUDREY, MD†

Provider ID: N/A

5405 OBERLIN DR
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-OCT-19

CALZADA, AUDREY, MD†

Provider ID: N/A

5405 OBERLIN DR
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-JAN-21

CHANG, EDWARD, MD

Provider ID: N/A

5405 OBERLIN DR FL 2

SAN DIEGO, CA 92121
Effective as of 01-MAR-24

COFFEY, CHARLES, MD

Provider ID: N/A

☒ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

COFFEY, CHARLES, MD†

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

COFFEY, CHARLES, MD

Provider ID: N/A

☒ 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

DECONDE, ADAM, MD

Provider ID: N/A

☒ 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

DECONDE, ADAM, MD

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

DECONDE, ADAM, MD

Provider ID: N/A

☒ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

**DONALDSON, CHADWICK,
MD†**

Provider ID: N/A

☒ 4033 3RD AVE STE 104

SAN DIEGO, CA 92103
Effective as of 01-OCT-21

DRISKILL, BRENT, MD†

Provider ID: N/A

☒ 4033 3RD AVE STE 104
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

DRISKILL, BRENT, MD†

Provider ID: N/A

☒ 4033 3RD AVE STE 104
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

FRIEDMAN, RICK, MD

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

FRIEDMAN, RICK, MD

Provider ID: N/A

☒ 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

FRIEDMAN, RICK, MD

Provider ID: N/A

☒ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A

☒ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A

☒ 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD†

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD

Provider ID: N/A

☒ 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD

Provider ID: N/A

☒ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

GUO, THERESA, MD

Provider ID: N/A

☒ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

GUO, THERESA, MD

Provider ID: N/A

☒ 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

☒ 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

HAUFF, SAMANTHA, MD†

Provider ID: N/A

4282 GENESEE AVE STE
202
SAN DIEGO, CA 92117
Effective as of 01-JAN-21

HAUFF, SAMANTHA, MD†

Provider ID: N/A

4282 GENESEE AVE STE
202
SAN DIEGO, CA 92117
Effective as of 01-AUG-20

HAUFF, SAMANTHA, MD

Provider ID: N/A

4282 GENESEE AVE STE
201
SAN DIEGO, CA 92117
Effective as of 01-APR-23

HAUFF, SAMANTHA, MD†

Provider ID: N/A

4282 GENESEE AVE STE
202
SAN DIEGO, CA 92117
Effective as of 01-MAY-22

HAUFF, SAMANTHA, MD

Provider ID: N/A

4282 GENESEE AVE STE
201
SAN DIEGO, CA 92117
Effective as of 01-JAN-23

HOM, DAVID, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

HOM, DAVID, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

HUSSEMAN, JACOB, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

HUSSEMAN, JACOB, MD

Provider ID: N/A

16950 VIA TAZON

SAN DIEGO, CA 92127
Effective as of 01-AUG-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

KARI, ELINA, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

KARI, ELINA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

KARI, ELINA, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

MIYA, GARY, MD†

Provider ID: N/A

4060 4TH AVE STE 410
SAN DIEGO, CA 92103

Effective as of 01-JAN-18

NGUYEN, QUYEN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

NGUYEN, QUYEN, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

NGUYEN, QUYEN, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

SALL, EDWARD, DDS

Provider ID: N/A

5471 KEARNY VILLA RD STE
201
SAN DIEGO, CA 92123

Effective as of 01-SEP-22

SCHAEFFER, CYNTHIA, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-JAN-21

SCHALCH LEPE, PAUL, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

TORCHINSKY, CYRUS, MD†

Provider ID: N/A

4060 4TH AVE STE 410
SAN DIEGO, CA 92103

Effective as of 01-FEB-18

TORCHINSKY, CYRUS, MD†

Provider ID: N/A

4060 4TH AVE STE 410
SAN DIEGO, CA 92103

Effective as of 01-JAN-23

**VAHABZADEH-HAGH,
ANDREW, MD**

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

**VAHABZADEH-HAGH,
ANDREW, MD**

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

**VAHABZADEH-HAGH,
ANDREW, MD**

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

WATSON, DEBORAH, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23


WATSON, DEBORAH, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122
Effective as of 01-MAY-23


WEISSBROD, PHILIP, MD

Provider ID: N/A
 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23


WEISSBROD, PHILIP, MD

Provider ID: N/A
 200 W ARBOR DR STE 505
SAN DIEGO, CA 92103
Effective as of 01-MAY-23


WEISSBROD, PHILIP, MD

Provider ID: N/A
 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23


YAN, CAROL, MD

Provider ID: N/A
 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

YAN, CAROL, MD

Provider ID: N/A
 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23


YAN, CAROL, MD

Provider ID: N/A
 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23


**OTOLARYNGOLOGY /
OTOLOGY /
LARYNGOLOGY /**

RHINOLOGY


BUSH, JAMES, MD†

Provider ID: N/A
 3805 FRONT ST
SAN DIEGO, CA 92103*
Effective as of 01-AUG-20


MAGIT, ANTHONY, MD†

Provider ID: N/A
 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
Effective as of 01-OCT-20

TORCHINSKY, CYRUS, MD†


Provider ID: N/A
 4060 4TH AVE STE 410
SAN DIEGO, CA 92103*
Effective as of 01-SEP-15

WATSON, DEBORAH, MD†


Provider ID: N/A
 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

**PATHOLOGY ANATOMIC
CLINICAL**


LIN, GRACE, MD†

Provider ID: N/A
 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22


MAHOOTI, SEPI, MD†

Provider ID: N/A
 16835 W BERNARDO DR
STE 212
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-DEC-22


SONG, WEI, MD

Provider ID: N/A
 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
Effective as of 01-JUL-23

STEPHENS, LAURA, MD


Provider ID: N/A
 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
Effective as of 01-JUL-23

USMANI, AMENA, MD


Provider ID: N/A
 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
Effective as of 01-APR-23

PEDIATRIC RADIOLOGY


DWEK, JERRY, MD

Provider ID: N/A
 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24


DWEK, JERRY, MD†

Provider ID: N/A
 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

DWEK, JERRY, MD†

Provider ID: N/A
 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

KONING, JEFFREY, MD†

Provider ID: N/A
 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

KONING, JEFFREY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

KONING, JEFFREY, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

KRUK, PETER, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

PUGMIRE, BRIAN, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

PUGMIRE, BRIAN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

PUGMIRE, BRIAN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

PEDIATRICS

ALLSUP, VICTORIA, MD

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-NOV-23

ALLSUP, VICTORIA, MD

Provider ID: N/A

7011 LINDA VISTA RD

SAN DIEGO, CA 92111
Effective as of 01-NOV-23

ANDREE, GREGOR, MD

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

ANDREE, GREGOR, MD

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-SEP-22

**DOAN STEPHENS, CRYSTAL,
MD†**

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-SEP-22

**DOAN STEPHENS, CRYSTAL,
MD†**

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

GIBONEY, JENNIFER, MD

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-FEB-23

GIBONEY, JENNIFER, MD

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-23

GROBMAN, LILLIAN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAR-22

KARMAKAR, KANKA, MD

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Teleservice
Effective as of 01-JAN-21

**MARC AURELE, KRISHELLE,
MD**

Provider ID: N/A

7910 FROST ST STE 230
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

NELSON, THEODORA, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN DIEGO, CA 92173
Effective as of 01-JUL-22

SONG, RICHARD, MD

Provider ID: N/A

7910 FROST ST STE 230
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

SUTTNER, DENISE, MD

Provider ID: N/A

7910 FROST ST STE 230
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

WEISS, KATHERINE, MD

Provider ID: N/A

7910 FROST ST STE 230
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

WOSK, BERNARD, MD†

Provider ID: N/A

2630 1ST AVE
SAN DIEGO, CA 92103
Effective as of 01-NOV-22

ZAHEER, AARON, MD†

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-SEP-22

ZAHEER, AARON, MD†

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

**PHYS MED/ REHAB PAIN
MEDICINE**

KATZEN, SETH, DO

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-MAY-23

KOLODGE, GAVIN, DO

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-JUN-23

RICHARDSON, HENRY, MD†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Effective as of 01-JUN-23

**PHYSICAL MEDICINE /
REHABILITATION**

BULLOCK, ANDREW, DO†

Provider ID: N/A

1855 1ST AVE STE 200
SAN DIEGO, CA 92101
Effective as of 01-JAN-21

BULLOCK, ANDREW, DO†

Provider ID: N/A

1855 1ST AVE STE 200
SAN DIEGO, CA 92101
Effective as of 01-JUL-22

CHANG, ENOCH, MD

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-SEP-23

CHANG, ENOCH, MD

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-AUG-23

GAVRILYUK, OLEG, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2302
SAN DIEGO, CA 92120
Effective as of 01-SEP-20

GAVRILYUK, OLEG, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2302
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

HURSCHMAN, ALAN, MD†

Provider ID: N/A

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

KATZEN, SETH, DO

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-22

KATZEN, SETH, DO

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-APR-23

KOLODGE, GAVIN, DO

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-SEP-23

SCOTT, ROBERT, MD

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

TAHAEI, SEYED, MD†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice
Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

ABRAHAMSEN, KELSEY, PA

Provider ID: N/A

555 W C ST STE 102
SAN DIEGO, CA 92101
Effective as of 01-JAN-21

ABRAHAMSEN, KELSEY, PA

Provider ID: N/A

3737 MORAGA AVE STE

B103
SAN DIEGO, CA 92117
Effective as of 01-JAN-21

ABRAHAMSEN, KELSEY, PA

Provider ID: N/A

4142 ADAMS AVE STE 102
SAN DIEGO, CA 92116
Effective as of 01-APR-22

ALBRIGHT, KELSEY, PA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

ALYAS, ALISIA, PA

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-21

ALYAS, ALISIA, PA

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-21

ANDERSON, MATTHEW, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

ANDERSON, CARLEY, PA†

Provider ID: N/A

11865 CARMEL MOUNTAIN
RD STE 1104
SAN DIEGO, CA 92128
Effective as of 01-DEC-21

ARMENTA, JORGE, PA

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-MAY-21

ARROYO, VANIA, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-MAR-23

BASIN, NATALIE, PA†

Provider ID: N/A

12843 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130
Teleservice
Effective as of 01-FEB-21

BEITTER, KEERSTIN, PA†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Effective as of 01-MAR-22

BRAMBILA, YELENA, PA

Provider ID: N/A

6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120
Effective as of 01-DEC-21

BRAVO, RICARDO, PA

Provider ID: N/A

3490 PALM AVE
SAN DIEGO, CA 92154
Effective as of 01-JUL-23

CRITES, LAURA, PA

Provider ID: N/A

3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Teleservice
Effective as of 01-SEP-22

DANESHVAR, ABRAHAM, PA†

Provider ID: N/A

9610 GRANITE RIDGE DR
STE B
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

DARZI, MARIAM, PA

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-OCT-23

DOUGHERTY, CLARA, PA

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

DOUGHERTY, CLARA, PA

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DOUGHERTY, CLARA, PA

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DOUGHERTY, CLARA, PA

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

DOUGHERTY, CLARA, PA

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270

SAN DIEGO, CA 92128
Effective as of 01-JAN-24

ENCE, EMILY, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

ESTES, SAMANTHA, PA†

Provider ID: N/A

3969 4TH AVE STE 208
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

ESTES, SAMANTHA, PA†

Provider ID: N/A

3969 4TH AVE STE 208
SAN DIEGO, CA 92103
Effective as of 01-MAR-23

GUTH, CARA, PA†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-JAN-24

GUTH, CARA, PA†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-JUL-21

GUZMAN, HORTENCIA, PA

Provider ID: N/A

3490 PALM AVE
SAN DIEGO, CA 92154
Effective as of 01-JUL-23

HABBOUSH, RANA, PA

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-OCT-23

HABBOUSH, RANA, PA

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

HARMEYER, JENNA, PA

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-OCT-23

HAZAN, ALISON, PA

Provider ID: N/A

12843 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130
Effective as of 01-DEC-21

HIGGINS, JOSHUA, PA†

Provider ID: N/A

203 W F ST
SAN DIEGO, CA 92101
Effective as of 01-JAN-22

HIGUERA, EDITH, PA

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

HIGUERA, EDITH, PA

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

HO, HOANG HUU, PA

Provider ID: N/A

2418 ULRIC ST
SAN DIEGO, CA 92111
Teleservice
Effective as of 01-OCT-23

HO, HOANG HUU, PA

Provider ID: N/A

4551 EL CAJON BLVD
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-OCT-23

HUNTER, JACOB, PA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

HUNTER, JACOB, PA

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

HUNTER, JACOB, PA†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

KHALEGHI, MANI, PA†

Provider ID: N/A

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

LEWIS, DEVON, PA

Provider ID: N/A

555 W C ST STE 102
SAN DIEGO, CA 92101
Teleservice

Effective as of 01-AUG-22

LINDEMANN, CHRISTINA, PA†

Provider ID: N/A

4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121

Effective as of 01-AUG-21

**LONGOBARDO, FRANCESCA,
PA†**

Provider ID: N/A

9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121

Effective as of 01-JAN-21

MADAN, SAKSHI, PA†

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice

Effective as of 01-AUG-22

MARTIN, HALEY, PA

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

MERCER, KELLY, PA†

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-APR-21

MERCER, KELLY, PA†

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-APR-21

MOORMAN, KRISTA, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice

Effective as of 01-MAR-23

MURRAY, BREANNA, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice

Effective as of 01-FEB-21

NELMS, MICHAEL, PA†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

NGUYEN, THUY-VY, PA†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice

Effective as of 01-MAR-22

NGUYEN, THUY-VY, PA†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice

Effective as of 01-NOV-23

NGUYEN, THUY-VY, PA†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Teleservice

Effective as of 01-AUG-22

NGUYEN, THUY-VY, PA†

Provider ID: N/A

9339 GENESEE AVE STE

350

SAN DIEGO, CA 92121

Teleservice

Effective as of 01-MAR-22

NGUYEN, THUY-VY, PA†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-NOV-23

PELIO, DARREN, PA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

PELIO, DARREN, PA†

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

PERREAULT, MARK, PA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

PERREAULT, MARK, PA†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-21

PHAM, JENNIFER, PA

Provider ID: N/A

3900 5TH AVE STE 220
SAN DIEGO, CA 92103
Teleservice

Effective as of 01-OCT-23

PHUNG, AIVI, PA†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PHUNG, AIVI, PA†

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PICKERING, OANA, PA

Provider ID: N/A

555 W C ST STE 102
SAN DIEGO, CA 92101
Effective as of 01-MAY-23

POST, LACEY, PA

Provider ID: N/A

12843 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130
Effective as of 01-DEC-21

POTTER SMITH, SARAH, PA

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-AUG-23

PRIJATEL, SABRINA, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

PYLE, ALEXANDRA, PA

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

PYLE, ALEXANDRA, PA

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

QUIJANO, GLENN, PA†

Provider ID: N/A

2100 5TH AVE STE 200
SAN DIEGO, CA 92101
Teleservice
Effective as of 01-AUG-22

RAI, GEORGINA, PA†

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

RALL, EMILY, PA

Provider ID: N/A

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Effective as of 01-JAN-21

SCHOELLER, BIANCA, PA†

Provider ID: N/A

3180 UNIVERSITY AVE STE
120
SAN DIEGO, CA 92104
Effective as of 01-DEC-21

SEBASTIAN, TRACY, PA†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

SHARPE, NORMA, PA

Provider ID: N/A

316 25TH ST
SAN DIEGO, CA 92102
Teleservice
Effective as of 01-JAN-23

SHIVELY, JEANNINE, PA†

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-FEB-21

SMITH, ALLISON, PA

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

SNYDER, AMANDA, PA

Provider ID: N/A

4033 3RD AVE STE 104
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-OCT-23

SPEH, BRIAN, PA

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-MAR-24

SUPERNAW, AMY, PA†

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-FEB-21

TAYLOR, RYAN, PA

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

TAYLOR, RYAN, PA

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121
Effective as of 01-NOV-23

TAYLOR, RYAN, PA

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121
Effective as of 01-NOV-23

TRIMLETT, COLLEEN, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-MAY-21

VALENCIA, JESUS, PA

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 202
SAN DIEGO, CA 92102

Teleservice

Effective as of 01-NOV-23

VANOCKER, KARI, PA

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-MAR-23

WAHLIN, TAMARA, PA

Provider ID: N/A

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122
Effective as of 01-JUN-23

WAHLIN, TAMARA, PA

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

WAHLIN, TAMARA, PA

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JUN-23

WALSH, HEATHER, PA†

Provider ID: N/A

3969 4TH AVE STE 208
SAN DIEGO, CA 92103

Effective as of 01-SEP-21

WEBB, SHANNON, PA

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-MAY-23

WEIR, JACQUELINE, PA†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-APR-21

WEIR, JACQUELINE, PA†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-APR-21

WEIR, JACQUELINE, PA†

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131
Effective as of 01-APR-21

WILAND, WINONA, PA

Provider ID: N/A

5405 OBERLIN DR STE 2
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-JUN-23

WRIGHT, DEREK, PA

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice

Effective as of 01-NOV-23

WRIGHT, DEREK, PA

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice

Effective as of 01-JUL-23

WRIGHT, DEREK, PA

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice

Effective as of 01-AUG-23

PODIATRIST

ALMIRANTE, MARIA, DPM

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-JUL-22

ALMIRANTE, MARIA, DPM

Provider ID: N/A

1016 OUTER RD
SAN DIEGO, CA 92154

Effective as of 01-JUL-22

ALMIRANTE, MARIA, DPM

Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105

Effective as of 01-JUL-22


ALMIRANTE, MARIA, DPM

Provider ID: N/A


4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105
Effective as of 01-JUL-22


BROOKSHIER, TRENT, DPM

Provider ID: N/A
 3989 32ND ST
 SAN DIEGO, CA 92104
 Teleservice
 Effective as of 01-DEC-23


BUI, JOSEPH, DPM

Provider ID: N/A
 11205 VIA CARROZA
 SAN DIEGO, CA 92124*
 Effective as of 01-APR-23


BUI, JOSEPH, DPM

Provider ID: N/A
 5354 UNIVERSITY AVE STE
 2
 SAN DIEGO, CA 92105
 Effective as of 01-AUG-23


CULLEN, BENJAMIN, DPM†

Provider ID: N/A
 2650 CAMINO DEL RIO N
 STE 101
 SAN DIEGO, CA 92108
 Effective as of 01-APR-17

**FOYGELMAN, ALEKSANDR,
DPM†**


Provider ID: N/A
 4712 EL CAJON BLVD STE D
 SAN DIEGO, CA 92115
 Effective as of 01-JAN-21

**FOYGELMAN, ALEKSANDR,
DPM†**


Provider ID: N/A
 4712 EL CAJON BLVD STE D
 SAN DIEGO, CA 92115
 Effective as of 01-JAN-21

FOYGELMAN, ALEKSANDR,


DPM†

Provider ID: N/A
 4712 EL CAJON BLVD STE D
 SAN DIEGO, CA 92115
 Effective as of 01-JUL-22


**FOYGELMAN, ALEKSANDR,
DPM†**

Provider ID: N/A
 4712 EL CAJON BLVD STE D
 SAN DIEGO, CA 92115
 Effective as of 01-JAN-24


JOLLEY, WALTER, DPM

Provider ID: N/A
 5222 BALBOA AVE STE 41
 SAN DIEGO, CA 92117
 Effective as of 01-APR-15


JOLLEY, WALTER, DPM

Provider ID: N/A
 5222 BALBOA AVE STE 41
 SAN DIEGO, CA 92117
 Effective as of 01-SEP-20


LEE, RYAN, DPM†

Provider ID: N/A
 2650 CAMINO DEL RIO N
 STE 101
 SAN DIEGO, CA 92108
 Effective as of 01-APR-17


QUINN, MICHAEL, DPM†

Provider ID: N/A
 7485 MISSION VALLEY RD
 STE 104A
 SAN DIEGO, CA 92108
 Effective as of 01-FEB-07


QUINN, MICHAEL, DPM†

Provider ID: N/A
 7485 MISSION VALLEY RD
 STE 104A
 SAN DIEGO, CA 92108
 Effective as of 01-JUL-17


RICE, BRITTANY, DPM†

Provider ID: N/A
 2650 CAMINO DEL RIO N
 STE 200
 SAN DIEGO, CA 92108
 Effective as of 01-OCT-17


TOUMA, ELIE, DPM

Provider ID: N/A
 6719 ALVARADO RD STE
 303
 SAN DIEGO, CA 92120
 Effective as of 01-APR-23

VALLONE, ROBERT, DPM†


Provider ID: N/A
 3363 4TH AVE
 SAN DIEGO, CA 92103
 Effective as of 01-SEP-17

WILSON, MATTHEW, DPM†


Provider ID: N/A
 5555 RESERVOIR DR STE
 104
 SAN DIEGO, CA 92120
 Effective as of 01-FEB-22

**PREVENTATIVE MEDICINE
GENERAL**

HERR, RAYMOND, MD

Provider ID: N/A
 3737 MORAGA AVE STE
 B103
 SAN DIEGO, CA 92117
 Teleservice
 Effective as of 01-MAR-23

JACKSON, CODY, MD

Provider ID: N/A
 3900 5TH AVE STE 110
 SAN DIEGO, CA 92103
 Teleservice
 Effective as of 01-FEB-24

JACKSON, CODY, MD

Provider ID: N/A

6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120

Teleservice

Effective as of 01-FEB-24

NAJAR, FAUZI, MD

Provider ID: N/A

3490 PALM AVE
SAN DIEGO, CA 92154

Effective as of 01-JUL-23

ROMERO, CAMILA, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

ROMERO, CAMILA, MD

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

ROMERO, CAMILA, MD

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

STERN, ANNA, MD

Provider ID: N/A

4142 ADAMS AVE STE 102
SAN DIEGO, CA 92116

Effective as of 01-JAN-21

PSYCHIATRY

BEVINS, ELIZABETH, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

BEVINS, ELIZABETH, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

BINDAL, ANKUR, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121

Effective as of 01-SEP-21

BINDAL, ANKUR, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121

Effective as of 01-SEP-21

BINDAL, ANKUR, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121

Effective as of 01-SEP-22

BINDAL, ANKUR, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121

Effective as of 01-SEP-21

BINDAL, ANKUR, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121

Effective as of 01-SEP-21

BINDAL, ANKUR, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100

SAN DIEGO, CA 92121

Effective as of 01-SEP-22

BOBO, JERRY, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121

Effective as of 01-SEP-22

BOBO, JERRY, MD†

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121

Effective as of 01-SEP-22

CHAUHAN, SMIT, MD†

Provider ID: N/A

7850 VISTA HILL AVE
SAN DIEGO, CA 92123

Effective as of 01-MAY-22

CHAUHAN, SMIT, MD†

Provider ID: N/A

7850 VISTA HILL AVE
SAN DIEGO, CA 92123

Effective as of 01-MAY-22

FANOUS, ASHRAF, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123

Effective as of 01-MAY-23

FANOUS, ASHRAF, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123

Effective as of 01-MAY-23

FITZGERALD, MICHAEL, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-APR-22

FITZGERALD, MICHAEL, MD†
Provider ID: N/A

16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-APR-22

GLEICHMAN, JULIA, MD†
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

GLEICHMAN, JULIA, MD†
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

GUTFLAIS, ERIC, MD
Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

GUTFLAIS, ERIC, MD
Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HANAGAMI, CORI, MD
Provider ID: N/A

4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

HANAGAMI, CORI, MD
Provider ID: N/A

4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

HANAGAMI, CORI, MD
Provider ID: N/A

4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-FEB-23

HANAGAMI, CORI, MD
Provider ID: N/A

4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-FEB-23

HANAGAMI, CORI, MD
Provider ID: N/A

4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

HANAGAMI, CORI, MD
Provider ID: N/A

4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

HERSEVOORT, SHAWN, MD
Provider ID: N/A

4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

HERSEVOORT, SHAWN, MD
Provider ID: N/A

4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-FEB-23

HERSEVOORT, SHAWN, MD
Provider ID: N/A

4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-FEB-23

HERSEVOORT, SHAWN, MD
Provider ID: N/A

4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

HOLLEMAN, KEVIN, DO
Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-APR-23

HOLLEMAN, KEVIN, DO
Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-APR-23

JOHN, TANNER, MD
Provider ID: N/A

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Teleservice
Effective as of 01-OCT-23

JOHN, TANNER, MD
Provider ID: N/A

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Teleservice
Effective as of 01-OCT-23

JOSHI, YASH, MD
Provider ID: N/A

350 DICKINSON ST

SAN DIEGO, CA 92103
Effective as of 01-JAN-24

JOSHI, YASH, MD

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

KARANJIA, NAVAZ, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

KARANJIA, NAVAZ, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

KARANJIA, NAVAZ, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

KARANJIA, NAVAZ, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

KARIPPOT, ANOOP, MD†

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-SEP-15

KARIPPOT, ANOOP, MD†

Provider ID: N/A

10672 WEXFORD ST STE
280

SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-SEP-15

KARIPPOT, ANOOP, MD†

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUN-22

KARRIS, BIANCA, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAR-23

KARRIS, BIANCA, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAR-23

KEIFER, JASON, MD

Provider ID: N/A

4452 PARK BLVD STE 302
SAN DIEGO, CA 92116
Effective as of 01-APR-23

KEIFER, JASON, MD

Provider ID: N/A

4452 PARK BLVD STE 302
SAN DIEGO, CA 92116
Effective as of 01-APR-23

LEDBETTER, ALEX, DO

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

LEDBETTER, ALEX, DO

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

LEVINE, REED, MD

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Effective as of 01-FEB-24

LEVINE, REED, MD

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Effective as of 01-FEB-24

LI, XIA, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-AUG-21

LI, XIA, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-AUG-21

MIRON, JEAN-PHILIPPE, MD

Provider ID: N/A

16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-MAR-24

MIRON, JEAN-PHILIPPE, MD

Provider ID: N/A

16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-MAR-24

MOORE, SHAVON, MD†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

MOORE, SHAVON, MD†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

MORRIS, RAPHAEL, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 202
SAN DIEGO, CA 92130
Effective as of 01-NOV-22

MORRIS, RAPHAEL, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130
Effective as of 01-JAN-21

MORRIS, RAPHAEL, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130
Effective as of 01-JAN-21

MORRIS, RAPHAEL, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 202
SAN DIEGO, CA 92130
Effective as of 01-NOV-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JAN-23

NICHOLS, ALPHONSO, MD

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JAN-23

OLAYA, YANIRA, MD

Provider ID: N/A

4060 4TH AVE STE 102
SAN DIEGO, CA 92103
Effective as of 01-OCT-23

OLAYA, YANIRA, MD

Provider ID: N/A

4060 4TH AVE STE 102
SAN DIEGO, CA 92103
Effective as of 01-OCT-23

PARASHAR, ANUSHREE, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAR-23

PLOESSER, MARKUS, MD†

Provider ID: N/A

438 CAMINO DEL RIO S
STE 106
SAN DIEGO, CA 92108
Effective as of 01-NOV-23

PLOESSER, MARKUS, MD†

Provider ID: N/A

438 CAMINO DEL RIO S
STE 106
SAN DIEGO, CA 92108
Effective as of 01-NOV-23

PLOESSER, MARKUS, MD†

Provider ID: N/A

438 CAMINO DEL RIO S
STE 106
SAN DIEGO, CA 92108
Effective as of 01-SEP-22

PLOESSER, MARKUS, MD

Provider ID: N/A

1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
Effective as of 01-FEB-23

PLOESSER, MARKUS, MD

Provider ID: N/A

1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
Effective as of 01-FEB-23

PLOESSER, MARKUS, MD†

Provider ID: N/A

438 CAMINO DEL RIO S
STE 106
SAN DIEGO, CA 92108
Effective as of 01-NOV-23

PLOESSER, MARKUS, MD†

Provider ID: N/A

438 CAMINO DEL RIO S
STE 106
SAN DIEGO, CA 92108
Effective as of 01-NOV-23

PLOESSER, MARKUS, MD†

Provider ID: N/A

438 CAMINO DEL RIO S
STE 106
SAN DIEGO, CA 92108
Effective as of 01-SEP-22

PLOESSER, MARKUS, MD

Provider ID: N/A

1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
Effective as of 01-FEB-23

PLOESSER, MARKUS, MD

Provider ID: N/A

1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
Effective as of 01-FEB-23

QAYOUMI, WALI, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

QAYOUMI, WALI, MD†

Provider ID: N/A

4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
Effective as of 01-OCT-21

QAYOUMI, WALI, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

QAYOUMI, WALI, MD†

Provider ID: N/A

4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
Effective as of 01-OCT-21

**RIBEIRO CALDAS DOMINGUES,
ISABEL, MD†**

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-21

**RIBEIRO CALDAS DOMINGUES,
ISABEL, MD†**

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-21

**SALGUERO GALLAND, MARIO,
MD**

Provider ID: N/A

4157 FAIRMOUNT AVE

SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

**SALGUERO GALLAND, MARIO,
MD**

Provider ID: N/A

4175 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-JUN-23

**SALGUERO GALLAND, MARIO,
MD**

Provider ID: N/A

4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-JUN-23

**SALGUERO GALLAND, MARIO,
MD†**

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-SEP-21

**SALGUERO GALLAND, MARIO,
MD**

Provider ID: N/A

4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-JUN-23

**SALGUERO GALLAND, MARIO,
MD**

Provider ID: N/A

4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-JUN-23

SALGUERO GALLAND, MARIO, MD

Provider ID: N/A
 4175 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Teleservice
 Effective as of 01-JUN-23

SALGUERO GALLAND, MARIO, MD

Provider ID: N/A
 4185 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Teleservice
 Effective as of 01-JUN-23

SALGUERO GALLAND, MARIO, MD†

Provider ID: N/A
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Teleservice
 Effective as of 01-SEP-21

SALGUERO GALLAND, MARIO, MD

Provider ID: N/A
 4187 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Teleservice
 Effective as of 01-JUN-23

TADROS, EMAD, MD†

Provider ID: N/A
 4060 4TH AVE STE 102
 SAN DIEGO, CA 92103
 Effective as of 01-JAN-23

TADROS, EMAD, MD†

Provider ID: N/A
 4060 4TH AVE STE 102
 SAN DIEGO, CA 92103
 Effective as of 01-FEB-07

TADROS, EMAD, MD†

Provider ID: N/A
 4060 4TH AVE STE 102
 SAN DIEGO, CA 92103
 Effective as of 01-JAN-23

TADROS, EMAD, MD†

Provider ID: N/A
 4060 4TH AVE STE 102
 SAN DIEGO, CA 92103
 Effective as of 01-FEB-07

TUASON, NORBERTO, MD†

Provider ID: N/A
 438 CAMINO DEL RIO S
 STE 106
 SAN DIEGO, CA 92108
 Teleservice
 Effective as of 01-NOV-23

TUASON, NORBERTO, MD†

Provider ID: N/A
 438 CAMINO DEL RIO S
 STE 106
 SAN DIEGO, CA 92108
 Teleservice
 Effective as of 01-NOV-23

WEISSMAN, CORY, MD†

Provider ID: N/A
 16918 DOVE CANYON RD
 STE 100
 SAN DIEGO, CA 92127
 Effective as of 01-DEC-21

WEISSMAN, CORY, MD†

Provider ID: N/A
 16918 DOVE CANYON RD
 STE 100
 SAN DIEGO, CA 92127
 Effective as of 01-DEC-21

YAGUDAYEVA, RAISA, DO†

Provider ID: N/A

200 W ARBOR DR
 SAN DIEGO, CA 92103
 Effective as of 01-MAY-22

YAGUDAYEVA, RAISA, DO†

Provider ID: N/A
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Effective as of 01-MAY-22

PSYCHIATRY CHILD

KARIPPOT, ANOOP, MD†

Provider ID: N/A
 10672 WEXFORD ST STE
 280
 SAN DIEGO, CA 92131
 Teleservice
 Effective as of 01-SEP-15

KARIPPOT, ANOOP, MD†

Provider ID: N/A
 10672 WEXFORD ST STE
 280
 SAN DIEGO, CA 92131
 Teleservice
 Effective as of 01-JUN-22


KARIPPOT, ANOOP, MD†


Provider ID: N/A
 10672 WEXFORD ST STE
 280
 SAN DIEGO, CA 92131
 Teleservice
 Effective as of 01-JAN-23


KARIPPOT, ANOOP, MD†


Provider ID: N/A
 10672 WEXFORD ST STE
 280
 SAN DIEGO, CA 92131
 Teleservice
 Effective as of 01-JAN-23


KARIPPOT, ANOOP, MD†


Provider ID: N/A
 10672 WEXFORD ST STE
 280
 SAN DIEGO, CA 92131
 Teleservice
 Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†
 Provider ID: N/A
 10672 WEXFORD ST STE
 280
 SAN DIEGO, CA 92131
 Teleservice
 Effective as of 01-SEP-15

NICHOLS, ALPHONSO, MD
 Provider ID: N/A
 10672 WEXFORD ST STE
 280
 SAN DIEGO, CA 92131
 Teleservice
 Effective as of 01-JAN-23


NICHOLS, ALPHONSO, MD
 Provider ID: N/A
 10672 WEXFORD ST STE
 280
 SAN DIEGO, CA 92131
 Teleservice
 Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD
 Provider ID: N/A
 10672 WEXFORD ST STE
 280
 SAN DIEGO, CA 92131
 Teleservice
 Effective as of 01-JAN-23


NICHOLS, ALPHONSO, MD
 Provider ID: N/A
 10672 WEXFORD ST STE
 280
 SAN DIEGO, CA 92131


Teleservice
 Effective as of 01-JUL-22


***PSYCHIATRY SLEEP
 MEDICINE***


KARIPPOT, ANOOP, MD†
 Provider ID: N/A
 10672 WEXFORD ST STE
 280
 SAN DIEGO, CA 92131
 Teleservice
 Effective as of 01-JAN-23

PSYCHOLOGIST


BADER, RACHEL, PSYD
 Provider ID: N/A
 8899 UNIVERSITY CENTER
 LN
 SAN DIEGO, CA 92122
 Effective as of 01-JUN-23


BADER, RACHEL, PSYD
 Provider ID: N/A
 8899 UNIVERSITY CENTER
 LN
 SAN DIEGO, CA 92122
 Effective as of 01-JUN-23


**BAHENA-COLLEY, SANDRA,
 PSYD†**
 Provider ID: N/A
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Teleservice
 Effective as of 01-APR-21


**BAHENA-COLLEY, SANDRA,
 PSYD†**
 Provider ID: N/A
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Teleservice


Effective as of 01-APR-21


BHAJU, JESHMIN, PhD†
 Provider ID: N/A
 330 LEWIS ST
 SAN DIEGO, CA 92103
 Effective as of 01-AUG-22

BHAJU, JESHMIN, PhD†
 Provider ID: N/A
 330 LEWIS ST
 SAN DIEGO, CA 92103
 Effective as of 01-AUG-22

CARBONELL, SONIA, PSYD†
 Provider ID: N/A
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Teleservice
 Effective as of 01-JUL-21

CARBONELL, SONIA, PSYD†
 Provider ID: N/A
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Teleservice
 Effective as of 01-JUL-21

**ESTRADA PATINO, ANGELA,
 PSYD**
 Provider ID: N/A
 4080 CENTRE ST STE 104
 SAN DIEGO, CA 92103
 Effective as of 01-MAR-23

**ESTRADA PATINO, ANGELA,
 PSYD**
 Provider ID: N/A
 4080 CENTRE ST STE 104
 SAN DIEGO, CA 92103
 Effective as of 01-MAR-23

GALANT, DANIEL, PhD
 Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-APR-21

GALANT, DANIEL, PhD

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-APR-21

GOMEZ, JUANITA, PhD†

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-AUG-22

GOMEZ, JUANITA, PhD†

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-AUG-22

JOHNSON, ARIKA, PSYD†

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

JOHNSON, ARIKA, PSYD†

Provider ID: N/A

4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

JOHNSON, ARIKA, PSYD†

Provider ID: N/A

4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

JOHNSON, ARIKA, PSYD†

Provider ID: N/A

4189 FAIRMOUNT AVE

SAN DIEGO, CA 92105
Effective as of 01-NOV-22

JOHNSON, ARIKA, PSYD†

Provider ID: N/A

4189 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

JOHNSON, ARIKA, PSYD†

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

JOHNSON, ARIKA, PSYD†

Provider ID: N/A

4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

JOHNSON, ARIKA, PSYD†

Provider ID: N/A

4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

MINASSIAN, ARPI, PhD†

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

MINASSIAN, ARPI, PhD†

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

MIRANDA, CYNTHIA, PhD†

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-APR-21

MIRANDA, CYNTHIA, PhD†

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-APR-21

PARK, JESSIE, PSYD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

PARK, JESSIE, PSYD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

TARLE, STEPHANIE, PhD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-DEC-23

TARLE, STEPHANIE, PhD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-DEC-23

VANFOSSEN, BRIAN, PhD†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice
Effective as of 01-NOV-23

VANFOSSEN, BRIAN, PhD†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice
Effective as of 01-SEP-22
VANFOSSEN, BRIAN, PhD†
Provider ID: N/A
3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice
Effective as of 01-NOV-23

VANFOSSEN, BRIAN, PhD†
Provider ID: N/A
3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice
Effective as of 01-SEP-22

PULMONARY DISEASES

BAILEY, JACOB, MD
Provider ID: N/A
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

BAILEY, JACOB, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

BAO, GANG, MD†
Provider ID: N/A
6699 ALVARADO RD STE
2306
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

LE, HUAN, MD†
Provider ID: N/A
5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115
Teleservice

Effective as of 01-JUL-22
LE, HUAN, MD†
Provider ID: N/A
5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-JAN-14

LE, HUAN, MD†
Provider ID: N/A
5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-JAN-21

LE, HUAN, MD†
Provider ID: N/A
5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-JAN-21

MCGUIRE, WILLIAM, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

MUNOZ PINEDA, JORGE, MD
Provider ID: N/A
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

MUNOZ PINEDA, JORGE, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

MUNOZ PINEDA, JORGE, MD

Provider ID: N/A
4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

PEARCE, ALEX, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

RANCHES, GREGORY, MD†
Provider ID: N/A
501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103
Effective as of 01-AUG-20

RANCHES, GREGORY, MD†
Provider ID: N/A
501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103
Effective as of 01-APR-19

RANCHES, GREGORY, MD†
Provider ID: N/A
501 WASHINGTON ST STE
508
SAN DIEGO, CA 92103
Effective as of 01-MAY-20

RESNIKOFF, PAMELA, MD†
Provider ID: N/A
501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103
Effective as of 01-MAR-22

SPITZ, BRADLEY, MD
Provider ID: N/A
501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

SPITZ, BRADLEY, MD

Provider ID: N/A

501 WASHINGTON ST STE 725

SAN DIEGO, CA 92103

Effective as of 01-MAY-23

WONG, STEVEN, MD†

Provider ID: N/A

501 WASHINGTON ST STE 725

SAN DIEGO, CA 92103

Effective as of 01-APR-19

WONG, STEVEN, MD†

Provider ID: N/A

501 WASHINGTON ST STE 725

SAN DIEGO, CA 92103

Effective as of 01-APR-19

RADIATION ONCOLOGY

BRUGGEMAN, ANDREW, MD†

Provider ID: N/A

16918 DOVE CANYON RD STE 103

SAN DIEGO, CA 92127

Effective as of 01-MAR-21

BRUGGEMAN, ANDREW, MD†

Provider ID: N/A

16918 DOVE CANYON RD STE 103

SAN DIEGO, CA 92127

Effective as of 01-JAN-21

BRUGGEMAN, ANDREW, MD

Provider ID: N/A

3075 HEALTH CENTER DR

SAN DIEGO, CA 92123

Effective as of 01-JAN-24

CARMONA, RUBEN, MD

Provider ID: N/A

7901 FROST ST
SAN DIEGO, CA 92123

Effective as of 01-JAN-24

COLEMAN, LORI, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

FULLER, DONALD, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123

Effective as of 01-SEP-22

FULLER, DONALD, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

FULLER, DONALD, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123

Effective as of 01-SEP-22

FULLER, DONALD, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123

Effective as of 01-JUL-22

FULLER, DONALD, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

FULLER, DONALD, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

FULLER, DONALD, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103

Effective as of 01-JUL-22

HATTANGADI GLUTH, JONA, MD†

Provider ID: N/A

16918 DOVE CANYON RD STE 103

SAN DIEGO, CA 92127

Effective as of 01-JAN-21

HOOPES, DAVID, MD†

Provider ID: N/A

16918 DOVE CANYON RD STE 103

SAN DIEGO, CA 92127

Effective as of 01-JAN-21

HOOPES, DAVID, MD†

Provider ID: N/A

16918 DOVE CANYON RD STE 103

SAN DIEGO, CA 92127

Effective as of 01-SEP-22

IJAZ, TAHIR, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103

Effective as of 01-JUL-22

IJAZ, TAHIR, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103*

Effective as of 01-SEP-15

IJAZ, TAHIR, MD†

Provider ID: N/A

3366 5TH AVE

SAN DIEGO, CA 92103
Effective as of 01-SEP-22

IJAZ, TAHIR, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

IJAZ, TAHIR, MD†

Provider ID: N/A

5395 RUFFIN RD STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

IJAZ, TAHIR, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

IJAZ, TAHIR, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

JABBARI, SIAVASH, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
LEVEL 0
SAN DIEGO, CA 92123
Effective as of 01-OCT-22

MACEWAN, IAIN, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

MELL, LOREN, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127
Effective as of 01-JAN-21

MURPHY, KEVIN, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

PEJAVAR, SUNANDA, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

SANDHU, AJAY, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

SHARABI, ANDREW, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

SHIRAZI, REZA, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

SHIRAZI, REZA, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

SHIRAZI, REZA, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103

SAN DIEGO, CA 92123
Effective as of 01-SEP-22

SHIRAZI, REZA, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

SHIRAZI, REZA, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

SHIRAZI, REZA, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

SHIRAZI, REZA, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

SIMPSON, DANIEL, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

STRAKA, CHRISTOPHER, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-APR-23

STRAKA, CHRISTOPHER, MD†

Provider ID: N/A

16918 DOVE CANYON RD

STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JAN-21

TYE, KAREN, MD

Provider ID: N/A
16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-SEP-23

TYE, KAREN, MD

Provider ID: N/A
16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JUN-23

UHL, BARRY, MD†

Provider ID: N/A
3075 HEALTH CENTER DR
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A
5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-JUL-21

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A
5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-MAY-21

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A
5395 RUFFIN RD STE 103

SAN DIEGO, CA 92123
Teleservice
Effective as of 01-SEP-22

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A
3366 5TH AVE
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JUL-21

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A
3366 5TH AVE
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A
3366 5TH AVE
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-MAY-21

VOLPP, PAUL, MD†

Provider ID: N/A
3075 HEALTH CENTER DR
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

WEINSTEIN, GEOFFREY, MD†

Provider ID: N/A
3075 HEALTH CENTER DR
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

WHITE, EVAN, MD†

Provider ID: N/A
16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-NOV-22

YORK, JOHN, MD

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

YORK, JOHN, MD

Provider ID: N/A
330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

RADIOLOGY DIAGNOSTIC

AGANOVIC, LEJLA, MD

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

AGANOVIC, LEJLA, MD

Provider ID: N/A
408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

AGANOVIC, LEJLA, MD

Provider ID: N/A
8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

ANDERSON, GREGORY, MD†

Provider ID: N/A
3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123
Effective as of 01-AUG-22

ANDERSON, GREGORY, MD†

Provider ID: N/A
3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123
Effective as of 01-AUG-23

ANDERSON, GREGORY, MD

Provider ID: N/A

9095 RIO SAN DIEGO DR
STE 150
SAN DIEGO, CA 92108
Effective as of 01-OCT-23

BOLAR, DIVYA, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

BOLAR, DIVYA, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

BOLAR, DIVYA, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BOSWELL, GILBERT, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

BOSWELL, GILBERT, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

BRANCH, CODY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

BRANCH, CODY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BROUHA, SHARON, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BROUHA, SHARON, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

BROUHA, SHARON, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

BUI, KEVIN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

BUI, KEVIN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BUI, KEVIN, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

CARSWELL, AIMEE, MD

Provider ID: N/A

6655 ALVARADO RD

SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CARSWELL, AIMEE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

CARSWELL, AIMEE, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

CHANG, JENNIFER, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

CHANG, JENNIFER, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CHANG, JENNIFER, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CHEN, KAREN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CHENG, KAREN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CHENG, KAREN, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CHENG, KAREN, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

CHENG, KAREN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

CHENG, KAREN, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

CHO, AARON, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

CHO, AARON, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CHO, AARON, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CHUNG, CHRISTINE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CHUNG, CHRISTINE, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CHUNG, CHRISTINE, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

COOPER, JAMES, MD†

Provider ID: N/A

3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123
Effective as of 01-MAY-22

DORROS, STEPHEN, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

DORROS, STEPHEN, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

DORROS, STEPHEN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

EAJAZI, ALIREZA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

EAJAZI, ALIREZA, MD†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

EGHTEDARI, MOHAMMAD, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

EGHTEDARI, MOHAMMAD, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

EGHTEDARI, MOHAMMAD, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

FARID, NIKDOKHT, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

FARID, NIKDOKHT, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

FARID, NIKDOKHT, MD

Provider ID: N/A

8929 UNIVERSITY CENTER

LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

FAZELI, SOUDABEH, MD

Provider ID: N/A
8929 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-JUL-23

FAZELI, SOUDABEH, MD

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

FAZELI, SOUDABEH, MD

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

FLISZAR, EVELYNE, MD

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

FLISZAR, EVELYNE, MD

Provider ID: N/A
8929 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

FLISZAR, EVELYNE, MD

Provider ID: N/A
408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

FOWLER, KATHRYN, MD

Provider ID: N/A
408 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

FOWLER, KATHRYN, MD

Provider ID: N/A
8929 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

GENTILI, AMILCARE, MD

Provider ID: N/A
8929 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

GENTILI, AMILCARE, MD

Provider ID: N/A
408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

GENTILI, AMILCARE, MD

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HAHN, LEWIS, MD

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HAHN, LEWIS, MD

Provider ID: N/A
408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

HAHN, MICHAEL, MD

Provider ID: N/A
408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

HAHN, LEWIS, MD

Provider ID: N/A
8929 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

HAHN, MICHAEL, MD

Provider ID: N/A
8929 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

HANDWERKER, JASON, MD

Provider ID: N/A
8929 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

HANDWERKER, JASON, MD

Provider ID: N/A
408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

HANDWERKER, JASON, MD

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HAWLEY, DANIEL, MD

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HAWLEY, DANIEL, MD

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

HAWLEY, DANIEL, MD

Provider ID: N/A
 330 LEWIS ST
 SAN DIEGO, CA 92103
 Effective as of 01-JUN-23

HOROWITZ, MICHAEL, MD

Provider ID: N/A
 408 DICKINSON ST
 SAN DIEGO, CA 92103
 Effective as of 01-APR-23

HOROWITZ, MICHAEL, MD

Provider ID: N/A
 8929 UNIVERSITY CENTER
 LN
 SAN DIEGO, CA 92122
 Effective as of 01-APR-23

HOROWITZ, MICHAEL, MD

Provider ID: N/A
 6655 ALVARADO RD
 SAN DIEGO, CA 92120
 Effective as of 01-FEB-24

HSIAO, ALBERT, MD

Provider ID: N/A
 6655 ALVARADO RD
 SAN DIEGO, CA 92120
 Effective as of 01-FEB-24

HSIAO, ALBERT, MD

Provider ID: N/A
 8929 UNIVERSITY CENTER
 LN
 SAN DIEGO, CA 92122
 Effective as of 01-APR-23

HSIAO, ALBERT, MD

Provider ID: N/A
 408 DICKINSON ST
 SAN DIEGO, CA 92103
 Effective as of 01-APR-23

HUANG, BRADY, MD

Provider ID: N/A
 408 DICKINSON ST
 SAN DIEGO, CA 92103
 Effective as of 01-APR-23

HUANG, BRADY, MD

Provider ID: N/A
 8929 UNIVERSITY CENTER
 LN
 SAN DIEGO, CA 92122
 Effective as of 01-APR-23

HUANG, BRADY, MD

Provider ID: N/A
 6655 ALVARADO RD
 SAN DIEGO, CA 92120
 Effective as of 01-FEB-24

HUGHES, TUDOR, MD

Provider ID: N/A
 6655 ALVARADO RD
 SAN DIEGO, CA 92120
 Effective as of 01-FEB-24

JACOBS, KATHLEEN, MD

Provider ID: N/A
 6655 ALVARADO RD
 SAN DIEGO, CA 92120
 Effective as of 01-FEB-24

JACOBS, KATHLEEN, MD

Provider ID: N/A
 8929 UNIVERSITY CENTER
 LN
 SAN DIEGO, CA 92122
 Effective as of 01-APR-23

JACOBS, KATHLEEN, MD

Provider ID: N/A
 408 DICKINSON ST
 SAN DIEGO, CA 92103
 Effective as of 01-APR-23

JACOBSON, JON, MD

Provider ID: N/A

330 LEWIS ST
 SAN DIEGO, CA 92103
 Effective as of 01-JUN-23

JACOBSON, JON, MD

Provider ID: N/A
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Effective as of 01-JUN-23

JACOBSON, JON, MD

Provider ID: N/A
 6655 ALVARADO RD
 SAN DIEGO, CA 92120
 Effective as of 01-FEB-24

JAFFRAY, PAUL, MD

Provider ID: N/A
 6655 ALVARADO RD
 SAN DIEGO, CA 92120
 Effective as of 01-FEB-24

JAFFRAY, PAUL, MD

Provider ID: N/A
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Effective as of 01-JUN-23

JAFFRAY, PAUL, MD

Provider ID: N/A
 330 LEWIS ST
 SAN DIEGO, CA 92103
 Effective as of 01-JUN-23

KANSAGRA, AKASH, MD

Provider ID: N/A
 11199 SORRENTO VALLEY
 RD STE 203
 SAN DIEGO, CA 92121
 Effective as of 01-JUN-23

KAROW, DAVID, MD†

Provider ID: N/A
 330 LEWIS ST
 SAN DIEGO, CA 92103

Effective as of 01-APR-23

KAROW, DAVID, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-APR-23

KAROW, DAVID, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

KAROW, DAVID, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-APR-23

KAROW, DAVID, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

KARUNAMUNI, JENNIFER, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

KARUNAMUNI, JENNIFER, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-APR-23

KIM, ERIC, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-21

KIM, ERIC, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103

Effective as of 01-AUG-21

KLIGERMAN, SETH, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Effective as of 01-APR-23

KLIGERMAN, SETH, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

KLIGERMAN, SETH, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

KONDILI, DHIMITER, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103

Effective as of 01-AUG-21

KONDILI, DHIMITER, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-21

LAKE, MENORE, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

LAKE, MENORE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

LEE, ROLAND, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

LEE, ROLAND, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Effective as of 01-APR-23

LEE, ROLAND, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

LIM, VIVIAN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

LIM, VIVIAN, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Effective as of 01-APR-23

LIM, VIVIAN, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

MAREK BYKOWSKI, JULIE, MD

Provider ID: N/A

408 DICKINSON ST

SAN DIEGO, CA 92103
Effective as of 01-APR-23

MAREK BYKOWSKI, JULIE, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122
Effective as of 01-APR-23

MAREK BYKOWSKI, JULIE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

MARKS, ROBERT, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

MARKS, ROBERT, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

MCDONALD, MARIN, MD†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

MCDONALD, MARIN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

MCDONALD, MARIN, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Effective as of 01-APR-23

MCDONALD, MARIN, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

MCDONALD, MARIN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

MCMAMEE, CAIRINE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

MCMAMEE, CAIRINE, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

MCMAMEE, CAIRINE, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

MCMAMEE, CAIRINE, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-APR-23

MCMAMEE, CAIRINE, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

NORBASH, ALEXANDER, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Effective as of 01-APR-23

NORBASH, ALEXANDER, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

NORBASH, ALEXANDER, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

OBOYLE, MARY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

OBOYLE, MARY, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

OBOYLE, MARY, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Effective as of 01-APR-23

OBOYLE, MARY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

OBOYLE, MARY, MD†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

OBOYLE, MARY, MD†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-FEB-22

OJEDA-FOURNIER, HAYDEE, MD

Provider ID: N/A

8929 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

OJEDA-FOURNIER, HAYDEE, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

OJEDA-FOURNIER, HAYDEE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

PATHRIA, MINI, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

PATHRIA, MINI, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

PATHRIA, MINI, MD

Provider ID: N/A

8929 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

RAKOW-PENNER, REBECCA, MD

Provider ID: N/A

8929 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

RAKOW-PENNER, REBECCA, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

RAKOW-PENNER, REBECCA, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

RATTNER, ZACHARY, MD†

Provider ID: N/A

995 GATEWAY CENTER WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-SEP-20

RATTNER, ZACHARY, MD†

Provider ID: N/A

995 GATEWAY CENTER WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-SEP-22

RATTNER, ZACHARY, MD†

Provider ID: N/A

995 GATEWAY CENTER WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-JAN-21

RATTNER, ZACHARY, MD†

Provider ID: N/A

995 GATEWAY CENTER WAY STE 207
SAN DIEGO, CA 92102*
Effective as of 01-JUL-23

RATTNER, ZACHARY, MD†

Provider ID: N/A

995 GATEWAY CENTER WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-AUG-21

RESNICK, DONALD, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

RESNICK, DONALD, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

RESNICK, DONALD, MD

Provider ID: N/A

8929 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

RITCHIE, DAVID, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

RITCHIE, DAVID, MD

Provider ID: N/A
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Effective as of 01-JUN-23

SADAT, SAYED, DO

Provider ID: N/A
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Effective as of 01-JUN-23

SADAT, SAYED, DO

Provider ID: N/A
 330 LEWIS ST
 SAN DIEGO, CA 92103
 Effective as of 01-JUN-23

SADAT, SAYED, DO

Provider ID: N/A
 6655 ALVARADO RD
 SAN DIEGO, CA 92120
 Effective as of 01-FEB-24

SAMPATH, SRIHARI, MD

Provider ID: N/A
 8929 UNIVERSITY CENTER
 LN
 SAN DIEGO, CA 92122
 Effective as of 01-APR-23

SAMPATH, SRINATH, MD

Provider ID: N/A
 8929 UNIVERSITY CENTER
 LN
 SAN DIEGO, CA 92122
 Effective as of 01-APR-23

SAMPATH, SRIHARI, MD

Provider ID: N/A
 408 DICKINSON ST
 SAN DIEGO, CA 92103
 Effective as of 01-APR-23

SAMPATH, SRINATH, MD

Provider ID: N/A
 408 DICKINSON ST
 SAN DIEGO, CA 92103
 Effective as of 01-APR-23

SANTILLAN, CYNTHIA, MD

Provider ID: N/A
 408 DICKINSON ST
 SAN DIEGO, CA 92103
 Effective as of 01-APR-23

SANTILLAN, CYNTHIA, MD

Provider ID: N/A
 8929 UNIVERSITY CENTER
 LN
 SAN DIEGO, CA 92122
 Effective as of 01-APR-23

SEARLEMAN, ADAM, MD

Provider ID: N/A
 330 LEWIS ST
 SAN DIEGO, CA 92103
 Effective as of 01-JUN-23

SEARLEMAN, ADAM, MD

Provider ID: N/A
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Effective as of 01-JUN-23

SLATER, JERRY, MD†

Provider ID: N/A
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Effective as of 01-AUG-21

SLATER, JERRY, MD†

Provider ID: N/A
 330 LEWIS ST STE 202
 SAN DIEGO, CA 92103
 Effective as of 01-AUG-21

SMITAMAN, EDWARD, MD

Provider ID: N/A
 8929 UNIVERSITY CENTER

LN
 SAN DIEGO, CA 92122
 Effective as of 01-APR-23

SMITAMAN, EDWARD, MD

Provider ID: N/A
 408 DICKINSON ST
 SAN DIEGO, CA 92103
 Effective as of 01-APR-23

SMITAMAN, EDWARD, MD

Provider ID: N/A
 6655 ALVARADO RD
 SAN DIEGO, CA 92120
 Effective as of 01-FEB-24

SPENGLER, NATHAN, MD

Provider ID: N/A
 6655 ALVARADO RD
 SAN DIEGO, CA 92120
 Effective as of 01-FEB-24

SPENGLER, NATHAN, MD

Provider ID: N/A
 330 LEWIS ST
 SAN DIEGO, CA 92103
 Effective as of 01-DEC-23

SPENGLER, NATHAN, MD

Provider ID: N/A
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Effective as of 01-DEC-23

STRAKA, CHRISTOPHER, MD†

Provider ID: N/A
 16918 DOVE CANYON RD
 STE 103
 SAN DIEGO, CA 92127
 Teleservice
 Effective as of 01-FEB-21

SWEET, JASON, MD

Provider ID: N/A
 6655 ALVARADO RD

SAN DIEGO, CA 92120
Effective as of 01-MAR-24

**TAMAYO-MURILLO,
DORATHY, MD**

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

**TAMAYO-MURILLO,
DORATHY, MD**

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

**TAMAYO-MURILLO,
DORATHY, MD**

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

THOMPSON, COLE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

THOMPSON, COLE, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

THOMPSON, COLE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

UNSDORFER, KYLE, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

UNSDORFER, KYLE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

VAHDOT, NOUSHIN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

VAHDOT, NOUSHIN, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-SEP-22

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22

WONG, FELIX, MD

Provider ID: N/A

9095 RIO SAN DIEGO DR
STE 150
SAN DIEGO, CA 92108
Effective as of 01-OCT-23

WONG, FELIX, MD†

Provider ID: N/A

3939 RUFFIN RD
SAN DIEGO, CA 92123
Effective as of 01-AUG-23

WONG, FELIX, MD†

Provider ID: N/A

3939 RUFFIN RD
SAN DIEGO, CA 92123
Effective as of 01-MAY-22

YORK, VINCENT, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

YORK, VINCENT, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

YORK, JOHN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

ZINK BRODY, GORDON, MD†

Provider ID: N/A

3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123
Effective as of 01-DEC-21

ZINK BRODY, GORDON, MD

Provider ID: N/A

9095 RIO SAN DIEGO DR
STE 150
SAN DIEGO, CA 92108
Effective as of 01-OCT-23

ZINK BRODY, GORDON, MD†

Provider ID: N/A

3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123

Effective as of 01-OCT-23

**REGISTERED DIETITIAN /
NUTRITIONIST**

BUNDY, KATHLEEN, RD

Provider ID: N/A

☐ 330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

CALLAWAY, MALLORY, RD

Provider ID: N/A

☐ 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Effective as of 01-MAR-22

DRIVICK, VALERIE, RD

Provider ID: N/A

☐ 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-APR-21

DRIVICK, VALERIE, RD

Provider ID: N/A

☐ 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-SEP-22

FISHER, JENNIFER, RD

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

FISHER, JENNIFER, RD

Provider ID: N/A

☐ 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Effective as of 01-DEC-21

FISHER, JENNIFER, RD

Provider ID: N/A

☐ 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-JAN-24

GONZALEZ, KRISTEN, RDN

Provider ID: N/A

☐ 4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

RUBENSTEIN, KELLY, RD

Provider ID: N/A

☐ 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Effective as of 01-JAN-24

RUBENSTEIN, KELLY, RD

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

SALCEDO, CARLA, RD

Provider ID: N/A

☐ 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JAN-24

SALCEDO, CARLA, RD

Provider ID: N/A

☐ 4910 DIRECTORS PL
SAN DIEGO, CA 92121

Effective as of 01-JAN-24

SALCEDO, ALEXANDRA, RD

Provider ID: N/A

☐ 4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

VALDEZ, KELLY, RD

Provider ID: N/A

☐ 4168 FRONT ST FL 3
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

**VERGARA RODRIGUEZ,
DIANA, RD**

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

**REGISTERED PHYSICAL
THERAPIST**

ALLOS, ALEXANDER, PT

Provider ID: N/A

☐ 4445 EASTGATE MALL STE
105

SAN DIEGO, CA 92121

Effective as of 01-NOV-23

BOUTELLE, DAVID, PT

Provider ID: N/A

☐ 9909 MIRA MESA BLVD
STE 120

SAN DIEGO, CA 92131

Effective as of 01-JAN-24

BOUTELLE, BARBARA, PT

Provider ID: N/A

☐ 9909 MIRA MESA BLVD
STE 120

SAN DIEGO, CA 92131

Effective as of 01-JAN-24

BOUTELLE, DAVID, PT

Provider ID: N/A

☐ 9888 CARMEL MOUNTAIN
RD STE D

SAN DIEGO, CA 92129

Effective as of 01-JAN-24

BOUTELLE, BARBARA, PT

Provider ID: N/A

☐ 9888 CARMEL MOUNTAIN

RD STE D
SAN DIEGO, CA 92129
Effective as of 01-JAN-24

CORTEZ, AARON, PT†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-21

DANG, KAYLEE, PT†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-21

FARRAR, COURTNEY, PT†

Provider ID: N/A

7525 METROPOLITAN DR
STE 302
SAN DIEGO, CA 92108
Teleservice
Effective as of 01-JAN-21

FARRAR, COURTNEY, PT†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Effective as of 01-DEC-22

FERRER, MIRON, PT

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

FUREY, CINDY, PT

Provider ID: N/A

5555 RESERVOIR DR STE
300
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

FUREY, CINDY, PT

Provider ID: N/A

5677 OBERLIN DR STE 106
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

GRIMES, KELLY, PT

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

HARRAH, WILLIAM, PT

Provider ID: N/A

9333 GENESEE AVE STE
350B
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

JOHNSON, KENNADY, PT

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAR-24

MONROE, MAX, PT

Provider ID: N/A

11750 SORRENTO VALLEY
RD STE 130
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

OKINAGA, PATRICK, PT

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JAN-24

OKINAGA, PATRICK, PT

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

PAPA, AMY, PT

Provider ID: N/A

4445 EASTGATE MALL STE

103
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

PAPA, AMY, PT

Provider ID: N/A

4445 EASTGATE MALL STE
103
SAN DIEGO, CA 92121
Effective as of 01-AUG-23

PERRONE, AIMEE, PT

Provider ID: N/A

4445 EASTGATE MALL STE
103
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

PHILLIP, OMARI, PT†

Provider ID: N/A

4445 EASTGATE MALL STE
103
SAN DIEGO, CA 92121
Effective as of 01-DEC-21

ROSS, JENNY, PT

Provider ID: N/A

7525 METROPOLITAN DR
SAN DIEGO, CA 92108
Effective as of 01-JAN-23

TITH, JENNY, PT

Provider ID: N/A

4445 EASTGATE MALL STE
103
SAN DIEGO, CA 92121
Effective as of 01-MAY-22

TSAI, CINDY, PT

Provider ID: N/A

3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111
Effective as of 01-AUG-23

TSAI, CINDY, PT

Provider ID: N/A

3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111
Effective as of 01-JUN-23

VANDEWIELE, EMILY, PT†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-OCT-21

VASQUEZ, BENJAMIN, PT

Provider ID: N/A

4910 DIRECTORS PL
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

RHEUMATOLOGY

HUYNH, DOQUYEN, MD

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-APR-23

HUYNH, DOQUYEN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

KHANNA, SURABHI, MD

Provider ID: N/A

4282 GENESEE AVE STE
202
SAN DIEGO, CA 92117
Effective as of 01-NOV-23

PRESS, RAYMOND, MD†

Provider ID: N/A

3965 5TH AVE STE 430
SAN DIEGO, CA 92103
Effective as of 01-OCT-19

SLEEP MEDICINE

BAO, GANG, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2306
SAN DIEGO, CA 92120
Effective as of 01-JUN-21

FINCH, CHRISTINA, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

FINCH, CHRISTINA, MD

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

FLEMING, WESLEY, MD†

Provider ID: N/A

5471 KEARNY VILLA RD STE
202
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-APR-22

SPEECH PATHOLOGIST

**AROCHO-SALGADO, MIRELIS,
SP**

Provider ID: N/A

9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123
Effective as of 01-JUN-22

**AROCHO-SALGADO, MIRELIS,
SP**

Provider ID: N/A

9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123
Effective as of 01-JUN-22

**AROCHO-SALGADO, MIRELIS,
SP**

Provider ID: N/A

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127
Effective as of 01-JUN-22

**AROCHO-SALGADO, MIRELIS,
SP**

Provider ID: N/A

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127
Effective as of 01-JUN-22

BLUMENFELD, LIZA, SP

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

CLARK, MELISSA, SP

Provider ID: N/A

7510 CLAIREMONT MESA
BLVD STE 102
SAN DIEGO, CA 92111
Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

7510 CLAIREMONT MESA
BLVD STE 102
SAN DIEGO, CA 92111
Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123
Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127
Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127
Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123
Effective as of 01-APR-22

DOCKTER, ANDI, SP†

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

**GONZALEZ MELENDEZ,
ADALICE, SP**

Provider ID: N/A

7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111
Effective as of 01-JUN-22

**GONZALEZ MELENDEZ,
ADALICE, SP**

Provider ID: N/A

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127
Effective as of 01-JUN-22

GONZALEZ MELENDEZ,

ADALICE, SP

Provider ID: N/A

9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123
Effective as of 01-JUN-22

KOUKEYAN, KARIN, SP

Provider ID: N/A

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127
Effective as of 01-JAN-23

KOUKEYAN, KARIN, SP

Provider ID: N/A

7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111
Teleservice
Effective as of 01-JAN-23

KOUKEYAN, KARIN, SP

Provider ID: N/A

9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

NAPOLEAN, REBECCA, SP

Provider ID: N/A

7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111
Effective as of 01-JUN-22

NAPOLEAN, REBECCA, SP

Provider ID: N/A

7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111
Effective as of 01-JUN-22

**SCHIEDERMAYER, BENJAMIN,
SP†**

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-22

THOMPSON, DANIELLE, SP

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JAN-24

THOMPSON, DANIELLE, SP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

WALSH, ERIN, SP

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

**SURGERY COLON
SURGERY**

EISENSTEIN, SAMUEL, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

EISENSTEIN, SAMUEL, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

EISENSTEIN, SAMUEL, MD†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-DEC-21

ISHO, MATHEW, MD†

Provider ID: N/A

4060 4TH AVE STE 510
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

ISHO, MATHEW, MD†

Provider ID: N/A

4060 4TH AVE STE 510
SAN DIEGO, CA 92103

Effective as of 01-NOV-11

ISHO, MATHEW, MD†

Provider ID: N/A

4060 4TH AVE STE 510
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

LOPEZ, NICOLE, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Effective as of 01-DEC-21

LOPEZ, NICOLE, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

PARRY, LISA, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Effective as of 01-DEC-21

PARRY, LISA, MD†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-APR-21

RAMAMOORTHY, SONIA, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Effective as of 01-DEC-21

TOMAN, JEFFREY, MD†

Provider ID: N/A

4060 4TH AVE STE 510
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

SURGERY CRITICAL CARE

ADAMS, LAURA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-21

OLSON, ERIK, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

VENTRO, GEORGE, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-21

SURGERY GENERAL

ALVORD, PAUL, MD†

Provider ID: N/A

4033 3RD AVE STE 204
SAN DIEGO, CA 92103

Effective as of 01-JAN-19

ARMANI, AVA, MD†

Provider ID: N/A

200 W ARBOR DR

SAN DIEGO, CA 92103

Effective as of 01-JUL-21

BARNES, RYAN, DO†

Provider ID: N/A

7910 FROST ST STE 250
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

BATRA, MUNISH, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 101

SAN DIEGO, CA 92130

Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 101

SAN DIEGO, CA 92130

Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 101

SAN DIEGO, CA 92130

Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 101

SAN DIEGO, CA 92130

Effective as of 01-SEP-17

BENCH, SHAWN, MD†

Provider ID: N/A

7910 FROST ST STE 250
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

BRODERICK, RYAN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

BRODERICK, RYAN, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

BROWN, KRISTIAN, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

**CASILLAS BERUMEN, SERGIO,
MD**

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-FEB-24

**CASILLAS BERUMEN, SERGIO,
MD**

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

ELLNER, JULIE, MD

Provider ID: N/A

2878 CAMINO DEL RIO S
STE 303
SAN DIEGO, CA 92108
Effective as of 01-OCT-21

FARINAS, LEAH, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2309
SAN DIEGO, CA 92120

Effective as of 01-OCT-20

GIURGIU, DAN, MD†

Provider ID: N/A

4060 4TH AVE STE 440
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

HALLDORSON, JEFFREY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

HALLDORSON, JEFFREY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

HALLDORSON, JEFFREY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-FEB-18

HALLDORSON, JEFFREY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

HALLDORSON, JEFFREY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-DEC-17

HART, MARQUIS, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JUL-21

HART, MARQUIS, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

HART, MARQUIS, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

HORGAN, SANTIAGO, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

HORGAN, SANTIAGO, MD

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

JACOBSEN, GARTH, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

JACOBSEN, GARTH, MD†

Provider ID: N/A

4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121
Effective as of 01-DEC-21

JACOBSEN, GARTH, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

JINDAL, RISHI, MD†

Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-AUG-18

JINDAL, RISHI, MD†

Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-AUG-18

JINDAL, RISHI, MD†

Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-AUG-18

KING, JUSTIN, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2309
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

LANGENBERG, BRET, DO†

Provider ID: N/A

4033 3RD AVE STE 204
SAN DIEGO, CA 92103
Effective as of 01-JAN-19

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-MAR-24

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120

Teleservice

Effective as of 01-MAR-24

MUELLER, GEORGE, MD†

Provider ID: N/A

7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

POLLACK, LARRY, MD†

Provider ID: N/A

7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

PRICE, ERIN, MD†

Provider ID: N/A

4060 4TH AVE STE 440
SAN DIEGO, CA 92103
Effective as of 01-SEP-20

SANDLER, BRYAN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

SANDLER, BRYAN, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

SISE, MICHAEL, MD†

Provider ID: N/A

550 WASHINGTON ST STE
641
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

**WOODWARD, STEPHANIE,
MD†**

Provider ID: N/A

7910 FROST ST STE 250

SAN DIEGO, CA 92123
Effective as of 01-JAN-24

YU, NICHOLAS, MD

Provider ID: N/A

7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-OCT-23

ZORN, GEORGE, MD†

Provider ID: N/A

4060 4TH AVE STE 330
SAN DIEGO, CA 92103
Effective as of 01-JAN-14

**SURGERY GENERAL
VASCULAR**

DIEFFENBACH, BRYAN, MD

Provider ID: N/A

550 WASHINGTON ST STE
641
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

**MORENO MARTINEZ,
ENRIQUE, MD†**

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120

Teleservice

Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115

Effective as of 01-JUN-23

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115

Effective as of 01-JAN-23

SISE, MICHAEL, MD†

Provider ID: N/A

550 WASHINGTON ST STE
641
SAN DIEGO, CA 92103

Effective as of 01-FEB-07

SISE, MICHAEL, MD†

Provider ID: N/A

550 WASHINGTON ST STE
641
SAN DIEGO, CA 92103

Effective as of 01-JAN-14

SURGERY HAND

RICKARDS, ENASS, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-JAN-21

**SURGERY HAND
ORTHOPEDIC**

STEPHENSON, SAMUEL, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-OCT-21

SURGERY

NEUROLOGICAL

AMMIRATI, MARIO, MD†

Provider ID: N/A

11199 SORRENTO VALLEY
RD STE 203
SAN DIEGO, CA 92121

Effective as of 01-AUG-21

FLORES, BRUNO, MD†

Provider ID: N/A

11199 SORRENTO VALLEY
RD STE 203
SAN DIEGO, CA 92121

Effective as of 01-JAN-23

FLORES, BRUNO, MD†

Provider ID: N/A

5395 RUFFIN RD STE 102
SAN DIEGO, CA 92123

Effective as of 01-APR-22

FLORES, BRUNO, MD†

Provider ID: N/A

5395 RUFFIN RD STE 102
SAN DIEGO, CA 92123

Effective as of 01-FEB-21

GOEL, GUNJAN, MD†

Provider ID: N/A

3750 CONVOY ST STE 301
SAN DIEGO, CA 92111

Effective as of 01-JUL-19

LEVINE, REED, MD

Provider ID: N/A

3434 MIDWAY DR STE 2001

SAN DIEGO, CA 92110
Effective as of 01-FEB-24

OSTRUP, RICHARD, MD†

Provider ID: N/A

3750 CONVOY ST STE 301
SAN DIEGO, CA 92111*

Effective as of 01-SEP-20

UDANI, VIKRAM, MD

Provider ID: N/A

11199 SORRENTO VALLEY
RD STE 203
SAN DIEGO, CA 92121

Effective as of 01-JAN-23

ZACHARIAH, MARCUS, MD

Provider ID: N/A

3750 CONVOY ST STE 301
SAN DIEGO, CA 92111

Effective as of 01-MAY-23

SURGERY ORTHOPEDIC

ABITBOL, JEAN JACQUES, MD†

Provider ID: N/A

5395 RUFFIN RD STE 202
SAN DIEGO, CA 92123

Effective as of 01-JUL-22

ABITBOL, JEAN JACQUES, MD†

Provider ID: N/A

7625 MESA COLLEGE DR
STE 315A
SAN DIEGO, CA 92111

Effective as of 01-JUN-22

ALLSING, STEVEN, MD†

Provider ID: N/A

5555 RESERVOIR DR
SAN DIEGO, CA 92120

Effective as of 01-OCT-22

ANDRY, JAMES, MD

Provider ID: N/A

7910 FROST ST STE 340
SAN DIEGO, CA 92123
Effective as of 01-MAR-24

BAWA, MANEESH, MD†

Provider ID: N/A

4060 4TH AVE STE 700
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

BEHR, CHRISTOPHER, MD†

Provider ID: N/A

4060 4TH AVE STE 700
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

BLAIS, MICAH, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

BOURLAND, BRYAN, DO

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121*
Effective as of 01-SEP-23

BOURLAND, BRYAN, DO

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-OCT-23

BRERETON, DANIEL, DO†

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-22

BUKATA, SUSAN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

BUKATA, SUSAN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BURNIKEL, DAVID, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-FEB-23

BURNIKEL, DAVID, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-SEP-23

BURNIKEL, DAVID, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

CAGE, DORI NEILL, MD†

Provider ID: N/A

8008 FROST ST STE 403
SAN DIEGO, CA 92123
Effective as of 01-NOV-14

CHOI, JIHOON, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

DAVID, TAL, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

DOWNING, KRISTOPHER, MD

Provider ID: N/A

7910 FROST ST STE 340
SAN DIEGO, CA 92123
Effective as of 01-MAR-24

DUTTON, PASCUAL, MD

Provider ID: N/A

5395 RUFFIN RD STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 401
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

5395 RUFFIN RD STE 201
SAN DIEGO, CA 92123
Effective as of 01-OCT-23

DUTTON, PASCUAL, MD

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

FLOOD, DAVID, MD†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Effective as of 01-DEC-22

GOEB, YANNICK, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

GROTTING, JOHN, MD

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

GROTTING, JOHN, MD

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-JAN-24

GROTTING, JOHN, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 401
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

GROTTING, JOHN, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

GROTTING, JOHN, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-AUG-23

GROTTING, JOHN, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

HOFMEISTER, ERIC, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 401
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

JAIN, RINA, MD†

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-JAN-21

KANSARA, DEVANSHU, MD†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-MAY-22

KANSARA, DEVANSHU, MD†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-JUN-22

KASIR, RAFID, MD

Provider ID: N/A

4060 4TH AVE STE 700
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

KIM, PAUL, MD†

Provider ID: N/A

6719 ALVARADO RD STE
308
SAN DIEGO, CA 92120
Effective as of 01-JAN-14

KIM, PAUL, MD†

Provider ID: N/A

6719 ALVARADO RD STE
308
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

KIMBALL, MICHAEL, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-DEC-14

KIMBALL, MICHAEL, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JUL-23

KIMBALL, MICHAEL, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

KIMBALL, MICHAEL, MD†
Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-SEP-20

KOLODGE, GAVIN, DO†
Provider ID: N/A

9339 GENESEE AVE STE
150
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

KOLODGE, GAVIN, DO
Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-AUG-23

KRUEGER, VAN, MD
Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121*
Effective as of 01-OCT-23

KRUEGER, VAN, MD
Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-OCT-23

LENIHAN, MICHAEL, MD
Provider ID: N/A

3444 KEARNY VILLA RD
STE 401
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

MACK, GREGORY, MD

Provider ID: N/A

8008 FROST ST STE 403
SAN DIEGO, CA 92123
Effective as of 01-JAN-15

MCCANDLESS, JEREMY, MD†

Provider ID: N/A

4060 4TH AVE STE 700
SAN DIEGO, CA 92103
Effective as of 01-OCT-17

MOHLER, LESTER, MD†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-JAN-14

MOHLER, LESTER, MD†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-FEB-07

MULDOON, MICHAEL, MD†

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-NOV-21

MULDOON, MICHAEL, MD†

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-AUG-23

MYER, JONATHAN, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

MYER, JONATHAN, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-AUG-23

POMERANTZ, MICHAEL, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 401
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

RAISZADEH, RAMIN, MD†

Provider ID: N/A

6719 ALVARADO RD STE
308
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

RAISZADEH, RAMIN, MD†

Provider ID: N/A

6719 ALVARADO RD STE
308
SAN DIEGO, CA 92120
Effective as of 01-JAN-23

RICKARDS, ENASS, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

RICKARDS, ENASS, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-APR-23

RICKARDS, ENASS, MD†

Provider ID: N/A

9333 GENESEE AVE STE

350
SAN DIEGO, CA 92121
Effective as of 01-FEB-17

RICKARDS, ENASS, MD†

Provider ID: N/A
9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JUL-23

RICKARDS, ENASS, MD†

Provider ID: N/A
9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

ROBKER, JERRICK, DO†

Provider ID: N/A
4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-AUG-23

ROBKER, JERRICK, DO†

Provider ID: N/A
4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-MAY-22

ROSENFELD, ALAN, MD†

Provider ID: N/A
9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121†
Effective as of 01-SEP-20

ROSENFELD, ALAN, MD†

Provider ID: N/A
9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-15

ROSENFELD, ALAN, MD†

Provider ID: N/A
9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-AUG-23

ROSENFELD, ALAN, MD†

Provider ID: N/A
9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-APR-23

ROSENFELD, ALAN, MD†

Provider ID: N/A
9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

ROSENFELD, ALAN, MD†

Provider ID: N/A
9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

ROSENFELD, ALAN, MD†

Provider ID: N/A
9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

SCHULTZ, JEFFREY, MD†

Provider ID: N/A
7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-FEB-07

SCHULTZ, JEFFREY, MD†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-JAN-14

SCHULTZEL, MARK, MD†

Provider ID: N/A
3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-NOV-21

SHAH, KALPIT, MD†

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

SHILLITO, MATTHEW, MD†

Provider ID: N/A
6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-AUG-23

SHILLITO, MATTHEW, MD†

Provider ID: N/A
6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

SHILLITO, MATTHEW, MD†

Provider ID: N/A
6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-SEP-23

SIROTA, MICHAEL, MD†

Provider ID: N/A
6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

SIROTA, MICHAEL, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-AUG-23

SULLIVAN, THOMAS, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SUN, MICHAEL, MD

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-DEC-23

TANAKA, SCOTT, MD†

Provider ID: N/A

4060 4TH AVE STE 700
SAN DIEGO, CA 92103
Effective as of 01-AUG-17

TASTO, JAMES, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120*
Effective as of 01-AUG-23

TASTO, JAMES, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

TASTO, JAMES, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120

Effective as of 01-SEP-23

TAYLOR, MARIO, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

TAYLOR, MARIO, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

TAYYAB, NEIL, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

TAYYAB, NEIL, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

TAYYAB, NEIL, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-AUG-23

TAYYAB, NEIL, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-MAR-16

TAYYAB, NEIL, MD†

Provider ID: N/A

9333 GENESEE AVE STE

350A

SAN DIEGO, CA 92121
Effective as of 01-SEP-22

TRADONSKY, STEVEN, MD†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-SEP-15

TRADONSKY, STEVEN, MD†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-JAN-14

WHEATLEY, BENJAMIN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

WHEATLEY, BENJAMIN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-OCT-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-OCT-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-NOV-23

YOUNGBLOOD, SCOT, MD
Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-OCT-23

YOUNGBLOOD, SCOT, MD
Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-OCT-23

YOUNGBLOOD, SCOT, MD
Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-23

SURGERY PLASTIC

APOSTOLIDES, JOHN, MD
Provider ID: N/A

1322 SCOTT ST STE 102
SAN DIEGO, CA 92106
Effective as of 01-AUG-15

BATRA, MUNISH, MD
Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-MAR-02

CHAO, JAMES, MD†
Provider ID: N/A

8901 ACTIVITY RD
SAN DIEGO, CA 92126
Effective as of 01-JUL-15

GOSMAN, AMANDA, MD†
Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

GOSMAN, AMANDA, MD†
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

HANDLER, BARRY, MD†
Provider ID: N/A

6699 ALVARADO RD STE
2305
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

KUPFER, DAVID, MD†
Provider ID: N/A

5395 RUFFIN RD STE 201
SAN DIEGO, CA 92123
Effective as of 01-JUL-14

NGUYEN, KHANG, MD
Provider ID: N/A

6610 FLANDERS DR STE 101
SAN DIEGO, CA 92121
Effective as of 01-FEB-23

SURGERY THORACIC

HEMP, JAMES, MD†
Provider ID: N/A

4033 3RD AVE STE 210
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

HUDSON, JESSICA, MD
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

SURGICAL ONCOLOGY

CHEN, STEVEN, MD†
Provider ID: N/A

8901 ACTIVITY RD
SAN DIEGO, CA 92126
Effective as of 01-JUL-15

MEHTSUN, WINTA, MD†
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

UROLOGY

ABITBOL, JEAN JACQUES, MD†
Provider ID: N/A

5395 RUFFIN RD STE 202
SAN DIEGO, CA 92123*
Effective as of 01-NOV-21

ANGER, JENNIFER, MD†
Provider ID: N/A

4520 EXECUTIVE DR STE
360
SAN DIEGO, CA 92121
Effective as of 01-OCT-21

ANGER, JENNIFER, MD†
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

BASTUBA, MARTIN, MD†
Provider ID: N/A

6699 ALVARADO RD STE
2207
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

BRIDGE, STEPHEN, MD†
Provider ID: N/A

4060 4TH AVE STE 310

SAN DIEGO, CA 92103
Effective as of 01-JUL-22

BUTLER, PHILIP, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

BUTLER, PHILIP, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

BUTLER, PHILIP, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

BUTLER, PHILIP, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-24

CHEN, TONY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

COHEN, EDWARD, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

COHEN, EDWARD, MD†

Provider ID: N/A

11770 BERNARDO PLAZA

CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-24

COHEN, EDWARD, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-NOV-22

COHEN, EDWARD, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

COHEN, EDWARD, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

COHEN, EDWARD, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

COHEN, EDWARD, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-SEP-21

DATO, PAUL, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-FEB-24

DATO, PAUL, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

DICKS, BRIAN, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-FEB-24

DICKS, BRIAN, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

DICKS, BRIAN, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

HOLDEN, MARC, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-SEP-22

HOLDEN, MARC, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-OCT-22

HOLDEN, MARC, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

HOLDEN, MARC, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

HOLDEN, MARC, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

JUMA, SAAD, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

JUMA, SAAD, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-FEB-24

JUMA, SAAD, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

KATZ, JONATHAN, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

KEILLER, DANNY, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-24

KEILLER, DANNY, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

KEILLER, DANNY, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

KEILLER, DANNY, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

NGUYEN, HUNG, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-FEB-24

NGUYEN, HUNG, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Effective as of 01-FEB-24

NGUYEN, HUNG, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Teleservice

Effective as of 01-NOV-22

NGUYEN, HUNG, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Teleservice

Effective as of 01-SEP-21

NGUYEN, HUNG, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Teleservice

Effective as of 01-JAN-24

NGUYEN, HUNG, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-FEB-24

PE, MARK-RALLY, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Effective as of 01-JAN-24

PE, MARK-RALLY, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-FEB-24

PE, MARK-RALLY, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Effective as of 01-JAN-24

ROBERTS, JAMES, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

ROBERTS, JAMES, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-SEP-22

ROBERTS, JAMES, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Effective as of 01-JAN-24

ROBERTS, JAMES, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

SAIDIAN, AVA, MD†

Provider ID: N/A

200 W ARBOR DR

SAN DIEGO, CA 92103

Effective as of 01-SEP-21

SALEM, CAROL, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-FEB-24

SALEM, CAROL, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Effective as of 01-JAN-24

SALEM, CAROL, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-JUL-22

SALEM, CAROL, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

SALEM, CAROL, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-OCT-07

SALEM, CAROL, MD†

Provider ID: N/A

4060 4TH AVE STE 310

SAN DIEGO, CA 92103
Effective as of 01-OCT-19

SALEM, CAROL, MD†

Provider ID: N/A

☑ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

SALEM, CAROL, MD†

Provider ID: N/A

☑ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

SALEM, CAROL, MD†

Provider ID: N/A

☑ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

SALMASI, AMIRALI, MD

Provider ID: N/A

☑ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

SALMASI, AMIRALI, MD

Provider ID: N/A

☑ 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-24

SALMASI, AMIRALI, MD

Provider ID: N/A

☑ 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

SALMASI, AMIRALI, MD

Provider ID: N/A

☑ 3444 KEARNY VILLA RD
STE 202

SAN DIEGO, CA 92123
Effective as of 01-FEB-24

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

☑ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

☑ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-AUG-23

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

☑ 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JUN-21

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

☑ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JUL-21

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

☑ 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-NOV-22

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

☑ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-NOV-22

SANTOMAURO, MICHAEL, MD

Provider ID: N/A

☑ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

SHEETZ, TYLER, MD

Provider ID: N/A

☑ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☑ 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-DEC-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☑ 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☑ 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-SEP-22

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☑ 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-SEP-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☑ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Teleservice

Effective as of 01-DEC-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-AUG-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-SEP-22

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JAN-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-NOV-21

VAPNEK, EVAN, MD

Provider ID: N/A

☒ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

VAPNEK, EVAN, MD†

Provider ID: N/A

☒ 4033 3RD AVE STE 400
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

VAPNEK, EVAN, MD

Provider ID: N/A

☒ 230 PROSPECT PL STE 210
SAN DIEGO, CA 92118

Effective as of 01-JAN-24

VAPNEK, EVAN, MD†

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-SEP-21

VAPNEK, EVAN, MD†

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Effective as of 01-SEP-21

VAPNEK, EVAN, MD†

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

VAPNEK, EVAN, MD†

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

VAPNEK, EVAN, MD†

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Effective as of 01-JUL-22

VAPNEK, EVAN, MD†

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

VAPNEK, EVAN, MD†

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Effective as of 01-JAN-24

VAPNEK, EVAN, MD†

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Effective as of 01-JAN-23

WANG, LUKE, MD

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

YUH, BENJAMIN, MD†

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-JAN-24

YUH, BENJAMIN, MD†

Provider ID: N/A

☒ 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Effective as of 01-JAN-24

ADDICTIVE MEDICINE

NAFICY, K, MD†

Provider ID: N/A

☒ 30448 RANCHO VIEJO RD
STE 150
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-MAY-21

CLINICAL

NEUROPSYCHOLOGIST

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A

30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A

30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

EMERGENCY MEDICINE

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

FAMILY PRACTICE

LEWIS, GEORGE, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

LEWIS, GEORGE, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

LEWIS, GEORGE, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

OBZEJTA, NATALIA, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-22

OBZEJTA, NATALIA, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-22

OBZEJTA, NATALIA, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-22

PETERSON, TYLER, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

PETERSON, TYLER, DO

Provider ID: N/A

31001 RANCHO VIEJO RD

STE 200

SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

PETERSON, TYLER, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

RAD, SHERVIN, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-24

RAD, SHERVIN, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-24

RAD, SHERVIN, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-24

TAKHAR, JASMINE, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

TAKHAR, JASMINE, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

TAKHAR, JASMINE, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

INTERNAL MEDICINE

CARABULEA, GABRIEL, MD

Provider ID: N/A

30250 RANCHO VIEJO RD
STE C
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-23

CARABULEA, GABRIEL, MD

Provider ID: N/A

30250 RANCHO VIEJO RD
STE C
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-23

KALE, RAHUL, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-19

KOHLI, SANJIVAN, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD

STE 200

SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

KOHLI, SANJIVAN, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

KOHLI, SANJIVAN, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-17

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-NOV-22

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-NOV-22

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

KALE, RAHUL, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,

CA 92675

Effective as of 01-JUN-17

KALE, RAHUL, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

KALE, RAHUL, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

KOHLI, SANJIVAN, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-19

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-20

NEPHROLOGY

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-22

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-22

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-22

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-22

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-22

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

PANG, JASON, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,

CA 92675

Effective as of 01-DEC-14

PANG, JASON, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-NOV-14

OPHTHALMOLOGY

KIM, ESTHER, MD

Provider ID: N/A

31451 RANCHO VIEJO RD
STE 101
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

KIM, ESTHER, MD

Provider ID: N/A

31451 RANCHO VIEJO RD
STE 101
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

WILLIAMS, MARK, MD

Provider ID: N/A

31451 RANCHO VIEJO RD
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

WILLIAMS, MARK, MD

Provider ID: N/A

31451 RANCHO VIEJO RD
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

WILLIAMS, MARK, MD

Provider ID: N/A

31451 RANCHO VIEJO RD
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

PODIATRIST

ANGAROLA, JEFF, DPM

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-22

ANGAROLA, JEFF, DPM

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-22

ANGAROLA, JEFF, DPM

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-22

PSYCHIATRY

KURKJIAN, AZAD, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-18

KURKJIAN, AZAD, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200

SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-MAY-18

PSYCHIATRY CHILD

KURKJIAN, AZAD, MD†

Provider ID: N/A
31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-MAY-18

KURKJIAN, AZAD, MD†

Provider ID: N/A
31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-MAY-18

PSYCHOLOGIST

HANSINK, RAYMOND, PhD†

Provider ID: N/A
30290 RANCHO VIEJO RD
STE 104
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-DEC-20

HANSINK, RAYMOND, PhD†

Provider ID: N/A
30290 RANCHO VIEJO RD
STE 104
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-DEC-20

HANSINK, RAYMOND, PhD†

Provider ID: N/A
30290 RANCHO VIEJO RD
STE 104
SAN JUAN CAPISTRANO,

CA 92675
Effective as of 01-DEC-20

HANSINK, RAYMOND, PhD†

Provider ID: N/A
30290 RANCHO VIEJO RD
STE 104
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-DEC-20

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A
30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-AUG-23

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A
30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-AUG-23

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A
30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-AUG-23

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A
30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-AUG-23

PULMONARY DISEASES

KALE, RAHUL, MD†

Provider ID: N/A
30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-JUN-17

KALE, RAHUL, MD†

Provider ID: N/A
30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-NOV-19

KALE, RAHUL, MD†

Provider ID: N/A
30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-JAN-18

KOHLI, SANJIVAN, MD†

Provider ID: N/A
30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-JUN-17

KOHLI, SANJIVAN, MD†

Provider ID: N/A
30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-JAN-20

KOHLI, SANJIVAN, MD†

Provider ID: N/A
30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,

CA 92675
Effective as of 01-JAN-18

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-NOV-22

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-JUN-23

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-DEC-22

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-DEC-22

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,

CA 92675
Teleservice
Effective as of 01-OCT-22

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-NOV-22

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-18

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-18

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-FEB-21

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-FEB-21

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-20

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-21

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

YEAM, INCHEL, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUL-21

YEAM, INCHEL, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,

CA 92675
Effective as of 01-JUL-21

YEAM, INCHEL, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-16

YEAM, INCHEL, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-16

YEAM, INCHEL, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

SURGERY HAND

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-20

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-20

SURGERY ORTHOPEDIC

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE

170

SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
92675
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
92675
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
92675
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
92675
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

HUO, KEUN-HENG, MD

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

HUO, KEUN-HENG, MD

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAR-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

LEE, RICHARD, MD

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,

CA 92675

Effective as of 01-JAN-21

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-21

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-21

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-FEB-20

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-FEB-20

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-FEB-20

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-FEB-20

CARDIAC

ELECTROPHYSIOLOGY

LERNER, JONATHAN, MD

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-JUL-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-JAN-23

CARDIOLOGY

DO, HULBERT, MD†

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069

Effective as of 01-AUG-22

LY, NANCY, MD†

Provider ID: N/A

955 BOARDWALK
SAN MARCOS, CA 92078
Effective as of 01-JUL-22

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Teleservice
Effective as of 01-JAN-21

NARAYANAN, MEENA, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078*
Effective as of 01-JAN-21

PARIKH, MILIND, DO†

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-SEP-22

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-SEP-22

**CARDIOVASCULAR
DISEASE**

CARLSON, STEVEN, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Teleservice
Effective as of 01-APR-21

CARLSON, STEVEN, MD†

Provider ID: N/A

955 BOARDWALK STE 100

SAN MARCOS, CA 92078
Teleservice
Effective as of 01-JAN-21

CARLSON, STEVEN, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Teleservice
Effective as of 01-SEP-22

DO, HULBERT, MD

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-OCT-23

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Teleservice
Effective as of 01-SEP-22

NARAYANAN, MEENA, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-APR-21

NARAYANAN, MEENA, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-SEP-22

PARIKH, MILIND, DO†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-SEP-22

SARSAM, LUAY, MD

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-JUL-23

SHAH, KULIN, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-JAN-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-SEP-22

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-JAN-23

**CERTIFIED
ACUPUNCTURIST**

GONZALEZ, ANDRES, LAC

Provider ID: N/A

1595 GRAND AVE STE 100
SAN MARCOS, CA 92078
Effective as of 01-MAY-23

**CERTIFIED NURSE
PRACTITIONER**

ANDREW, SHIRLEY, NP†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice
Effective as of 01-SEP-22

FAIQ, JAMILA, NP†

Provider ID: N/A
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice
Effective as of 01-JAN-21

FAIQ, JAMILA, NP†

Provider ID: N/A
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice
Effective as of 01-NOV-22

FODDA, RAMI, NPF

Provider ID: N/A
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Effective as of 01-FEB-23

HACINAS, REYNALDO, NP†

Provider ID: N/A
150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-NOV-22

KOHOUT, KATHRYN, NP†

Provider ID: N/A
150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-SEP-22

KROCHMAL, RACHEL, NP

Provider ID: N/A
120 CRAVEN RD STE 101
SAN MARCOS, CA 92078
Effective as of 01-OCT-23

MAROSOK, MICHELLE, NP

Provider ID: N/A
838 NORDAHL RD STE 300

SAN MARCOS, CA 92069
Teleservice
Effective as of 01-NOV-23

MOONEY, PATRICIA, NP†

Provider ID: N/A
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice
Effective as of 01-JUL-21

MOONEY, PATRICIA, NP†

Provider ID: N/A
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice
Effective as of 01-MAY-21

MWAURA, WAIRIMU, NP†

Provider ID: N/A
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice
Effective as of 01-JUN-21

MWAURA, WAIRIMU, NP†

Provider ID: N/A
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice
Effective as of 01-SEP-22

ONUOHA, NOJA, NP†

Provider ID: N/A
150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-SEP-22

PARSONS, MEKRAE, NP

Provider ID: N/A
150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-DEC-23

VAHDAT, VALERIE, NP†

Provider ID: N/A
2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-NOV-22

VICK, ALINA, NP

Provider ID: N/A
314 S TWIN OAKS VALLEY
RD STE 114
SAN MARCOS, CA 92078
Teleservice
Effective as of 01-NOV-23

WILLEY, MARTI, NP†

Provider ID: N/A
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-JUN-21

**CERTIFIED REGISTERED
NURSE MIDWIFE**

BELANGER, TANYA, CRNM†

Provider ID: N/A
150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

MATEO, MARIE, CRNM†

Provider ID: N/A
150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

NGUYEN, DIANA, CRNM

Provider ID: N/A
150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

CHIROPRACTOR

HINES, TAYTE, DC

Provider ID: N/A

☐ 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069

Effective as of 01-JAN-24

JEPPESEN, LANCE, DC

Provider ID: N/A

☐ 1146 SAN MARINO DR STE L
SAN MARCOS, CA 92078

Effective as of 01-JAN-01

LOVERN, JENNIFER, DC†

Provider ID: N/A

☐ 150 VALPREDA RD
SAN MARCOS, CA 92069

Effective as of 01-JUL-22

MAUSER, JILL ELLEN, DC

Provider ID: N/A

☐ 1146 SAN MARINO DR
SAN MARCOS, CA 92078

Effective as of 01-JUN-21

TRAINER, JASON, DC†

Provider ID: N/A

☐ 150 VALPREDA RD
SAN MARCOS, CA 92069

Effective as of 01-JUL-22

TRAINER, JASON, DC

Provider ID: N/A

☐ 1595 GRAND AVE STE 100
SAN MARCOS, CA 92078

Effective as of 01-MAR-24

DERMATOLOGY

ANGRA, KUNAL, MD†

Provider ID: N/A

☐ 838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-DEC-21

GILBOA, RUTH, MD†

Provider ID: N/A

☐ 838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-AUG-21

SIRICHOTIRATANA, MELISSA, MD†

Provider ID: N/A

☐ 838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-JAN-23

VENKAT, ARUN, MD†

Provider ID: N/A

☐ 838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-JUL-22

VENKAT, ARUN, MD†

Provider ID: N/A

☐ 838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-MAR-17

VENKAT, ARUN, MD†

Provider ID: N/A

☐ 838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-AUG-20

VENKAT, ARUN, MD†

Provider ID: N/A

☐ 838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-SEP-22

WAGNER, MEREDITH, MD†

Provider ID: N/A

☐ 838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-JUL-22

FAMILY PRACTICE

DAUGIRDAS, ANDREA, MD

Provider ID: N/A

☐ 150 VALPREDA RD
SAN MARCOS, CA 92069

Effective as of 01-APR-23

NATH, DEVARSHI, MD

Provider ID: N/A

☐ 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Effective as of 01-FEB-23

OTANEZ CERVANTES, JORGE, MD†

Provider ID: N/A

☐ 150 VALPREDA RD
SAN MARCOS, CA 92069

Effective as of 01-AUG-22

**HEMATOLOGY /
ONCOLOGY**

BESSUDO, ALBERTO, MD†

Provider ID: N/A

☐ 838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-NOV-21

BESSUDO, ALBERTO, MD†

Provider ID: N/A

☐ 838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-JAN-21

KOSMO, MICHAEL, MD†

Provider ID: N/A

☐ 838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-JAN-21

SINCLAIR, JAMES, MD†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Effective as of 01-JAN-21

SULLIVAN, JESSICA, DO⁺
Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Effective as of 01-OCT-22

INTERNAL MEDICINE

PONIACHIK, SAMUEL, MD
Provider ID: N/A

1595 GRAND AVE STE 100
SAN MARCOS, CA 92078
Effective as of 01-JUN-23

INTERVENTIONAL CARDIOLOGY

JOHN, ALAN, MD
Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-MAY-23

RUBIO GARCIA, MANOLO, MD⁺
Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-MAY-23

RUBIO GARCIA, MANOLO, MD⁺
Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-DEC-22

SHAH, KULIN, MD⁺
Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-APR-23

SUDHAKAR, DEEPTHI, MD⁺
Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-APR-23

LICENSED CLINICAL SOCIAL WORKER

MARTINEZ, NORAYMA, LCSW⁺
Provider ID: N/A

1510 E MISSION RD STE
RV035
SAN MARCOS, CA 92069
Effective as of 01-NOV-22

NEONATAL / PERINATAL MEDICINE

IMRIE, DRU, MD⁺
Provider ID: N/A

150 VALPREDA RD
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

MEIXEL, ANTONIE, MD⁺
Provider ID: N/A

150 VALPREDA RD
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

NEPHROLOGY

AFSHAR, MASOUD, MD⁺
Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-MAY-22

AFSHAR, MASOUD, MD⁺
Provider ID: N/A

960 W SAN MARCOS BLVD

STE 210

SAN MARCOS, CA 92078

Teleservice

Effective as of 01-OCT-23

KAYAL, ANAS, MD⁺

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078
Effective as of 01-OCT-23

KAYAL, ANAS, MD⁺

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078
Effective as of 01-MAY-22

NEUROLOGY

ANDER, AZIZ, MD⁺
Provider ID: N/A

838 NORDAHL RD STE 310
SAN MARCOS, CA 92069
Effective as of 01-NOV-21

ANDER, AZIZ, MD⁺
Provider ID: N/A

838 NORDAHL RD STE 310
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

FARHIDVASH, FARIBA, MD⁺
Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Effective as of 01-DEC-22

GRATIANNE, ROBERTO, MD⁺
Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Effective as of 01-JUN-22

GUPTA, MONIKA, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Effective as of 01-JUN-22

**HOSSEIN ZADEH MALEKI,
ANA, MD**

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

**HOSSEIN ZADEH MALEKI,
ANA, MD**

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

HUISA-GARATE, BRANKO, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-MAR-24

HUISA-GARATE, BRANKO, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JUN-22

KAYAL, ANAS, MD†

Provider ID: N/A

334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-SEP-22

MAREK, MAKSYM, MD

Provider ID: N/A

838 NORDAHL RD STE 200

SAN MARCOS, CA 92069

Teleservice

Effective as of 01-OCT-23

MAREK, MAKSYM, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-AUG-23

OLENSKI, KLARI, DO†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JUN-22

PHAM, ALISE, DO

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-AUG-23

PHAM, ALISE, DO

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

SILVER, BRENT, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-DEC-22

SORIA LOPEZ, JOSE, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JUN-22

WU, MELANIE, DO†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JAN-23

***OBSTETRICS /
GYNECOLOGY***

CIZMAR, BRANISLAV, MD

Provider ID: N/A

120 CRAVEN RD STE 101
SAN MARCOS, CA 92078

Effective as of 01-JAN-24

POUNTNEY, MARLENE, MD†

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069

Effective as of 01-JUL-22

POUNTNEY, MARLENE, MD†

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069

Effective as of 01-APR-14

ONCOLOGY MEDICAL

FRAKES, LAURIE, MD†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-JAN-21

FRAKES, LAURIE, MD†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-OCT-22

MCCLAY, EDWARD, MD†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Effective as of 01-FEB-21

OPHTHALMOLOGY

GARFF, KEVIN, MD†

Provider ID: N/A

100 N RANCHO SANTA FE
RD STE 126
SAN MARCOS, CA 92069
Effective as of 01-MAR-24

GUAN, HOWARD, MD

Provider ID: N/A

100 N RANCHO SANTA FE
RD STE 126
SAN MARCOS, CA 92069
Effective as of 01-FEB-24

PRESTERA, TORY, MD†

Provider ID: N/A

100 N RANCHO SANTA FE
RD STE 126
SAN MARCOS, CA 92069
Effective as of 01-JAN-21

PRESTERA, TORY, MD†

Provider ID: N/A

100 N RANCHO SANTA FE
RD STE 126

SAN MARCOS, CA 92069
Effective as of 01-JAN-21

PRESTERA, TORY, MD†

Provider ID: N/A

100 N RANCHO SANTA FE
RD STE 126
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

PEDIATRICS

LUM HO, RACHEL, MD

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-NOV-23

QUINTERO, CAROLYN, MD

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-NOV-23

ZACHRY, ALISON, MD†

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-SEP-22

PHYSICIANS ASSISTANT

BASIN, NATALIE, PA

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-AUG-23

BERNARDO, RACHELLE, PA

Provider ID: N/A

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Effective as of 01-FEB-23

BERNARDO, RACHELLE, PA

Provider ID: N/A

1595 GRAND AVE STE 100
SAN MARCOS, CA 92078
Effective as of 01-MAR-23

ESCALANTE, JUVY, PA

Provider ID: N/A

2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-FEB-23

POLLEY, SHANNON, PA

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-MAR-23

SACRAMENTO, CZAR, PA

Provider ID: N/A

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Effective as of 01-MAR-23

SERING, MALIA, PA†

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069
Effective as of 01-SEP-22

PODIATRIST

FARMER, STEVEN, DPM

Provider ID: N/A

2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-JAN-24

PSYCHIATRY

MCGEHRIN, KEVIN, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice

Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-AUG-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-AUG-23

PHAM, ALISE, DO

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-AUG-23

PHAM, ALISE, DO

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

PHAM, ALISE, DO

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-AUG-23

PHAM, ALISE, DO

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

WALKER, SHAYNA, MD†

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069

Effective as of 01-JUL-22

WALKER, SHAYNA, MD†

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069

Effective as of 01-JUL-22

PSYCHOLOGIST

**CARLTON PENN, CORNELIA,
PhD**

Provider ID: N/A

1510 E MISSION RD SPC
RV035
SAN MARCOS, CA 92069

Effective as of 01-NOV-22

**CARLTON PENN, CORNELIA,
PhD**

Provider ID: N/A

1510 E MISSION RD SPC
RV035
SAN MARCOS, CA 92069

Effective as of 01-NOV-22

LOVE, YVONNE, PSYD

Provider ID: N/A

2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069

Effective as of 01-JUL-23

LOVE, YVONNE, PSYD

Provider ID: N/A

2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069

Effective as of 01-JUL-23

**REGISTERED PHYSICAL
THERAPIST**

BOUTELLE, DAVID, PT

Provider ID: N/A

935 W SAN MARCOS BLVD
STE 102

SAN MARCOS, CA 92078

Effective as of 01-JAN-24

BOUTELLE, BARBARA, PT

Provider ID: N/A

935 W SAN MARCOS BLVD
STE 102

SAN MARCOS, CA 92078

Effective as of 01-JAN-24

SPURRELL, KATHRYN, PT

Provider ID: N/A

2115 MONTIEL RD STE 103
SAN MARCOS, CA 92069

Effective as of 01-JAN-24

RHEUMATOLOGY

AL NAHLAWI, BASMA, MD†

Provider ID: N/A

334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-JUL-22

AL NAHLAWI, BASMA, MD†

Provider ID: N/A

334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-OCT-21

AL NAHLAWI, BASMA, MD†

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078
Effective as of 01-OCT-23

AL NAHLAWI, BASMA, MD†

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078
Effective as of 01-MAY-22

AL NAHLAWI, BASMA, MD†

Provider ID: N/A

334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078
Teleservice
Effective as of 01-SEP-22

DIKRANIAN, ARA, MD

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078
Effective as of 01-MAR-24

ANESTHESIOLOGY

FONTANA, LOUIS, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

CARDIOLOGY

PONCE, SONIA, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-22

**CARDIOVASCULAR
DISEASE**

AIZIN, VITALI, MD†

Provider ID: N/A

4630 BORDER VILLAGE RD
STE H
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

AIZIN, VITALI, MD†

Provider ID: N/A

4630 BORDER VILLAGE RD
STE H
SAN YSIDRO, CA 92173
Effective as of 01-FEB-21

**CERTIFIED NURSE
PRACTITIONER**

CELIZ, ADRIANA, NP†

Provider ID: N/A

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

DRISCOLL, SUSAN, NP†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

HACINAS, REYNALDO, NP†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

KANTAS, PARIS, NP†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-MAY-22

LIEBER, CAROL, NP†

Provider ID: N/A

1601 PRECISION PARK LN

SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

**VAZQUEZ-ERLBECK, MARTHA,
NP**

Provider ID: N/A

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-DEC-21

CHIROPRACTOR

KELCHNER, MATTHEW, DC†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-22

FAMILY PRACTICE

**ALVAREZ-ESTRADA, MIGUEL,
MD†**

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-DEC-22

ARRIETA, NOEMI, DO

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-APR-23

CORONADO, MYRNA, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173*
Teleservice
Effective as of 01-APR-23

CORONADO, MYRNA, MD

Provider ID: N/A

4050 BEYER BLVD

SAN YSIDRO, CA 92173*
Teleservice
Effective as of 01-APR-23

DALUGDUGAN, ESTHER, MD

Provider ID: N/A
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-NOV-23

ESTRADA, JOHANNA, MD†

Provider ID: N/A
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-JUL-22

LEUTE, ERIC, MD

Provider ID: N/A
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-FEB-23

ROJAS, STEVEN, MD

Provider ID: N/A
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-MAY-23

STALEY, MICHAELA, MD†

Provider ID: N/A
4004 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-NOV-23

VAN PRATT LEVIN, AISHA, MD

Provider ID: N/A
4004 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-JAN-24

GENERAL PRACTICE

**GARCIA-SANDOVAL,
DAMARIS, MD**

Provider ID: N/A
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-NOV-23

HOSPITALIST MD/DO

MUSINSKI, SCOTT, MD†

Provider ID: N/A
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-22

INFECTIOUS DISEASE

ALDOUS, JEANNETTE, MD†

Provider ID: N/A
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-22

PARK, DANIEL, MD†

Provider ID: N/A
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-JUL-22

PROMER, KATHERINE, MD†

Provider ID: N/A
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

INTERNAL MEDICINE

HURST, MICHAEL, DO†

Provider ID: N/A
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-SEP-22

LAMANTIA, MICHELE, MD
Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-AUG-23

PROMER, KATHERINE, MD†

Provider ID: N/A
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-SEP-22

**INTERNAL MEDICINE
GERIATRIC MEDICINE**

CHAU, DIANE, MD†

Provider ID: N/A
3364 BEYER BLVD STE 101
SAN YSIDRO, CA 92173
Effective as of 01-JUL-22

CHAU, DIANE, MD†

Provider ID: N/A
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-22

**LICENSED CLINICAL
SOCIAL WORKER**

JENNINGS, AMY, LCSW†

Provider ID: N/A
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-SEP-22

LOPEZ, MARIBEL, LCSW

Provider ID: N/A
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

**MARRIAGE FAMILY
THERAPIST**

ALVAREZ, IRAIDA, MFT

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-DEC-22

BALTRUS, JUSTINE, MFT

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-NOV-22

BURCIAGA, HENRY, MFT

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

Effective as of 01-FEB-24

ESTAVILLO, SAUL, MFT

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

Effective as of 01-OCT-22

JIMENEZ, NANCY, MFT

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

Effective as of 01-FEB-24

**NEONATAL / PERINATAL
MEDICINE**

GOMEZ, DANIELA, MD

Provider ID: N/A

4004 BEYER BLVD STE 400
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-OCT-22

GOMEZ, DANIELA, MD

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-OCT-22

NEPHROLOGY

SOLTERO, RICARDO, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JAN-21

**OBSTETRICS /
GYNECOLOGY**

BERGGREN, ERICA, MD†

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-SEP-21

CALDERON, JORGE, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JUL-22

CARR, MIANDA, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JAN-21

CARSON, LATISA, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JUL-22

**DANESHMAND, SHAHRAM,
MD†**

Provider ID: N/A

4050 BEYER BLVD

SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-JUL-22

**DANESHMAND, SHAHRAM,
MD†**

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-SEP-21

DINH, MY, DO†

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JUL-22

GOLDSTEIN, EDWARD, MD†

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JAN-21

GOLDSTEIN, EDWARD, MD†

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JUL-22

JENKINS, ENCHANTA, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JUL-22

**MAJERSKI GONZALEZ,
MANDY, MD†**

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-JUL-22

**MAJERSKI GONZALEZ,
MANDY, MD†**

Provider ID: N/A

☑ 4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-22

**MAJERSKI GONZALEZ,
MANDY, MD†**

Provider ID: N/A

☑ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-JUN-21

MENDEZ, DIEGO, MD†

Provider ID: N/A

☑ 4050 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-NOV-21

**OCCUPATIONAL
THERAPIST**

BROWN, JOHNNY, OT

Provider ID: N/A

☑ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-22

OPHTHALMOLOGY

DE SILVA, NIHAL, MD†

Provider ID: N/A

☑ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-22

SKAF, AYHAM, MD†

Provider ID: N/A

☑ 3364 BEYER BLVD STE
102-103
SAN YSIDRO, CA 92173

Effective as of 01-JUL-22

PEDIATRICS

DILLON, BENEDICT, MD†

Provider ID: N/A

☑ 4050 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-FEB-24

TAYLOR, TASHA, MD†

Provider ID: N/A

☑ 4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-22

PHYSICIANS ASSISTANT

BUCKNER, JOSEPH, PA

Provider ID: N/A

☑ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-FEB-22

HARMIS, NATASHA, PA†

Provider ID: N/A

☑ 3364 BEYER BLVD STE 102
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-MAY-21

**MARTINEZ MURGUIA, IRENE,
PA**

Provider ID: N/A

☑ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-FEB-24

**PORTO MADURSKI, KRISTINE,
PA†**

Provider ID: N/A

☑ 4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

ROSENBLATT, SHERI, PA†

Provider ID: N/A

☑ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

SMITH, DOUGLAS, PA†

Provider ID: N/A

☑ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-MAY-21

SUNA SITTO, MOHEEN, PA†

Provider ID: N/A

☑ 3364 BEYER BLVD STE 102
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-FEB-21

TRUJILLO, MIGUEL, PA†

Provider ID: N/A

☑ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

PODIATRIST

MANCHEL, BRUCE, DPM†

Provider ID: N/A

☑ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

MANCHEL, BRUCE, DPM†

Provider ID: N/A

☑ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-22

PSYCHIATRY

BERGGREN, ERICA, MD†

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-22

BERGGREN, ERICA, MD†
Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-22

CRAWFORD-DAY, ANN, MD
Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

CRAWFORD-DAY, ANN, MD
Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

FONTANA, LOUIS, MD†
Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

FONTANA, LOUIS, MD†
Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

JAMES, CHRISTINE, DO
Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-FEB-24

JAMES, CHRISTINE, DO
Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-FEB-24

OJHA, PRITI, MD

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-JUN-23

OJHA, PRITI, MD

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-JUN-23

REGISTERED PHYSICAL THERAPIST

DESOUSA, MICHELLE, PT†

Provider ID: N/A

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-22

SPEECH PATHOLOGIST

HILL, CARLA, SP†

Provider ID: N/A

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-MAY-22

SURGERY ORTHOPEDIC

ROSENFELD, ALAN, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

UROLOGY

SALEM, CAROL, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JAN-21

CHIROPRACTOR

KELCHNER, MATTHEW, DC†

Provider ID: N/A

120 TOWN CENTER PKWY
SANTEE, CA 92071
Effective as of 01-DEC-22

KELCHNER, MATTHEW, DC†

Provider ID: N/A

120 TOWN CENTER PKWY
SANTEE, CA 92071
Effective as of 01-JUL-22

GASTROENTEROLOGY

REDDY, ANANTHRAM, MD†

Provider ID: N/A

9456 CUYAMACA ST STE
102
SANTEE, CA 92071
Effective as of 01-JAN-21

REDDY, ANANTHRAM, MD†

Provider ID: N/A

9456 CUYAMACA ST STE
102
SANTEE, CA 92071
Effective as of 01-JUL-22

INTERNAL MEDICINE

CORBIN, DAVID, MD†

Provider ID: N/A

120 TOWN CENTER PKWY
SANTEE, CA 92071
Teleservice
Effective as of 01-NOV-23

LICENSED CLINICAL

SOCIAL WORKER

MEAGHER, RAISHELLE, LCSW

Provider ID: N/A

120 TOWN CENTER PKWY
SANTEE, CA 92071

Teleservice

Effective as of 01-NOV-23

PEDIATRICS

IKE, ERICA, DO†

Provider ID: N/A

120 TOWN CENTER PKWY
SANTEE, CA 92071

Effective as of 01-JAN-21

PHYSICIANS ASSISTANT

ROSENBLATT, SHERI, PA†

Provider ID: N/A

120 TOWN CENTER PKWY
SANTEE, CA 92071

Teleservice

Effective as of 01-OCT-21

PSYCHIATRY

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

8770 CUYAMACA ST STE 4
SANTEE, CA 92071

Effective as of 01-MAY-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

8770 CUYAMACA ST STE 4
SANTEE, CA 92071

Effective as of 01-MAY-22

RADIOLOGY DIAGNOSTIC

MOORE, BRIAN, MD†

Provider ID: N/A

9640 MISSION GORGE RD
STE H
SANTEE, CA 92071

Effective as of 01-JAN-21

VENKATESH, VIJAY, MD†

Provider ID: N/A

9640 MISSION GORGE RD
STE H
SANTEE, CA 92071

Effective as of 01-SEP-22

REGISTERED PHYSICAL THERAPIST

BOUTELLE, BARBARA, PT

Provider ID: N/A

9830 PROSPECT AVE STE A
SANTEE, CA 92071

Effective as of 01-JAN-24

BOUTELLE, DAVID, PT

Provider ID: N/A

9830 PROSPECT AVE STE A
SANTEE, CA 92071

Effective as of 01-JAN-21

DERMATOLOGY

AGUIRRE, KRISTEN, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JUN-22

AGUIRRE, KRISTEN, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JAN-23

GILBOA, RUTH, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JUL-22

GILBOA, RUTH, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JUN-22

GILBOA, RUTH, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-SEP-22

GILBOA, RUTH, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075

Effective as of 01-FEB-21

GILBOA, RUTH, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-AUG-08

ROSS, ANDREW, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-AUG-20

ROSS, ANDREW, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-SEP-22

ROSS, ANDREW, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUN-22

ROSS, ANDREW, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUL-22

SIRICHOTIRATANA, MELISSA, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JAN-23

THIELE, JENS, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUN-22

THIELE, JENS, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-SEP-09

TSE, YARDY, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUN-22

VENKAT, ARUN, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D

SOLANA BEACH, CA 92075
Effective as of 01-MAR-16

VENKAT, ARUN, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-MAR-16

VENKAT, ARUN, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-SEP-22

VENKAT, ARUN, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-FEB-21

VENKAT, ARUN, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUL-22

ENDOCRINOLOGY

METABOLISM DIABETES

ARGOUD, GEORGES, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-MAR-15

ARGOUD, GEORGES, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8

SOLANA BEACH, CA 92075
Effective as of 01-MAR-15

ARGOUD, GEORGES, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-JAN-21

ARGOUD, GEORGES, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-JAN-21

ARGOUD, GEORGES, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075*
Effective as of 01-JAN-24

ARGOUD, GEORGES, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-JUL-22

PHYSICIANS ASSISTANT

GIBSON, JULIA, PA

Provider ID: N/A

380 STEVENS AVE STE 310
SOLANA BEACH, CA 92075
Effective as of 01-MAY-23

LEE, MYUNGHEE, PA

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Teleservice

Effective as of 01-NOV-23

ROBINSON, JENELLE, PA

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075

Effective as of 01-NOV-23

**CERTIFIED NURSE
PRACTITIONER**

CISTRONE, MONICA, NPF

Provider ID: N/A

9239 CAMPO RD STE A
SPRING VALLEY, CA 91977

Teleservice

Effective as of 01-JUL-23

GORDON, DANIELLE, NP†

Provider ID: N/A

9239 CAMPO RD STE A
SPRING VALLEY, CA 91977

Teleservice

Effective as of 01-MAR-22

ALLERGY IMMUNOLOGY

BROWN, HOSEA, MD†

Provider ID: N/A

26960 CHERRY HILLS
BLVD STE D
SUN CITY, CA 92586

Effective as of 01-FEB-22

AUDIOLOGIST

ACEVEDO-FREY, SYLVIA, AuD

Provider ID: N/A

28071 BRADLEY RD
SUN CITY, CA 92586

Effective as of 01-JUN-23

CARDIOVASCULAR

DISEASE

AGGARWAL, SAURABH, MD†

Provider ID: N/A

26962 CHERRY HILLS
BLVD STE A
SUN CITY, CA 92586

Effective as of 01-DEC-21

SARSAM, SINAN, MD†

Provider ID: N/A

26960 CHERRY HILLS
BLVD STE C
SUN CITY, CA 92586

Effective as of 01-JUN-21

GASTROENTEROLOGY

**RAGHUWANSHI, NAISHADH,
MD†**

Provider ID: N/A

26960 CHERRY HILLS
BLVD
SUN CITY, CA 92586

Effective as of 01-FEB-11

**RAGHUWANSHI, NAISHADH,
MD†**

Provider ID: N/A

26960 CHERRY HILLS
BLVD
SUN CITY, CA 92586

Effective as of 01-SEP-09

**MARRIAGE FAMILY
THERAPIST**

PORTER, TERRY, MFT†

Provider ID: N/A

28125 BRADLEY RD STE 220
SUN CITY, CA 92586

Effective as of 01-JAN-23

PORTER, TERRY, MFT†

Provider ID: N/A

28125 BRADLEY RD STE 220
SUN CITY, CA 92586

Effective as of 01-JAN-23

NEPHROLOGY

ISHAK, SALAM, MD†

Provider ID: N/A

28125 BRADLEY RD STE 270
SUN CITY, CA 92586

Effective as of 01-SEP-12

ISHAK, SALAM, MD†

Provider ID: N/A

28125 BRADLEY RD STE 270
SUN CITY, CA 92586

Effective as of 01-JUN-12

OPHTHALMOLOGY

JACOBSON, ARTHUR, MD†

Provider ID: N/A

29826 HAUN RD STE 100
SUN CITY, CA 92586

Effective as of 01-JUL-23

LEE, JOHN, MD†

Provider ID: N/A

28125 BRADLEY RD STE 189
SUN CITY, CA 92586

Effective as of 01-FEB-11

OPTOMETRIST

LANE, KEVIN, OD†

Provider ID: N/A

29826 HAUN RD STE 100
SUN CITY, CA 92586

Effective as of 01-JUL-23

RADIOLOGY DIAGNOSTIC

BURROUGHS, GLORIA, MD†

Provider ID: N/A

26870 CHERRY HILLS
BLVD
SUN CITY, CA 92586
Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD†

Provider ID: N/A

26870 CHERRY HILLS
BLVD
SUN CITY, CA 92586
Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD†

Provider ID: N/A

26870 CHERRY HILLS
BLVD
SUN CITY, CA 92586
Effective as of 01-OCT-17

ALLERGY IMMUNOLOGY

GUPTA, SAMEER, MD†

Provider ID: N/A

41715 WINCHESTER RD STE
206
TEMECULA, CA 92590
Effective as of 01-JAN-16

GUPTA, SAMEER, MD†

Provider ID: N/A

41715 WINCHESTER RD STE
206
TEMECULA, CA 92590
Effective as of 01-FEB-15

GUPTA, SAMEER, MD†

Provider ID: N/A

41715 WINCHESTER RD STE
206
TEMECULA, CA 92590
Effective as of 01-DEC-21

GUPTA, SAMEER, MD†

Provider ID: N/A

41715 WINCHESTER RD STE

206
TEMECULA, CA 92590
Effective as of 01-JUL-23

ANESTHESIOLOGY

DORAISWAMY, ARUL, MD†

Provider ID: N/A

28975 OLD TOWN FRONT
ST STE 200
TEMECULA, CA 92590
Effective as of 01-JUL-17

DORAISWAMY, ARUL, MD†

Provider ID: N/A

28975 OLD TOWN FRONT
ST STE 200
TEMECULA, CA 92590
Effective as of 01-JUL-17

GUIANG, RAINIER, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-SEP-19

HYUN, SUZANNE, MD

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-MAR-24

JEDAMSKI, WALDTRAUT, MD

Provider ID: N/A

28975 OLD TOWN FRONT
ST STE 200
TEMECULA, CA 92590
Effective as of 01-OCT-19

KANU, ABDUL, MD

Provider ID: N/A

27699 JEFFERSON AVE
TEMECULA, CA 92590
Teleservice
Effective as of 01-AUG-20

PANG, GARY, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-MAR-24

**ANESTHESIOLOGY PAIN
MANAGEMENT**

CHEN, HAMILTON, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-SEP-19

CHEN, HAMILTON, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-SEP-19

CHEN, HAMILTON, MD

Provider ID: N/A

27450 YNEZ RD STE 202
TEMECULA, CA 92591
Effective as of 01-SEP-23

DADACHANJI, CYRUS, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590
Effective as of 01-JUL-23

DORAISWAMY, ARUL, MD†

Provider ID: N/A

28975 OLD TOWN FRONT
ST STE 200
TEMECULA, CA 92590
Effective as of 01-JUL-17

GUIANG, RAINIER, MD

Provider ID: N/A

27450 YNEZ RD STE 202

TEMECULA, CA 92591
Effective as of 01-SEP-23

GUIANG, RAINIER, MD†

Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92591
Effective as of 01-MAR-24

LEIER, TIM, MD

Provider ID: N/A
27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAY-18

LEIER, TIM, MD

Provider ID: N/A
27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-SEP-19

LEIER, TIM, MD

Provider ID: N/A
27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-JUN-21

**MOELLER-BERTRAM, TOBIAS,
MD†**

Provider ID: N/A
27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-JUN-18

CARDIOLOGY

MESSENGER, BRADLEY, MD

Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592

Effective as of 01-JUN-23

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

**CARDIOVASCULAR
DISEASE**

ALFAY, WISAM, MD

Provider ID: N/A
27450 YNEZ RD STE 109
TEMECULA, CA 92591
Effective as of 01-MAR-22

ALFAY, WISAM, MD

Provider ID: N/A
28780 SINGLE OAK DR STE
290
TEMECULA, CA 92590
Effective as of 01-JAN-22

AMIN, JATIN, MD†

Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

ATTIA, NADER, DO†

Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUL-22

ATTIA, NADER, DO†

Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

ATTIA, NADER, DO†

Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

BISWAS, MIMI, MD

Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

COX, JEREMY, DO

Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-MAR-24

COX, JEREMY, DO

Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-MAR-24

PAREKH, NIRAJ, MD†

Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-MAY-21

PAREKH, NIRAJ, MD†

Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

PAREKH, NIRAJ, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-FEB-22

SANGODKAR, SANDEEP, DO

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

SARSAM, SINAN, MD†

Provider ID: N/A

27450 YNEZ RD STE 109
TEMECULA, CA 92591
Effective as of 01-MAR-22

SARSAM, SINAN, MD†

Provider ID: N/A

27450 YNEZ RD STE 109
TEMECULA, CA 92591
Effective as of 01-MAR-22

**CERTIFIED
ACUPUNCTURIST**

LEE, KYUNG, LAC

Provider ID: N/A

27455 TIERRA ALTA WAY
STE A
TEMECULA, CA 92590
Effective as of 01-MAR-21

LEE, KYUNG, LAC

Provider ID: N/A

27455 TIERRA ALTA WAY
STE A

TEMECULA, CA 92590
Effective as of 01-MAR-21

WACHNER, KRISTELYN, LAC†

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-OCT-22

WACHNER, KRISTELYN, LAC†

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-OCT-22

**CERTIFIED NURSE
PRACTITIONER**

AGORRILLA, MARIA, NP

Provider ID: N/A

44274 GEORGE CUSHMAN
CT STE 212
TEMECULA, CA 92592
Effective as of 01-OCT-23

ALVAREZ, ARMANDA, NP

Provider ID: N/A

27555 YNEZ RD STE 102
TEMECULA, CA 92591
Effective as of 01-FEB-24

BEDFORD, RONALD, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

BEDFORD, RONALD, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

BEDFORD, RONALD, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

BEDFORD, RONALD, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

BEDFORD, RONALD, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

DONLON, RYAN, NPF

Provider ID: N/A

31150 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

31150 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

31150 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

31150 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-24

GEISINGER, TERESA, NP

Provider ID: N/A

31625 DE PORTOLA RD STE 101
TEMECULA, CA 92592
Effective as of 01-APR-23

HARTMAN, JULIE, NPF

Provider ID: N/A

31170 TEMECULA PKWY STE 100
TEMECULA, CA 92592
Effective as of 01-SEP-23

HASAN, BUSHRA, NP

Provider ID: N/A

31170 TEMECULA PKWY STE 100
TEMECULA, CA 92592
Effective as of 01-OCT-22

HUERTA, CARMEN, NP†

Provider ID: N/A

44605 AVENIDA DE MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-OCT-22

HUERTA, CARMEN, NP†

Provider ID: N/A

44605 AVENIDA DE MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

HUERTA, CARMEN, NP†

Provider ID: N/A

44605 AVENIDA DE MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-22

LIRA, SHANNON, NPF

Provider ID: N/A

31625 DE PORTOLA RD STE

101

TEMECULA, CA 92592

Effective as of 01-FEB-24

LUCACI, BIANCA, NP

Provider ID: N/A

27555 YNEZ RD STE 400
TEMECULA, CA 92591
Effective as of 01-SEP-22

ONUOHA, NOJA, NP†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591*
Effective as of 01-NOV-22

ONUOHA, NOJA, NP†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591*
Effective as of 01-NOV-22

SMITH, PAIGE, NP

Provider ID: N/A

27555 YNEZ RD STE 400
TEMECULA, CA 92591
Effective as of 01-OCT-23

THOMAS, STEPHEN, NPF†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592
Effective as of 01-AUG-22

THOMAS, STEPHEN, NPF†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592
Effective as of 01-OCT-23

THOMAS, STEPHEN, NPF†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAR-21

ZELEDON, JAIME, NP

Provider ID: N/A

27699 JEFFERSON AVE STE 201
TEMECULA, CA 92590
Effective as of 01-MAY-18

**CERTIFIED REGISTERED
NURSE MIDWIFE**

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JUL-22

CHIROPRACTOR

BARTZ, PAUL, DC†

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JUL-22

FARSHLER, ANTHONY, DC†

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-NOV-23

FARSHLER, ANTHONY, DC†

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JUL-22

MYREN, DONALD, DC

Provider ID: N/A

26790 YNEZ CT STE 2B

TEMECULA, CA 92591
Effective as of 01-JUN-23

MYREN, DONALD, DC

Provider ID: N/A

26790 YNEZ CT STE 2B
TEMECULA, CA 92591
Effective as of 01-JUN-23

ROJAS, RAYMOND, DC†

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JUL-22

DERMATOLOGY

JACOBS, RANDOLPH, MD

Provider ID: N/A

40971 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-DEC-18

JACOBS, RANDOLPH, MD

Provider ID: N/A

40971 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUL-97

KHERADMAND, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-JAN-22

KHERADMAND, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22

KHERADMAND, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22

KHERADMAND, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-FEB-22

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592

Effective as of 01-JUL-21

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-JUL-21

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

MUNYON, THOMAS, MD†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Teleservice
Effective as of 01-MAR-24

ROSS, ANDREW, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 102
TEMECULA, CA 92592
Effective as of 01-JUL-22

SAIED, NAGI, MD

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Teleservice
Effective as of 01-NOV-23

EMERGENCY MEDICINE

ELLIS, JOHN, MD†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-SEP-22

WARD, NICHOLAS, MD†

Provider ID: N/A

31700 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-21

WARD, NICHOLAS, MD†

Provider ID: N/A

31700 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-21

WARD, NICHOLAS, MD†

Provider ID: N/A

31700 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-21

ENDOCRINOLOGY

METABOLISM DIABETES

JOO, KATHY, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 134
TEMECULA, CA 92591
Effective as of 01-JUL-23

JOO, KATHY, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 134
TEMECULA, CA 92591
Effective as of 01-JUN-16

JOO, KATHY, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 134
TEMECULA, CA 92591
Effective as of 01-JUN-16

JOO, KATHY, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 134
TEMECULA, CA 92591
Effective as of 01-JUN-16

JOU, BILL, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 205
TEMECULA, CA 92592
Effective as of 01-FEB-17

JOU, BILL, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 205
TEMECULA, CA 92592
Effective as of 01-FEB-17

FAMILY PRACTICE

SPORTS MEDICINE

CHEUNG, SUNNY, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

CHEUNG, SUNNY, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

CHEUNG, SUNNY, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

CHEUNG, SUNNY, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

GASTROENTEROLOGY

ARDIGO, GREGORY, MD

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 209
TEMECULA, CA 92591
Effective as of 01-AUG-23

DINH, JACK, MD

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 209
TEMECULA, CA 92591
Effective as of 01-AUG-23

KEMMERLY, THOMAS, MD

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 209 TEMECULA, CA 92591
Effective as of 01-AUG-23

SAUNDERS, ANGELA, DO†

Provider ID: N/A

31625 DE PORTOLA RD SUITE 101 TEMECULA, CA 92592
Effective as of 01-MAY-23

SAUNDERS, ANGELA, DO†

Provider ID: N/A

31625 DE PORTOLA RD SUITE 101 TEMECULA, CA 92592
Effective as of 01-MAR-24

SAUNDERS, ANGELA, DO†

Provider ID: N/A

31625 DE PORTOLA RD SUITE 101 TEMECULA, CA 92592
Effective as of 01-DEC-22

SAUNDERS, ANGELA, DO†

Provider ID: N/A

31625 DE PORTOLA RD SUITE 101 TEMECULA, CA 92592
Effective as of 01-NOV-23

TEYMOORIAN, ARIAN, MD

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 209 TEMECULA, CA 92591
Effective as of 01-AUG-23

**HEMATOLOGY /
ONCOLOGY**

BASERI, BABAK, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 202 TEMECULA, CA 92592
Effective as of 01-APR-24

BASERI, BABAK, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 202 TEMECULA, CA 92592
Effective as of 01-JUL-21

BASERI, BABAK, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 202 TEMECULA, CA 92592
Effective as of 01-JUL-21

MARJON, PHILIP, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 202 TEMECULA, CA 92592
Effective as of 01-APR-22

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 202 TEMECULA, CA 92592
Effective as of 01-APR-20

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 202 TEMECULA, CA 92592
Effective as of 01-DEC-20

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 202 TEMECULA, CA 92592

Effective as of 01-MAY-22

INTERNAL MEDICINE

AL HARASH, ABDALHAMID, MD†

Provider ID: N/A

31565 RANCHO PUEBLO RD STE 205 TEMECULA, CA 92592
Effective as of 01-OCT-22

AL HARASH, ABDALHAMID, MD†

Provider ID: N/A

31565 RANCHO PUEBLO RD STE 205 TEMECULA, CA 92592
Effective as of 01-OCT-22

AL HARASH, ABDALHAMID, MD†

Provider ID: N/A

31565 RANCHO PUEBLO RD STE 205 TEMECULA, CA 92592
Effective as of 01-OCT-22

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201 TEMECULA, CA 92592
Effective as of 01-OCT-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201 TEMECULA, CA 92592
Effective as of 01-OCT-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO

RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAR-21

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A
31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-NOV-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A
31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-NOV-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A
31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-JAN-22

COX, JEREMY, DO

Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

HADDADIN, HASSAN, MD†

Provider ID: N/A
27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590
Effective as of 01-SEP-22

HADDADIN, HASSAN, MD†

Provider ID: N/A
27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590
Effective as of 01-SEP-22

HADDADIN, HASSAN, MD†

Provider ID: N/A
27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590
Effective as of 01-SEP-22

JACOBS, NATALIA, MD

Provider ID: N/A
40971 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-MAY-23

WHITE, XUANHA, DO†

Provider ID: N/A
44605 AVENIDA DE
MISSIONES STE 206
TEMECULA, CA 92592
Effective as of 01-FEB-22

YU, JERRY, MD†

Provider ID: N/A
31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

YU, JERRY, MD†

Provider ID: N/A
31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-JUL-18

YU, JERRY, MD†

Provider ID: N/A
31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-JUL-18

YU, JERRY, MD†

Provider ID: N/A
31537 RANCHO PUEBLO

RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAR-21

YU, JERRY, MD†

Provider ID: N/A
31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-AUG-18

**INTERNAL MEDICINE
CRITICAL CARE MEDICINE**

SALEK, MUNIF, MD†

Provider ID: N/A
27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590
Effective as of 01-FEB-22

SALEK, MUNIF, MD†

Provider ID: N/A
27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590
Effective as of 01-FEB-22

SALEK, MUNIF, MD†

Provider ID: N/A
27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590
Effective as of 01-FEB-22

VEGA, RICARDO, MD†

Provider ID: N/A
27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590
Effective as of 01-JAN-22

VEGA, RICARDO, MD†

Provider ID: N/A
27699 JEFFERSON AVE STE

204
TEMECULA, CA 92590
Effective as of 01-MAR-22

**INTERVENTIONAL
CARDIOLOGY**

SEAMAN, CHRISTOPHER, MD

Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

**LICENSED CLINICAL
SOCIAL WORKER**

**CARTWRIGHT, SHANIQUA,
LCSW**

Provider ID: N/A
41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-NOV-23

JONES, VALORIA, LCSW

Provider ID: N/A
29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-JUL-23

JONES, VALORIA, LCSW

Provider ID: N/A
29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-JUL-23

JONES, VALORIA, LCSW

Provider ID: N/A
29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-JUL-23

**LURINKS GARCIA, MARIA,
LCSW**

Provider ID: N/A
41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JAN-21

ROBLEDO, DAMIAN, LCSW

Provider ID: N/A
41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-APR-23

THOMAS, PAULA, LCSW

Provider ID: N/A
41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-APR-23

**VALDEZ-HERNANDEZ, ISRAEL,
LCSW†**

Provider ID: N/A
29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-JAN-23

**VALDEZ-HERNANDEZ, ISRAEL,
LCSW†**

Provider ID: N/A
29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-APR-23

**VALDEZ-HERNANDEZ, ISRAEL,
LCSW†**

Provider ID: N/A
29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-JAN-23

VALDEZ-HERNANDEZ, ISRAEL,

LCSW†

Provider ID: N/A
29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-APR-23

NEPHROLOGY

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A
31565 RANCHO PUEBLO
RD STE 205
TEMECULA, CA 92592
Effective as of 01-JAN-20

CHANG, DAVID, MD†

Provider ID: N/A
31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A
31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-JUL-23

CHANG, DAVID, MD†

Provider ID: N/A
31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAY-23

CHANG, DAVID, MD†

Provider ID: N/A
31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAY-23

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-APR-15

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

NANDI, SHANKHA, DO†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

NANDI, SHANKHA, DO†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

NANDI, SHANKHA, DO†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201

TEMECULA, CA 92592
Effective as of 01-DEC-23

NANDI, SHANKHA, DO†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-AUG-20

NANDI, SHANKHA, DO†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-JUN-23

NANDI, SHANKHA, DO†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAR-21

NANDI, SHANKHA, DO†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

YAN, ERIC, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Teleservice

Effective as of 01-JUL-18

YAN, ERIC, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Teleservice

Effective as of 01-JUL-18

YAN, ERIC, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Teleservice

Effective as of 01-JUL-18

YAN, ERIC, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Teleservice

Effective as of 01-JUL-23

YAN, ERIC, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Teleservice

Effective as of 01-JUL-23

YAN, ERIC, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Teleservice

Effective as of 01-MAY-20

NEUROLOGY

CHOUDRY, BILAL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 104
TEMECULA, CA 92592

Effective as of 01-MAY-23

CHOUDRY, BILAL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 104
TEMECULA, CA 92592
Effective as of 01-JUN-21

DELANEY, MICHAEL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 104
TEMECULA, CA 92592
Teleservice
Effective as of 01-MAY-23

DELANEY, MICHAEL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 104
TEMECULA, CA 92592
Teleservice
Effective as of 01-MAR-21

DELANEY, MICHAEL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 104
TEMECULA, CA 92592
Teleservice
Effective as of 01-OCT-21

FARHIDVASH, FARIBA, MD†

Provider ID: N/A

44045 MARGARITA RD STE
106
TEMECULA, CA 92592
Effective as of 01-NOV-22

GRATIANNE, ROBERTO, MD†

Provider ID: N/A

44045 MARGARITA RD STE
106
TEMECULA, CA 92592
Effective as of 01-JUN-22

GUPTA, MONIKA, MD†

Provider ID: N/A

44045 MARGARITA RD STE
106
TEMECULA, CA 92592
Effective as of 01-OCT-19

HALL, JACOB, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 104
TEMECULA, CA 92592
Effective as of 01-MAY-23

HALL, JACOB, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-21

HALL, JACOB, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 104
TEMECULA, CA 92592
Effective as of 01-JAN-21

**HOSSEIN ZADEH MALEKI,
ANA, MD**

Provider ID: N/A

44045 MARGARITA RD STE
106
TEMECULA, CA 92592
Effective as of 01-FEB-24

HUOTT, PATRICK, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 104
TEMECULA, CA 92592
Effective as of 01-FEB-24

HUOTT, PATRICK, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 104

TEMECULA, CA 92592
Effective as of 01-FEB-24

MAREK, MAKSYM, MD

Provider ID: N/A

44045 MARGARITA RD STE
106
TEMECULA, CA 92592
Effective as of 01-DEC-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

44045 MARGARITA RD STE
106
TEMECULA, CA 92592
Effective as of 01-JUL-23

PHAM, ALISE, DO

Provider ID: N/A

44045 MARGARITA RD STE
106
TEMECULA, CA 92592
Effective as of 01-DEC-23

SAHAGIAN, GREGORY, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 104
TEMECULA, CA 92592
Effective as of 01-MAY-23

SILVER, BRENT, MD†

Provider ID: N/A

44045 MARGARITA RD STE
106
TEMECULA, CA 92592
Effective as of 01-NOV-22

SORIA LOPEZ, JOSE, MD†

Provider ID: N/A

44045 MARGARITA RD STE
106
TEMECULA, CA 92592
Effective as of 01-MAR-21

TALANKI, VARUN, MD

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 205
TEMECULA, CA 92592
Effective as of 01-DEC-22

WU, MELANIE, DO†

Provider ID: N/A

44045 MARGARITA RD STE
106
TEMECULA, CA 92592
Effective as of 01-JAN-20

NEUROLOGY CHILD

OLENSKI, KLARI, DO†

Provider ID: N/A

44045 MARGARITA RD STE
106
TEMECULA, CA 92592
Effective as of 01-MAR-22

**OBSTETRICS /
GYNECOLOGY**

ELFELT, TIMOTHY, MD†

Provider ID: N/A

28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590
Effective as of 01-AUG-19

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

27625 JEFFERSON AVE STE
101
TEMECULA, CA 92590
Effective as of 01-JUL-21

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

27625 JEFFERSON AVE STE
101
TEMECULA, CA 92590

Effective as of 01-JUL-21

NEAL, JAMES, MD†

Provider ID: N/A

31170 TEMECULA PKWY
STE 201
TEMECULA, CA 92592
Effective as of 01-JUL-23

RIZVI, SYED, MD†

Provider ID: N/A

31493 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAR-22

OPHTHALMOLOGY

BAKHTIARY, PEJMAN, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-SEP-21

BAKHTIARY, PEJMAN, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-SEP-21

BEKENDAM, PETER, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

BEKENDAM, PAMELA, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

BEKENDAM, PETER, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-JUL-23

BEKENDAM, PETER, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20

BEKENDAM, PAMELA, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20

BIRO, NICOLAS, MD

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-JUN-23

BIRO, NICOLAS, MD

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-JUN-23

BURNS, RICHARD, MD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-JUL-23

BURNS, RICHARD, MD†

Provider ID: N/A

41637 MARGARITA RD STE

100
TEMECULA, CA 92591
Effective as of 01-SEP-09

BURNS, RICHARD, MD†

Provider ID: N/A
41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-NOV-08

CHING, ANDREA SHERYL, MD†

Provider ID: N/A
41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

CHOW, JASON, MD†

Provider ID: N/A
31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-JUL-23

JACOBSON, ARTHUR, MD†

Provider ID: N/A
41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-JUL-23

JACOBSON, ARTHUR, MD†

Provider ID: N/A
41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-SEP-09

JOSEPH, JEFFREY, MD†

Provider ID: N/A
31950 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-JUL-23

LAZZARINI, THOMAS, MD

Provider ID: N/A
41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A
41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A
41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A
41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590
Effective as of 01-FEB-24

LEE, JOHN, MD†

Provider ID: N/A
41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-JUL-23

LIN, THEODORE, MD†

Provider ID: N/A
41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590
Effective as of 01-SEP-17

LIN, THEODORE, MD†

Provider ID: N/A
41900 WINCHESTER RD

STE 201
TEMECULA, CA 92590*
Effective as of 01-APR-24

LIN, THEODORE, MD†

Provider ID: N/A
41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590*
Effective as of 01-APR-24

SATTERFIELD, KELLIE, MD

Provider ID: N/A
41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-DEC-23

SAVAR, AARON, MD†

Provider ID: N/A
41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

SAVAR, LOUIS, MD†

Provider ID: N/A
41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

SAVAR, AARON, MD†

Provider ID: N/A
41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20

SAVAR, LOUIS, MD†

Provider ID: N/A
41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20

SHEILS, CATHERINE, MD

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-JAN-24

SHELTON, RAYMOND, MD

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-MAY-23

SMITH, WILLIAM, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20

SONI, NISHANT, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20

SONI, NISHANT, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

SONI, NISHANT, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-23

SORENSEN, ROBERT, MD†

Provider ID: N/A

31950 US HWY 79 S B7
TEMECULA, CA 92592
Effective as of 01-JUL-23

WARNER, MICHAEL, MD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Teleservice

Effective as of 01-JUL-23

YUNG, EDWARD, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

YUNG, EDWARD, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20

**OPHTHALMOLOGY /
OTOLOGY /
LARYNGOLOGY /
RHINOLOGY**

ISSA, REDA, MD†

Provider ID: N/A

41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590
Effective as of 01-DEC-21

ZHOU, SIWEI, MD†

Provider ID: N/A

31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-JUL-23

OPTOMETRIST

ARCHIBALD, JOHN, OD†

Provider ID: N/A

31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-DEC-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-JUL-23

**AZIZ AWAD AWADALLA,
MARINAEMAD, OD†**

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-JUN-23

**AZIZ AWAD AWADALLA,
MARINAEMAD, OD†**

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-FEB-22

**AZIZ AWAD AWADALLA,
MARINAEMAD, OD†**

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-FEB-22

BARR, AUSTIN, OD

Provider ID: N/A

41637 MARGARITA RD STE
100

TEMECULA, CA 92591
Effective as of 01-MAR-23

BARR, AUSTIN, OD

Provider ID: N/A

41637 MARGARITA RD STE
100

TEMECULA, CA 92591
Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

41637 MARGARITA RD STE
100

TEMECULA, CA 92591
Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

41637 MARGARITA RD STE
100

TEMECULA, CA 92591
Effective as of 01-NOV-22

COLEMAN, BROOKE, OD†

Provider ID: N/A

31950 TEMECULA PKWY
STE B-7

TEMECULA, CA 92592
Effective as of 01-FEB-22

COOPER, MICHAEL, OD†

Provider ID: N/A

31950 TEMECULA PKWY
STE B-7

TEMECULA, CA 92592
Effective as of 01-SEP-22

FARAMARZI, FARNAZ, OD

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110

TEMECULA, CA 92590
Effective as of 01-JUL-23

FARAMARZI, FARNAZ, OD

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110

TEMECULA, CA 92590
Effective as of 01-JUL-23

FARAMARZI, FARNAZ, OD

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110

TEMECULA, CA 92590
Effective as of 01-DEC-23

FARAMARZI, FARNAZ, OD

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110

TEMECULA, CA 92590
Effective as of 01-JUN-23

LANE, KEVIN, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100

TEMECULA, CA 92591
Effective as of 01-JUL-23

LANE, KEVIN, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100

TEMECULA, CA 92591
Effective as of 01-FEB-11

LANE, KEVIN, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100

TEMECULA, CA 92591
Effective as of 01-SEP-09

LARSON, BRETT, OD†

Provider ID: N/A

31950 TEMECULA PKWY

STE B-7

TEMECULA, CA 92592
Effective as of 01-AUG-20

LARSON, BRETT, OD†

Provider ID: N/A

31950 TEMECULA PKWY
STE B-7

TEMECULA, CA 92592
Effective as of 01-FEB-22

MC DIARMID, JOHN, OD†

Provider ID: N/A

31950 TEMECULA PKWY
STE B-7

TEMECULA, CA 92592
Effective as of 01-FEB-22

MCINTYRE, DEBRA, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100

TEMECULA, CA 92591
Effective as of 01-DEC-17

MCINTYRE, DEBRA, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100

TEMECULA, CA 92591
Effective as of 01-DEC-17

MCINTYRE, DEBRA, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100

TEMECULA, CA 92591
Effective as of 01-DEC-17

MCINTYRE, DEBRA, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100

TEMECULA, CA 92591
Effective as of 01-JUL-23

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

41637 MARGARITA RD STE 100
TEMECULA, CA 92591
Effective as of 01-JUL-23

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

41637 MARGARITA RD STE 100
TEMECULA, CA 92591
Effective as of 01-JAN-22

OTOLARYNGOLOGY

GIAMMANCO, PIERRE, MD

Provider ID: N/A

27455 TIERRA ALTA WAY STE A
TEMECULA, CA 92590
Effective as of 01-SEP-22

GIAMMANCO, PIERRE, MD

Provider ID: N/A

27455 TIERRA ALTA WAY STE A
TEMECULA, CA 92590
Effective as of 01-SEP-22

TINT, DERRICK, MD†

Provider ID: N/A

40285 WINCHESTER RD STE 104
TEMECULA, CA 92591
Effective as of 01-AUG-21

PHYSICAL MEDICINE / REHABILITATION

AILINANI, HARY, MD

Provider ID: N/A

27699 JEFFERSON AVE STE 201

TEMECULA, CA 92590
Effective as of 01-MAY-21

CHEN, HAMILTON, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-MAR-24

PHYSICIANS ASSISTANT

ASHIER, SAURABH, PA†

Provider ID: N/A

31573 RANCHO PUEBLO RD STE 210
TEMECULA, CA 92592
Effective as of 01-AUG-22

ASHIER, SAURABH, PA†

Provider ID: N/A

31573 RANCHO PUEBLO RD STE 210
TEMECULA, CA 92592
Effective as of 01-JUL-23

ASHIER, SAURABH, PA†

Provider ID: N/A

31573 RANCHO PUEBLO RD STE 210
TEMECULA, CA 92592
Effective as of 01-JUL-23

BAKER, ROBERT, PA

Provider ID: N/A

27699 JEFFERSON AVE STE 201
TEMECULA, CA 92590
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

27699 JEFFERSON AVE STE 201
TEMECULA, CA 92590
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

27699 JEFFERSON AVE STE 201
TEMECULA, CA 92590
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

27699 JEFFERSON AVE STE 201
TEMECULA, CA 92590
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

27699 JEFFERSON AVE STE 201
TEMECULA, CA 92590
Effective as of 01-MAR-24

BASIN, NATALIE, PA

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 102
TEMECULA, CA 92592
Teleservice
Effective as of 01-AUG-23

CAGATAY, HARRIER, PA†

Provider ID: N/A

27699 JEFFERSON AVE STE 201
TEMECULA, CA 92590
Effective as of 01-AUG-20

FELIX, FRANCISCO, PA

Provider ID: N/A

27699 JEFFERSON AVE STE 201
TEMECULA, CA 92590
Effective as of 01-AUG-23

FELIX, FRANCISCO, PA

Provider ID: N/A

27699 JEFFERSON AVE STE 201
TEMECULA, CA 92590
Effective as of 01-MAR-23

KAUFMAN, BRITNEY, PA†

Provider ID: N/A

44605 AVENIDA DE MISSIONES
TEMECULA, CA 92592
Effective as of 01-MAY-22

LYNCH, GREGORY, PA†

Provider ID: N/A

31150 TEMECULA PKWY STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

LYNCH, GREGORY, PA†

Provider ID: N/A

31150 TEMECULA PKWY STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

LYNCH, GREGORY, PA†

Provider ID: N/A

31150 TEMECULA PKWY STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

MITCHELL, PAUL, PA

Provider ID: N/A

27699 JEFFERSON AVE STE 201
TEMECULA, CA 92590
Effective as of 01-JUN-18

ROWAN, RYAN, PA†

Provider ID: N/A

44054 MARGARITA RD STE 1
TEMECULA, CA 92592

PODIATRIST

NEGRON, RICARDO, DPM

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JUL-21

NEGRON, RICARDO, DPM

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JUL-22

NEGRON, RICARDO, DPM

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JUL-21

PSYCHIATRY

ANDERSEN, CLAIRE, MD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-DEC-20

ANDERSEN, CLAIRE, MD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-DEC-20

JAKKULA, JAGAN, MD†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-AUG-22

JAKKULA, JAGAN, MD†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-NOV-23

JAKKULA, JAGAN, MD†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-AUG-22

JAKKULA, JAGAN, MD†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-NOV-23

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-OCT-23

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-AUG-22

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-AUG-22

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-OCT-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

44045 MARGARITA RD STE 106
TEMECULA, CA 92592

Effective as of 01-JUL-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

44045 MARGARITA RD STE 106
TEMECULA, CA 92592

Effective as of 01-JUL-23

PERSAUD, PRIA, MD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-AUG-20

PERSAUD, PRIA, MD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-AUG-20

PHAM, ALISE, DO

Provider ID: N/A

44045 MARGARITA RD STE 106
TEMECULA, CA 92592

Effective as of 01-DEC-23

PHAM, ALISE, DO

Provider ID: N/A

44045 MARGARITA RD STE 106
TEMECULA, CA 92592

Effective as of 01-DEC-23

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-AUG-22

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-SEP-23

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-AUG-22

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-SEP-23

PSYCHIATRY CHILD

ANDERSEN, CLAIRE, MD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-DEC-20

ANDERSEN, CLAIRE, MD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-DEC-20

PSYCHOLOGIST

THODE, LAURA, PSYD

Provider ID: N/A

31720 TEMECULA PKWY STE 200
TEMECULA, CA 92592

Effective as of 01-MAR-24

THODE, LAURA, PSYD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-MAR-24

THODE, LAURA, PSYD

Provider ID: N/A

31720 TEMECULA PKWY STE 200
TEMECULA, CA 92592

Effective as of 01-MAR-24

THODE, LAURA, PSYD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-MAR-24

WERNER, KRISTINE, PhD

Provider ID: N/A

27699 JEFFERSON AVE STE 201
TEMECULA, CA 92590

Effective as of 01-MAY-18

WERNER, KRISTINE, PhD

Provider ID: N/A

27699 JEFFERSON AVE STE 201
TEMECULA, CA 92590

Effective as of 01-MAY-18

WOODWORTH, JENNIFER, PSYD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-JAN-21

WOODWORTH, JENNIFER, PSYD

Provider ID: N/A

43385 BUSINESS PARK DR
STE 110
TEMECULA, CA 92590

Effective as of 01-JAN-21

WOODWORTH, JENNIFER, PSYD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-JAN-21

WOODWORTH, JENNIFER, PSYD

Provider ID: N/A

43385 BUSINESS PARK DR
STE 110
TEMECULA, CA 92590

Effective as of 01-JAN-21

PULMONARY DISEASES

CHUA, WILLY, MD

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 206
TEMECULA, CA 92592

Effective as of 01-APR-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590

Effective as of 01-APR-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204

TEMECULA, CA 92590

Effective as of 01-APR-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590

Effective as of 01-JUL-22

VEGA, RICARDO, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590

Effective as of 01-AUG-22

VEGA, RICARDO, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590

Effective as of 01-AUG-22

VEGA, RICARDO, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590

Effective as of 01-AUG-22

REGISTERED PHYSICAL THERAPIST

AGENA, CYAN, PT†

Provider ID: N/A

27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590

Effective as of 01-NOV-21

AGENA, CYAN, PT†

Provider ID: N/A

27699 JEFFERSON AVE STE
202

TEMECULA, CA 92590

Effective as of 01-NOV-21

ATKINS, WILLIAM, PT

Provider ID: N/A

27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590

Effective as of 01-JUN-23

ATKINS, WILLIAM, PT

Provider ID: N/A

27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590

Effective as of 01-JUN-23

ATKINS, WILLIAM, PT

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 101
TEMECULA, CA 92592

Effective as of 01-JUN-23

ATKINS, WILLIAM, PT

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 101
TEMECULA, CA 92592

Effective as of 01-JUN-23

BRYANS, BRIANNA, PT†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD
TEMECULA, CA 92591

Effective as of 01-JAN-22

BRYANS, BRIANNA, PT†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD
TEMECULA, CA 92591

Effective as of 01-JAN-22

BURRUEL, KAYLA, PT

Provider ID: N/A

27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590
Effective as of 01-SEP-23

BURRUEL, KAYLA, PT

Provider ID: N/A

27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590
Effective as of 01-SEP-23

BURRUEL, KAYLA, PT

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 101
TEMECULA, CA 92592
Effective as of 01-SEP-23

BURRUEL, KAYLA, PT

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 101
TEMECULA, CA 92592
Effective as of 01-SEP-23

ESTELLE, KIRA, PT

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 101
TEMECULA, CA 92592
Effective as of 01-MAY-23

ESTELLE, KIRA, PT

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 101
TEMECULA, CA 92592
Effective as of 01-MAY-23

ESTELLE, KIRA, PT

Provider ID: N/A

27699 JEFFERSON AVE STE

202

TEMECULA, CA 92590

Effective as of 01-MAY-23

ESTELLE, KIRA, PT

Provider ID: N/A

27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590
Effective as of 01-MAY-23

HANSON, ADRIENNE, PT

Provider ID: N/A

27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590
Effective as of 01-JUL-23

HANSON, ADRIENNE, PT

Provider ID: N/A

27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590
Effective as of 01-JUL-23

HANSON, ADRIENNE, PT

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 101
TEMECULA, CA 92592
Effective as of 01-JUL-23

HANSON, ADRIENNE, PT

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 101
TEMECULA, CA 92592
Effective as of 01-JUL-23

HORN, TREVOR, PT†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 101
TEMECULA, CA 92592
Effective as of 01-APR-20

HORN, TREVOR, PT†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 101
TEMECULA, CA 92592
Effective as of 01-APR-20

HORN, TREVOR, PT†

Provider ID: N/A

27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590
Effective as of 01-APR-20

HORN, TREVOR, PT†

Provider ID: N/A

27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590
Effective as of 01-APR-20

ROLTSCH, IAN, PT

Provider ID: N/A

27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590
Effective as of 01-MAY-23

ROLTSCH, IAN, PT

Provider ID: N/A

27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590
Effective as of 01-MAY-23

ROLTSCH, IAN, PT

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 101
TEMECULA, CA 92592
Effective as of 01-MAY-23

ROLTSCH, IAN, PT

Provider ID: N/A

31515 RANCHO PUEBLO RD Effective as of 01-NOV-21
STE 101
TEMECULA, CA 92592
Effective as of 01-MAY-23

SABIN, SCOTT, PT†

Provider ID: N/A

31515 RANCHO PUEBLO RD Effective as of 01-JUN-21
STE 101
TEMECULA, CA 92592
Effective as of 01-FEB-19

SABIN, SCOTT, PT†

Provider ID: N/A

31515 RANCHO PUEBLO RD Effective as of 01-JUN-21
STE 101
TEMECULA, CA 92592
Effective as of 01-FEB-19

SIVA, ANDREW, PT†

Provider ID: N/A

31515 RANCHO PUEBLO RD Effective as of 01-NOV-21
STE 101
TEMECULA, CA 92592
Effective as of 01-JUN-21

SIVA, ANDREW, PT†

Provider ID: N/A

31515 RANCHO PUEBLO RD Effective as of 01-NOV-21
STE 101
TEMECULA, CA 92592
Effective as of 01-JUN-21

SIVA, ANDREW, PT†

Provider ID: N/A

27699 JEFFERSON AVE STE Effective as of 01-JUN-20
202
TEMECULA, CA 92590
Effective as of 01-NOV-21

SIVA, ANDREW, PT†

Provider ID: N/A

27699 JEFFERSON AVE STE Effective as of 01-JUN-20
202
TEMECULA, CA 92590

SIVA, ANDREW, PT†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 4
TEMECULA, CA 92591

SIVA, ANDREW, PT†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 4
TEMECULA, CA 92591

SIVA, ANDREW, PT†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 234
TEMECULA, CA 92591

SIVA, ANDREW, PT†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 234
TEMECULA, CA 92591

VIZCARRA, DAVID, PT†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 234
TEMECULA, CA 92591

VIZCARRA, DAVID, PT†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 234
TEMECULA, CA 92591

VIZCARRA, DAVID, PT†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 101
TEMECULA, CA 92592
Effective as of 01-JUN-20

VIZCARRA, DAVID, PT†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 101
TEMECULA, CA 92592
Effective as of 01-JUN-20

RHEUMATOLOGY

AL HARASH, ABDALHAMID, MD†

Provider ID: N/A

31565 RANCHO PUEBLO RD STE 205
TEMECULA, CA 92592
Effective as of 01-AUG-23

AL HARASH, ABDALHAMID, MD†

Provider ID: N/A

31565 RANCHO PUEBLO RD STE 205
TEMECULA, CA 92592
Effective as of 01-AUG-23

BRAVO, ARLENE, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-APR-21

COLBURN, KEITH, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-MAR-21

MEHTA, AMAL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-JUL-23

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-MAR-21

MEHTA, AMAL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-SEP-18

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-SEP-18

PHILLPOTTS, MARC, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-JUL-21

**RAMASWAMY,
DHARMARAJAN, MD†**

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-SEP-18

TRIVEDI, JANKI, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-SEP-18

SPEECH PATHOLOGIST

O'DORAN, KAYLA, SP

Provider ID: N/A

40764 WINCHESTER RD
STE 590
TEMECULA, CA 92591

Teleservice

Effective as of 01-JUN-22

O'DORAN, KAYLA, SP

Provider ID: N/A

40764 WINCHESTER RD
STE 590
TEMECULA, CA 92591

Teleservice

Effective as of 01-JUN-22

WIRTH, LAURA, SP

Provider ID: N/A

40764 WINCHESTER RD
STE 590
TEMECULA, CA 92591

Effective as of 01-JUN-22

WIRTH, LAURA, SP

Provider ID: N/A

40764 WINCHESTER RD
STE 590
TEMECULA, CA 92591

Effective as of 01-JUN-22

SURGERY

CARDIOVASCULAR

RASI, ALFREDO, MD†

Provider ID: N/A

31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592

**SURGERY COLON
SURGERY**

GORSKI, TITO, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-16

GORSKI, TITO, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

GORSKI, TITO, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-15

SURGERY GENERAL

BARRERA, KAYLENE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO

RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

CARRILLO, ROBERT, MD

Provider ID: N/A

27555 YNEZ RD STE 400
TEMECULA, CA 92591
Teleservice
Effective as of 01-JUN-23

CARRILLO, ROBERT, MD

Provider ID: N/A

27555 YNEZ RD STE 400
TEMECULA, CA 92591
Teleservice
Effective as of 01-JUN-23

CORDERO, RAYMUND, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

CORDERO, RAYMUND, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

CORDERO, RAYMUND, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-15

CORDERO, RAYMUND, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21

DADA, STEPHEN, MD

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-23

ESSIEN, FRANCIS, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-15

ESSIEN, FRANCIS, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-16

ESSIEN, FRANCIS, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-15

ESSIEN, FRANCIS, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22

ESSIEN, FRANCIS, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

ESSIEN, FRANCIS, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

GORSKI, TITO, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

GORSKI, YARA, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

GORSKI, TITO, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22

GORSKI, TITO, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-AUG-16

GORSKI, YARA, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-SEP-16

JOHNSEN, HEGE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-SEP-16

JOHNSEN, HEGE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-AUG-16

JOHNSEN, HEGE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-APR-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-DEC-17

JOHNSEN, HEGE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-SEP-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-MAY-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-MAY-22

MAC, OLIVIA, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-DEC-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-DEC-19

NAFIU, BOLAJI, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-APR-20

NAFIU, BOLAJI, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-SEP-22

NOURI, SARVENAZ, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-NOV-22

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-MAR-23

SHAPER, EMANUEL, MD

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592

Effective as of 01-FEB-24

TIU, BRIAN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-SEP-22

TIU, BRIAN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-AUG-18

VU, STEVE, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590

Effective as of 01-APR-23

VU, STEVE, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590

Effective as of 01-APR-23

VU, STEVE, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590

Effective as of 01-APR-23

VU, STEVE, MD

Provider ID: N/A

27699 JEFFERSON AVE STE 305
TEMECULA, CA 92590
Effective as of 01-APR-23

WANG, NAN, MD†

Provider ID: N/A

31573 RANCHO PUEBLO RD STE 210
TEMECULA, CA 92592
Effective as of 01-AUG-22

WANG, XIUJIE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21

WANG, XIUJIE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-19

WANG, NAN, MD†

Provider ID: N/A

31573 RANCHO PUEBLO RD STE 210
TEMECULA, CA 92592
Effective as of 01-JUL-22

WANG, XIUJIE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAR-20

**SURGERY GENERAL
VASCULAR**

GORSKI, YARA, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-AUG-16

GORSKI, YARA, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-JUN-15

GORSKI, YARA, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

GREWAL, PRABHJOT, MD†

Provider ID: N/A

27290 MADISON AVE STE 102
TEMECULA, CA 92590
Effective as of 01-NOV-20

GREWAL, PRABHJOT, MD†

Provider ID: N/A

27290 MADISON AVE STE 102
TEMECULA, CA 92590
Effective as of 01-JUN-20

KARMUR, AMIT, DO†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

KARMUR, AMIT, DO†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202

TEMECULA, CA 92592
Effective as of 01-MAY-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21

NAFIU, BOLAJI, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

TIU, BRIAN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22

TIU, BRIAN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

TIU, BRIAN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

WANG, XIUJIE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-OCT-20

WANG, XIUJIE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-OCT-20

WANG, XIUJIE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

SURGERY HAND

KIM, KEVIN, DO

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

KIM, KEVIN, DO

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

KIM, KEVIN, DO

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

KIM, KEVIN, DO

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

MONEYHON, MICHAEL, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

MONEYHON, MICHAEL, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

MONEYHON, MICHAEL, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

MONEYHON, MICHAEL, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

TRAN, TUAN, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

TRAN, TUAN, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-APR-23

TRAN, TUAN, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270

TEMECULA, CA 92590

Effective as of 01-APR-23

TRAN, TUAN, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-APR-23

SURGERY ORTHOPEDIC

ABITBOL, JEAN JACQUES, MD†

Provider ID: N/A

28975 OLD TOWN FRONT ST STE 200
TEMECULA, CA 92590
Effective as of 01-JUN-22

AMERI, BIJAN, DO

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

AMERI, BIJAN, DO

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

AMERI, BIJAN, DO

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

BIAMA, RICHARD, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590

Effective as of 01-FEB-23

BIAMA, RICHARD, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

BIAMA, RICHARD, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

BIAMA, RICHARD, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

ELLIS, JOHN, MD†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-SEP-22

ELLIS, JOHN, MD†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-JUL-23

ELLIS, JOHN, MD†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-JUN-21

FOSTER, ANDREW DAVID, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590

Effective as of 01-FEB-23

FOSTER, ANDREW DAVID, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590

Effective as of 01-FEB-23

FOSTER, ANDREW DAVID, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590

Effective as of 01-FEB-23

FOSTER, ANDREW DAVID, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590

Effective as of 01-FEB-23

FRENCH, MICHAEL, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-JUL-21

FRENCH, MICHAEL, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-JUL-23

FRENCH, MICHAEL, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-OCT-22

FRENCH, MICHAEL, DO†

Provider ID: N/A

40949 WINCHESTER RD

TEMECULA, CA 92591

Effective as of 01-DEC-22

KELLEY, STEVEN, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-DEC-22

KELLEY, STEVEN, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-DEC-22

KELLEY, STEVEN, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-JUN-21

KELLEY, STEVEN, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-JUL-23

LE, VU, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590

Effective as of 01-FEB-23

LE, VU, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590

Effective as of 01-FEB-23

LE, VU, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590
Effective as of 01-FEB-23

LE, VU, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

LIN, RICHARD, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-DEC-22

LIN, RICHARD, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-DEC-22

LUNA, MARIO, MD†

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590*
Effective as of 01-JUL-20

LUNA, MARIO, MD†

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-JUL-16

MARGER, MICHAEL, MD†

Provider ID: N/A

27455 TIERRA ALTA WAY
STE A
TEMECULA, CA 92590
Effective as of 01-SEP-22

MARGER, MICHAEL, MD†

Provider ID: N/A

27455 TIERRA ALTA WAY
STE A
TEMECULA, CA 92590
Effective as of 01-SEP-22

MARGER, MICHAEL, MD†

Provider ID: N/A

27455 TIERRA ALTA WAY
STE A
TEMECULA, CA 92590
Effective as of 01-SEP-22

RICHTER, ALEXANDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

RICHTER, ALEXANDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

RICHTER, ALEXANDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

RICHTER, ALEXANDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

ROBINSON, MATTHEW, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUL-22

ROBINSON, MATTHEW, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUL-22

ROBINSON, MATTHEW, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUN-21

ROBINSON, MATTHEW, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591*
Effective as of 01-JUL-23

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-MAR-23

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-MAR-23

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591*
Effective as of 01-JUN-23

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591*
Effective as of 01-JUN-23

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591*
Effective as of 01-JUN-23

ROSENBERG, GARY, DO

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

ROSENBERG, GARY, DO

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

ROSENBERG, GARY, DO

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

ROSENBERG, GARY, DO

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

ROWSHAN, KASRA, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

ROWSHAN, KASRA, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

ROWSHAN, KASRA, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

ROWSHAN, KASRA, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

SCHULTZEL, MARK, MD†

Provider ID: N/A

31170 TEMECULA PKWY
STE 100
TEMECULA, CA 92592

Teleservice

Effective as of 01-OCT-22

THOLCKE, LOREN, DO

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-AUG-23

THOLCKE, LOREN, DO

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JAN-24

THOLCKE, LOREN, DO

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JAN-24

UPPAL, GURVINDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590
Effective as of 01-FEB-23

UPPAL, GURVINDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

UPPAL, GURVINDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

SURGERY PLASTIC

CHAO, JAMES, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-APR-20

MUDGE, BRADLEY, MD†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Teleservice

Effective as of 01-OCT-19

MUDGE, BRADLEY, MD†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Teleservice

Effective as of 01-NOV-19

URIAS, DANIEL, MD

Provider ID: N/A

27699 JEFFERSON AVE STE

305
TEMECULA, CA 92590
Effective as of 01-OCT-23

URIAS, DANIEL, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590
Effective as of 01-OCT-23

URIAS, DANIEL, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590
Effective as of 01-OCT-23

URIAS, DANIEL, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590
Effective as of 01-OCT-23

VU, STEVE, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590
Effective as of 01-JUN-23

VU, STEVE, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590
Effective as of 01-JUN-23

SURGERY THORACIC

BANSAL, NEERAJ, MD

Provider ID: N/A

31573 RANCHO PUEBLO
RD STE 210

TEMECULA, CA 92592
Effective as of 01-MAY-23

BANSAL, NEERAJ, MD

Provider ID: N/A

31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592
Effective as of 01-APR-23

UROLOGY

CONNER, RICHARD, MD†

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 102B
TEMECULA, CA 92592
Effective as of 01-MAY-20

CRISELL, MONISHA, MD†

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 102B
TEMECULA, CA 92592
Effective as of 01-MAY-20

LUTTGE, SCOTT, MD

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 205
TEMECULA, CA 92592
Effective as of 01-MAY-23

TALANKI, VARUN, MD

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 102B
TEMECULA, CA 92592
Effective as of 01-MAY-22

TALANKI, VARUN, MD

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 102B
TEMECULA, CA 92592

Effective as of 01-MAY-22

FAMILY PRACTICE

RAY, ANNE, MD

Provider ID: N/A

31951 DOVE CANYON DR
TRABUCO CANYON, CA
92679
Effective as of 01-DEC-23

**CERTIFIED REGISTERED
NURSE MIDWIFE**

ALLEN, ANNE, CRNM†

Provider ID: N/A

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Effective as of 01-JUL-22

ONEILL, THERESE, CRNM

Provider ID: N/A

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Effective as of 01-NOV-23

FAMILY PRACTICE

CASTANER, ZALYA, MD†

Provider ID: N/A

28477 LIZARD ROCKS RD
VALLEY CENTER, CA
92082*
Teleservice
Effective as of 01-FEB-24

MCHENRY, KATHRYN, DO

Provider ID: N/A

28477 LIZARD ROCKS RD
VALLEY CENTER, CA
92082*
Effective as of 01-FEB-24

PATEL, JITENBHAI, MD

Provider ID: N/A

28477 LIZARD ROCKS RD
VALLEY CENTER, CA
92082*

Effective as of 01-FEB-24

PATEL, RAKESH, MD

Provider ID: N/A

28477 LIZARD ROCKS RD
VALLEY CENTER, CA
92082*

Effective as of 01-FEB-24

SCHULTZ, JAMES, MD

Provider ID: N/A

28477 LIZARD ROCKS RD
VALLEY CENTER, CA
92082*

Effective as of 01-FEB-24

PHYSICIANS ASSISTANT

AGUEY, OMAR, PA†

Provider ID: N/A

28477 LIZARD ROCKS RD
VALLEY CENTER, CA
92082*

Effective as of 01-FEB-24

AGUEY, OMAR, PA†

Provider ID: N/A

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Effective as of 01-DEC-20

WICKWARE, TRACY, PA

Provider ID: N/A

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Effective as of 01-MAY-23

ALLERGY IMMUNOLOGY

VOLPP, HEATHER, MD†

Provider ID: N/A

2067 W VISTA WAY

VISTA, CA 92083
Effective as of 01-JAN-24

VOLPP, HEATHER, MD†

Provider ID: N/A

2067 W VISTA WAY
VISTA, CA 92083

Effective as of 01-MAR-14

ZIERING, ROBERT, MD†

Provider ID: N/A

2067 W VISTA WAY STE 140
VISTA, CA 92083

Effective as of 01-JUL-01

ZIERING, ROBERT, MD†

Provider ID: N/A

2067 W VISTA WAY STE 140
VISTA, CA 92083

Effective as of 01-AUG-20

ZIERING, ROBERT, MD†

Provider ID: N/A

2067 W VISTA WAY STE 140
VISTA, CA 92083

Effective as of 01-SEP-22

ZIERING, ROBERT, MD†

Provider ID: N/A

2067 W VISTA WAY STE 140
VISTA, CA 92083

Effective as of 01-SEP-21

CARDIAC

ELECTROPHYSIOLOGY

BUI, HANH, MD

Provider ID: N/A

906 SYCAMORE AVE STE
104
VISTA, CA 92081

Teleservice

Effective as of 01-MAY-23

CARDIOLOGY

BUI, HANH, MD

Provider ID: N/A

906 SYCAMORE AVE STE
104
VISTA, CA 92081

Teleservice

Effective as of 01-JAN-24

DO, HULBERT, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

KABRA, ASHISH, MD

Provider ID: N/A

906 SYCAMORE AVE STE
104
VISTA, CA 92081

Effective as of 01-JAN-24

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

PARIKH, MILIND, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

**CARDIOVASCULAR
DISEASE**

BUI, HANH, MD

Provider ID: N/A

906 SYCAMORE AVE STE
104
VISTA, CA 92081

Teleservice

Effective as of 01-MAY-23

DO, HULBERT, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

DO, HULBERT, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-OCT-21

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-OCT-21

PARIKH, MILIND, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

PARKS, MONICA, MD

Provider ID: N/A

906 SYCAMORE AVE STE
104
VISTA, CA 92081

Teleservice

Effective as of 01-JAN-24

CERTIFIED

ACUPUNCTURIST

SCARLETT, YVONNE, LAC

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

SONG, CAROL, LAC

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

**CERTIFIED NURSE
PRACTITIONER**

ALVAREZ, LISA, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-OCT-21

ALVAREZ, LISA, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-OCT-21

ALVAREZ, LISA, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-SEP-22

BAEK, KILHYO, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-FEB-24

BAEK, KILHYO, NP

Provider ID: N/A

134 GRAPEVINE RD

VISTA, CA 92083

Effective as of 01-FEB-24

BAEZ, ELIZABETH, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

BATES, TYLER, NP

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084

Effective as of 01-MAR-23

BRAAMSE, CHLOE, NP

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084

Teleservice

Effective as of 01-JUN-23

CARDINELL, ANNA, NP†

Provider ID: N/A

910 SYCAMORE AVE STE
270
VISTA, CA 92081

Effective as of 01-AUG-22

CHAMBERLIN, KALIANA, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-21

CHATHAM, OLIVIA, NP†

Provider ID: N/A

950 CIVIC CENTER DR STE
A
VISTA, CA 92083

Teleservice

Effective as of 01-NOV-22

CHATHAM, OLIVIA, NP†

Provider ID: N/A

950 CIVIC CENTER DR STE
A
VISTA, CA 92083

Teleservice

Effective as of 01-MAY-21

CHILAKA, SAMUEL, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

CHILAKA, SAMUEL, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

CHRISTY, TYLER, NPF

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

CHRISTY, TYLER, NPF

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

CHRISTY, TYLER, NPF

Provider ID: N/A

105 DURIAN ST STE A
VISTA, CA 92083

Effective as of 01-JAN-24

CHRISTY, TYLER, NPF

Provider ID: N/A

517 N HORNE ST
VISTA, CA 92083

Effective as of 01-JAN-24

CLARK, CYNTHIA, NP†

Provider ID: N/A

134 GRAPEVINE RD

VISTA, CA 92083

Effective as of 01-JAN-21

CORY, ALLISON, NP

Provider ID: N/A

105 DURIAN ST STE B
VISTA, CA 92083

Effective as of 01-FEB-24

CORY, ALLISON, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-21

CORY, ALLISON, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

CROTTEAU, ALEX, NP

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084

Effective as of 01-MAY-21

**DEKKERS-O'HARE, INGRID,
NP†**

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-21

DO, JACKIE, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

EKLUND, BONNIE, NP†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

EKLUND, BONNIE, NP†

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

HALGEDAHL, YI, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

HALGEDAHL, YI, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-21

HOWELL, AMANDA, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

HOWELL, AMANDA, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

HOWELL, AMANDA, NP

Provider ID: N/A

105 DURIAN ST STE A
VISTA, CA 92083

Effective as of 01-JAN-24

JONES, STACY, NP

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084

Effective as of 01-MAY-21

KAYE, ALYSON, NP

Provider ID: N/A

105 DURIAN ST
VISTA, CA 92083
Effective as of 01-FEB-24

KAYE, ALYSON, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

KELLEHER, BRIDGET, NP

Provider ID: N/A

105 DURIAN ST STE B
VISTA, CA 92083
Effective as of 01-FEB-24

KESSLER, JENNIFER, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-DEC-23

KESSLER, JENNIFER, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-DEC-23

KORMANIK, PATRICIA, NP†

Provider ID: N/A

910 SYCAMORE AVE STE
102
VISTA, CA 92081
Effective as of 01-JUL-21

MERRITT, MARISA, NP

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084
Teleservice

Effective as of 01-AUG-22

NAVA, PETER, NP

Provider ID: N/A

134 GRAPEVINE RD

VISTA, CA 92083
Effective as of 01-JAN-24

NAVA, PETER, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

NICHOLAS, ESTELA, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-21

PATEMAN, CAROLYN, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-21

PATEMAN, CAROLYN, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

PRITZKER, JOELY, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-FEB-24

PRITZKER, JOELY, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-21

ROSS, BRIDGET, NPF

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084
Teleservice

Effective as of 01-DEC-21

SCHAEPE, RHODORA, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAR-24

SERRATO, ANTHONY, NP

Provider ID: N/A

906 SYCAMORE AVE STE
104
VISTA, CA 92081
Effective as of 01-MAY-23

SHAHBAZ, LINNAE, NPF

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAR-24

SRILASAK, MICHELE, NP†

Provider ID: N/A

910 SYCAMORE AVE STE
102
VISTA, CA 92081
Effective as of 01-JUL-21

TABARANZA, PHOEBE, NPF

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084
Teleservice

Effective as of 01-OCT-22

WAGNER, TASIA, NP

Provider ID: N/A

105 DURIAN ST
VISTA, CA 92083
Effective as of 01-FEB-24

WILLIAMS, JINA, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-SEP-22

WINDHAM, SUZONNE, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

WINDHAM, SUZONNE, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

YCASAS, EMILY, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

YCASAS, EMILY, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-MAY-23

YOUNG, JENNIFER, NPF

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-OCT-21

**CERTIFIED REGISTERED
NURSE MIDWIFE**

GUIDI, CASEY, CRNM

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUN-23

MATEO, MARIE, CRNM†

Provider ID: N/A

161 THUNDER DR STE 210
VISTA, CA 92083

Effective as of 01-JUL-22

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JUL-22

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

CHIROPRACTOR

CORTEZ, JAIME, DC†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-OCT-21

CORTEZ, JAIME, DC†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

JU, NATHANIEL, DC†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

JU, NATHANIEL, DC†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-OCT-21

JU, NATHANIEL, DC†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

JU, NATHANIEL, DC†

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JUL-22

JU, NATHANIEL, DC†

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

OLSON, ROBERT, DC

Provider ID: N/A

906 SYCAMORE AVE STE
210

VISTA, CA 92081

Effective as of 01-SEP-21

DERMATOLOGY

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1934 VIA CTR STE B
VISTA, CA 92081

Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1934 VIA CTR STE B
VISTA, CA 92081

Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1934 VIA CTR STE B
VISTA, CA 92081

Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1934 VIA CTR STE B
VISTA, CA 92081

Effective as of 01-JAN-24

HENDERSON, GREGORY, MD†

Provider ID: N/A

1934 VIA CTR STE B
VISTA, CA 92081

Effective as of 01-SEP-21

HENDERSON, GREGORY, MD†

Provider ID: N/A

2395 S MELROSE DR
VISTA, CA 92081

Effective as of 01-SEP-21

STEIN, ALEXANDER, MD

Provider ID: N/A

2067 W VISTA WAY
VISTA, CA 92083

Effective as of 01-JUL-23

FAMILY PRACTICE

DONNELL, MARTI, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*

Effective as of 01-NOV-23

DONNELL, MARTI, MD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083*

Effective as of 01-NOV-23

HIKES, RYAN, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-AUG-22

MARTINEZ, LESLY, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*

Effective as of 01-APR-23

MARTINEZ, LESLY, MD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083*

Effective as of 01-APR-23

PUDOL, CHRISTOPHER, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*

Teleservice

Effective as of 01-MAR-24

PUDOL, CHRISTOPHER, DO

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083*

Teleservice

Effective as of 01-MAR-24

TRAN, DAO, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-MAY-23

TRAN, DAO, DO

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-MAY-23

VIDAL, MONICA, DO†

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-AUG-22

VIDAL, MONICA, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-AUG-22

ZIMMERMAN, DAVID, MD

Provider ID: N/A

145 THUNDER DR
VISTA, CA 92083*

Effective as of 01-MAR-23

GENERAL PRACTICE

TANUS, DEBORAH, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*

Effective as of 01-NOV-23

WALKER, BRADLEY, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*

Effective as of 01-MAY-23

GYNECOLOGIC

ONCOLOGY

ESKANDER, RAMEZ, MD†

Provider ID: N/A

910 SYCAMORE AVE STE
102

VISTA, CA 92081

Effective as of 01-JUL-21

HEMATOLOGY /

ONCOLOGY

ANDREY, JEFFREY, MD†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-SEP-22

ANDREY, JEFFREY, MD†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083*
Effective as of 01-APR-23

BASERI, BABAK, MD†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083*
Effective as of 01-APR-23

BASERI, BABAK, MD†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-JUL-22

BASERI, BABAK, MD

Provider ID: N/A

1250 SUNSET DR STE 101
VISTA, CA 92081
Effective as of 01-APR-24

MARJON, PHILIP, MD†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083*
Effective as of 01-APR-23

MARJON, PHILIP, MD†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-JUL-22

PARSI, HOOMAN, MD

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-JUL-23

SARWARI, NAWID, MD

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-JUL-23

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-NOV-22

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083*
Effective as of 01-APR-23

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-JUL-23

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-SEP-22

SUBRAMANIAN, RUPA, MD†

Provider ID: N/A

910 SYCAMORE AVE STE
102
VISTA, CA 92081
Effective as of 01-AUG-20

**HOSPICE AND PALLIATIVE
MEDICINE**

RUBENSIK, TAMARA, MD†

Provider ID: N/A

910 SYCAMORE AVE STE
102

VISTA, CA 92081
Effective as of 01-JUL-21

HOSPITALIST MD/DO

LOPEZ, SANDRA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

INTERNAL MEDICINE

BAUTISTA, JENNIFER, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-FEB-23

CHEN, MAX, MD

Provider ID: N/A

105 DURIAN ST STE B
VISTA, CA 92083
Effective as of 01-NOV-23

**INTERVENTIONAL
CARDIOLOGY**

PARKS, MONICA, MD

Provider ID: N/A

906 SYCAMORE AVE STE
104
VISTA, CA 92081
Teleservice
Effective as of 01-OCT-23

**LICENSED CLINICAL
SOCIAL WORKER**

ACOSTA, AZUCENA, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Teleservice

Effective as of 01-JAN-24

ACOSTA, AZUCENA, LCSW

Provider ID: N/A

☞ 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

CRUZ, VANESSA, LCSW

Provider ID: N/A

☞ 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-21

CRUZ, VANESSA, LCSW

Provider ID: N/A

☞ 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUN-23

CRUZ, VANESSA, LCSW

Provider ID: N/A

☞ 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-21

**DOUGHERTY, CHRISTINE,
LCSW**

Provider ID: N/A

☞ 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

**DOUGHERTY, CHRISTINE,
LCSW**

Provider ID: N/A

☞ 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-FEB-24

**DOUGHERTY, CHRISTINE,
LCSW**

Provider ID: N/A

☞ 134 GRAPEVINE RD

VISTA, CA 92083

Effective as of 01-JAN-24

GODINEZ, BRENDA, LCSW

Provider ID: N/A

☞ 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

GODINEZ, BRENDA, LCSW

Provider ID: N/A

☞ 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

MENDEZ, ADRIANA, LCSW

Provider ID: N/A

☞ 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

MENDEZ, ADRIANA, LCSW

Provider ID: N/A

☞ 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW

Provider ID: N/A

☞ 1000 VALE TERRACE DR
VISTA, CA 92084

Teleservice

Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW

Provider ID: N/A

☞ 134 GRAPEVINE RD
VISTA, CA 92083

Teleservice

Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW

Provider ID: N/A

☞ 134 GRAPEVINE RD
VISTA, CA 92083

Teleservice

Effective as of 01-JUN-23

SANCHEZ, ADRIANA, LCSW

Provider ID: N/A

☞ 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

SANCHEZ, ADRIANA, LCSW

Provider ID: N/A

☞ 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

SMITH, SONYA, LCSW

Provider ID: N/A

☞ 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

SMITH, SONYA, LCSW

Provider ID: N/A

☞ 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

WILSON, CARLENE, LCSW

Provider ID: N/A

☞ 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

WILSON, CARLENE, LCSW

Provider ID: N/A

☞ 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUN-23

ZAPPONE, ALIDA, LCSW

Provider ID: N/A

☞ 1000 VALE TERRACE DR
VISTA, CA 92084

Teleservice

Effective as of 01-JAN-24

ZAPPONE, ALIDA, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Teleservice

Effective as of 01-JAN-24

**MARRIAGE FAMILY
THERAPIST**

GROVE, VICKI, MFT

Provider ID: N/A

2385 S MELROSE DR
VISTA, CA 92081

Effective as of 01-JAN-24

MEYERHOF, GRETA, MFT†

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

MEYERHOF, GRETA, MFT†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

**OBSTETRICS /
GYNECOLOGY**

ARRIETA, IRIS, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

ARRIETA, IRIS, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

ARRIETA, IRIS, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-OCT-21

BINDER, PRATIBHA, MD†

Provider ID: N/A

910 SYCAMORE AVE STE
102

VISTA, CA 92081

Effective as of 01-JUL-21

DIETERICH, FREDERICK, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

HAWKINS, MELISSA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

HAWKINS, MELISSA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

HAWKINS, MELISSA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-SEP-14

KARANIKKIS, CHRISTOS, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-OCT-21

KARANIKKIS, CHRISTOS, DO†

Provider ID: N/A

1000 VALE TERRACE DR

VISTA, CA 92084

Effective as of 01-MAR-18

KARANIKKIS, CHRISTOS, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

KARANIKKIS, CHRISTOS, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

LEON, JOSUE, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

LEON, JOSUE, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

LEON, JOSUE, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUN-21

LEONARD, LISA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-OCT-21

LEONARD, LISA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

LEONARD, LISA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

LOPEZ, SANDRA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*

Effective as of 01-APR-12

MAZAREI, RAHELE, DO

Provider ID: N/A

2067 W VISTA WAY STE 200
VISTA, CA 92083

Effective as of 01-JUN-23

POUNTNEY, MARLENE, MD†

Provider ID: N/A

161 THUNDER DR STE 210
VISTA, CA 92083

Effective as of 01-JUL-22

QUAN, MARIA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-MAR-23

QUAN, MARIA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

QUAN, MARIA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

SCHWEIKERT, SUZANNE, MD†

Provider ID: N/A

161 THUNDER DR STE 210

VISTA, CA 92083

Effective as of 01-JUL-22

SUNTAY, BERK, MD

Provider ID: N/A

2067 W VISTA WAY STE 200
VISTA, CA 92083

Effective as of 01-JUN-23

**OCCUPATIONAL
THERAPIST**

**CHAVEZ SERRANO, VIOLETA,
OT**

Provider ID: N/A

1840 WEST DR
VISTA, CA 92083

Effective as of 01-FEB-24

MCPHATTER, JASMINE, OT†

Provider ID: N/A

1840 WEST DR
VISTA, CA 92083

Teleservice

Effective as of 01-SEP-22

OPHTHALMOLOGY

AMINLARI, ARDALAN, MD

Provider ID: N/A

1930 VIA CENTRE DR
VISTA, CA 92081

Effective as of 01-SEP-21

CHEN, HEATHER, MD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Effective as of 01-SEP-21

CHEN, HEATHER, MD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Effective as of 01-FEB-21

CHEN, HEATHER, MD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Effective as of 01-NOV-21

JOHNSTON, ERIC, MD

Provider ID: N/A

1930 VIA CTR
VISTA, CA 92081

Effective as of 01-SEP-21

STEPHENS, BENJAMIN, MD

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Effective as of 01-JUN-23

STEPHENS, BENJAMIN, MD

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Effective as of 01-JUL-23

ZAVERI, MAULIK, MD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Effective as of 01-MAR-14

ZAVERI, MAULIK, MD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Effective as of 01-SEP-21

OPTOMETRIST

AZIMI, SHERRI, OD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Effective as of 01-JAN-21

BLOOMBERG, DAVID, OD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Effective as of 01-JAN-21

GARDNER, KRISTA, OD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Effective as of 01-JAN-21

GEE, JENNIFER, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-SEP-22

GEE, JENNIFER, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-SEP-22

GEE, JENNIFER, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JUL-22

GEE, JENNIFER, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-OCT-21

GEE, JENNIFER, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

KASAI, SARAH, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-DEC-23

KASAI, SARAH, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-DEC-23

KASAI, SARAH, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

KIM, MICHAEL, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

KIM, MICHAEL, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

KIM, MICHAEL, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Teleservice

Effective as of 01-JUL-22

KIM, MICHAEL, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Teleservice

Effective as of 01-JAN-21

KOUCHAK, YASMIN, OD†

Provider ID: N/A

2067 W VISTA WAY STE 120

VISTA, CA 92083

Teleservice

Effective as of 01-JUL-23

MORA, WENDY, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JUL-22

MORA, WENDY, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

MORA, WENDY, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Teleservice

Effective as of 01-JUL-22

MORA, WENDY, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Teleservice

Effective as of 01-JAN-21

RICH, RYAN, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-21

RICH, RYAN, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

RICH, RYAN, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

RICH, RYAN, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JUL-22

TAM, EMILY, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JUL-22

TAM, EMILY, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

TAM, EMILY, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-SEP-22

TAM, EMILY, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

TANG, ASHLEY, OD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083
Teleservice
Effective as of 01-NOV-21

TRAN, JESSICA, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-DEC-23

**OTOLARYNGOLOGY /
OTOLOGY /
LARYNGOLOGY /
RHINOLOGY**

BERRY, JULIE, MD†

Provider ID: N/A

2023 W VISTA WAY STE J
VISTA, CA 92083
Effective as of 01-AUG-06

KUSHNARYOV, ANTON, MD†

Provider ID: N/A

2023 W VISTA WAY STE J
VISTA, CA 92083
Effective as of 01-OCT-17

PEDIATRICS

KAISER, EMILY, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*
Effective as of 01-JAN-24

RONAN, KEVIN, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAY-23

RONAN, KEVIN, MD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-MAY-23

PHYSICIANS ASSISTANT

GLASSER, DANIEL, PA

Provider ID: N/A

1000 VALE TERRACE DR

VISTA, CA 92084
Effective as of 01-JUL-22

GLASSER, DANIEL, PA

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

KUPIS, ROBERT, PA

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

KUPIS, ROBERT, PA

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-SEP-22

LEPARD, KRISTINA, PA

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084
Teleservice
Effective as of 01-MAR-23

THEPVONGSA, MELISSA, PA

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-SEP-22

THEPVONGSA, MELISSA, PA

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

WALLACE, STEPHANIE, PA

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-21

WEAVER, APRIL, PA

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-OCT-21

WEAVER, APRIL, PA

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-OCT-21

PODIATRIST

MILLER, JULIE, DPM

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

MILLER, JULIE, DPM

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

MILLER, JULIE, DPM

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-FEB-24

**PREVENTATIVE MEDICINE
GENERAL**

DEPORTO, TANYA, MD

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084

Teleservice

Effective as of 01-MAY-21

PSYCHIATRY

BELL, JENNIFER, DO

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-FEB-24

BELL, JENNIFER, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-FEB-24

BELL, JENNIFER, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-FEB-24

BELL, JENNIFER, DO

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-FEB-24

CHRISTIANSON, WARREN, DO

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

134 GRAPEVINE RD

VISTA, CA 92083

Effective as of 01-AUG-21

PATEL, MITESH, MD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Teleservice

Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Teleservice

Effective as of 01-JAN-24

PSYCHOLOGIST

GUTIERREZ, VERONICA, PhD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-FEB-24

GUTIERREZ, VERONICA, PhD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-FEB-24

PUBLIC HEALTH

PREVENTATIVE MEDICINE

WALKER, BRADLEY, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-MAY-23

PULMONARY DISEASES

HSING, ANDREW, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-JAN-24

HSING, ANDREW, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-FEB-23

MAGANA, MARISA, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-FEB-24

PINO, ALEJANDRO, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-FEB-23

ZHANG, MICHELLE, MD

Provider ID: N/A

2067 W VISTA WAY STE D
VISTA, CA 92083

Effective as of 01-SEP-23

RADIOLOGY DIAGNOSTIC

PATEL, NIKHIL, MD

Provider ID: N/A

906 SYCAMORE AVE STE

100
VISTA, CA 92081
Effective as of 01-DEC-23

**REGISTERED PHYSICAL
THERAPIST**

AMBROSE, CHRISTOPHER, PT

Provider ID: N/A

2067 W VISTA WAY STE 185
VISTA, CA 92083

Effective as of 01-JAN-21

BARTOLAY, OLIVER, PT

Provider ID: N/A

1840 WEST DR
VISTA, CA 92083

Effective as of 01-JUL-23

BOUCHARD, REID, PT

Provider ID: N/A

1958 VIA CENTRE DR
VISTA, CA 92081

Effective as of 01-OCT-21

BOUTELLE, DAVID, PT

Provider ID: N/A

2067 W VISTA WAY STE 185
VISTA, CA 92083

Effective as of 01-FEB-24

BOUTELLE, BARBARA, PT

Provider ID: N/A

2067 W VISTA WAY STE 185
VISTA, CA 92083

Effective as of 01-JAN-24

DOULL, MATTHEW, PT

Provider ID: N/A

1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-JUN-23

GARBER, MARC, PT

Provider ID: N/A

1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-OCT-21

PENNINGTON, JENNIFER, PT

Provider ID: N/A

1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-OCT-21

TAMAYO, SYDNIE, PT

Provider ID: N/A

1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-OCT-23

WILSON, JENNIFER, PT

Provider ID: N/A

1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-OCT-21

RHEUMATOLOGY

ANSARI, RASHAD, MD†

Provider ID: N/A

2023 W VISTA WAY STE J
VISTA, CA 92083

Effective as of 01-SEP-21

ANSARI, RASHAD, MD†

Provider ID: N/A

2023 W VISTA WAY STE J
VISTA, CA 92083

Effective as of 01-JUL-22

BEJKO, ETELEVA, MD†

Provider ID: N/A

2023 W VISTA WAY STE H

VISTA, CA 92083
Teleservice
Effective as of 01-DEC-21

BEJKO, ETEVA, MD†

Provider ID: N/A
2023 W VISTA WAY STE H
VISTA, CA 92083
Teleservice
Effective as of 01-JUL-21

BRION, PAUL, MD†

Provider ID: N/A
2023 W VISTA WAY STE H
VISTA, CA 92083
Effective as of 01-JUL-21

BRION, PAUL, MD†

Provider ID: N/A
2023 W VISTA WAY STE H
VISTA, CA 92083
Effective as of 01-SEP-21

SURGERY GENERAL

ARMANI, AVA, MD†

Provider ID: N/A
910 SYCAMORE AVE STE
102
VISTA, CA 92081
Effective as of 01-JUL-21

GROVE, JAY, MD†

Provider ID: N/A
2385 S MELROSE DR
VISTA, CA 92081
Effective as of 01-JAN-21

GROVE, JAY, MD†

Provider ID: N/A
2385 S MELROSE DR
VISTA, CA 92081
Effective as of 01-SEP-21

GROVE, JAY, MD†

Provider ID: N/A
2385 S MELROSE DR
VISTA, CA 92081
Effective as of 01-DEC-14

HANNA, KAREN, MD†

Provider ID: N/A
2385 S MELROSE DR
VISTA, CA 92081
Teleservice
Effective as of 01-DEC-14

HANNA, KAREN, MD†

Provider ID: N/A
2385 S MELROSE DR
VISTA, CA 92081
Teleservice
Effective as of 01-JAN-21

**SURGERY GENERAL
VASCULAR**

BUNKE, NISHA, MD

Provider ID: N/A
906 SYCAMORE AVE STE
100
VISTA, CA 92081
Teleservice
Effective as of 01-JUN-23

SURGERY

NEUROLOGICAL

STERN, MARK, MD

Provider ID: N/A
326 S MELROSE DR STE
200
VISTA, CA 92081
Effective as of 01-SEP-23

SURGERY THORACIC

GREWAL, NAVROSE, MD†

Provider ID: N/A

161 THUNDER DR
VISTA, CA 92083
Effective as of 01-DEC-21

ANESTHESIOLOGY

KRAUSE, MARTIN, MD†

Provider ID: N/A
36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-FEB-22

ANESTHESIOLOGY

CRITICAL CARE MEDICINE

**RODRIGUEZ-MINETTE,
JESSICA, MD†**

Provider ID: N/A
36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-JAN-21

**CERTIFIED NURSE
PRACTITIONER**

IHEMEDU, AMARACHI, NPF

Provider ID: N/A
36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-JAN-23

IHEMEDU, AMARACHI, NPF

Provider ID: N/A
36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-JAN-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A
36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595

Effective as of 01-APR-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595

Effective as of 01-APR-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595

Effective as of 01-APR-23

ONUOHA, NOJA, NP†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595*

Effective as of 01-NOV-22

ONUOHA, NOJA, NP†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595*

Effective as of 01-NOV-22

THOMAS, STEPHEN, NPF†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595

Effective as of 01-MAR-21

CHIROPRACTOR

ADAMS, CONRAD, LAC

Provider ID: N/A

32475 CLINTON KEITH RD
STE 108

WILDOMAR, CA 92595

Effective as of 01-MAR-23

GASTROENTEROLOGY

CHANGCHIEN, ERIC, MD†

Provider ID: N/A

36243 INLAND VALLEY DR
STE 280

WILDOMAR, CA 92595

Effective as of 01-MAR-19

INTERNAL MEDICINE

CHANG, DAVID, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595

Effective as of 01-MAR-19

CHANG, DAVID, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595

Effective as of 01-MAY-15

NANDI, SHANKHA, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595

Effective as of 01-JUN-15

NANDI, SHANKHA, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595

Effective as of 01-JUN-15

WANG, WENG-LIH, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595

Effective as of 01-OCT-19

YU, JERRY, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595

Effective as of 01-MAR-21

YU, JERRY, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595

Effective as of 01-MAR-19

YU, JERRY, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595

Effective as of 01-DEC-23

YU, JERRY, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595

Effective as of 01-DEC-23

YU, JERRY, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595

Effective as of 01-DEC-23

YU, JERRY, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595

Effective as of 01-DEC-23

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

JAFFE, GILAD, MD

Provider ID: N/A

36485 INLAND VALLEY DR
WILDOMAR, CA 92595

Effective as of 01-SEP-23

PATEL, SAGAR, MD†

Provider ID: N/A

36485 INLAND VALLEY DR
WILDOMAR, CA 92595

Effective as of 01-AUG-21

**LICENSED CLINICAL
SOCIAL WORKER**

JONES, VALORIA, LCSW†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595

Effective as of 01-JAN-23

JONES, VALORIA, LCSW†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595

Effective as of 01-JUL-23

JONES, VALORIA, LCSW†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595

Effective as of 01-JUL-23

JONES, VALORIA, LCSW†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595

Effective as of 01-JUL-23

NEPHROLOGY

CHANG, DAVID, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595

Effective as of 01-DEC-23

CHANG, DAVID, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595

Effective as of 01-DEC-23

CHANG, DAVID, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595

Effective as of 01-DEC-23

CHANG, DAVID, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595

Effective as of 01-DEC-23

CHANG, DAVID, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595

Effective as of 01-DEC-23

CHANG, DAVID, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595

Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595

Effective as of 01-MAY-23

CHANG, DAVID, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595

Effective as of 01-MAY-09

CHANG, DAVID, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595

Effective as of 01-MAY-15

LAC, PETER, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595

Effective as of 01-NOV-16

LAC, PETER, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595

Effective as of 01-NOV-19

LAC, PETER, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595

Effective as of 01-MAR-21

LAC, PETER, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595

Effective as of 01-JUL-23

LAC, PETER, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595

Effective as of 01-DEC-23

LAC, PETER, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595

Effective as of 01-DEC-23

LAC, PETER, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595

Effective as of 01-DEC-23

LAC, PETER, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595

Effective as of 01-DEC-23

LAC, PETER, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595

Effective as of 01-DEC-23

LAC, PETER, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595

Effective as of 01-DEC-23

NANDI, SHANKHA, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595

Effective as of 01-AUG-20

NANDI, SHANKHA, DO

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595

Effective as of 01-DEC-23

NANDI, SHANKHA, DO

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595

Effective as of 01-DEC-23

NANDI, SHANKHA, DO

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595

Effective as of 01-DEC-23

NANDI, SHANKHA, DO

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595

Effective as of 01-DEC-23

NANDI, SHANKHA, DO

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595

Effective as of 01-DEC-23

NANDI, SHANKHA, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595

Effective as of 01-JUN-15

NANDI, SHANKHA, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595

Effective as of 01-JUN-15

NANDI, SHANKHA, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595

Effective as of 01-JUN-15

NANDI, SHANKHA, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595

Effective as of 01-MAR-21

NANDI, SHANKHA, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595

Effective as of 01-MAR-19

NANDI, SHANKHA, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595

Effective as of 01-JUN-23

NANDI, SHANKHA, DO

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595

Effective as of 01-DEC-23

WANG, WENG-LIH, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAR-21

WANG, WENG-LIH, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-JAN-20

WANG, WENG-LIH, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAY-15

WANG, WENG-LIH, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAY-15

WANG, WENG-LIH, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAY-09

WANG, WENG-LIH, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

WANG, WENG-LIH, MD

Provider ID: N/A

36320 INLAND VALLEY DR

STE 307

WILDOMAR, CA 92595

Effective as of 01-DEC-23

WANG, WENG-LIH, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

YU, JERRY, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

YU, JERRY, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

PSYCHIATRY

JAKKULA, JAGAN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-JUL-22

JAKKULA, JAGAN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-NOV-23

JAKKULA, JAGAN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595

Effective as of 01-NOV-23

JAKKULA, JAGAN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-JUL-22

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-JUL-22

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-OCT-23

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-JUL-22

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-OCT-23

KUNAM, SYAM, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-NOV-23

KUNAM, SYAM, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-JUN-23

KUNAM, SYAM, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-NOV-23

KUNAM, SYAM, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-JUN-23

**PUCHAKAYALA, NANDITA,
MD†**

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-SEP-23

**PUCHAKAYALA, NANDITA,
MD†**

Provider ID: N/A

36320 INLAND VALLEY DR
STE 300
WILDOMAR, CA 92595
Effective as of 01-AUG-22

**PUCHAKAYALA, NANDITA,
MD†**

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-AUG-22

**PUCHAKAYALA, NANDITA,
MD†**

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-SEP-23

**PUCHAKAYALA, NANDITA,
MD†**

Provider ID: N/A

36320 INLAND VALLEY DR
STE 300
WILDOMAR, CA 92595
Effective as of 01-AUG-22

**PUCHAKAYALA, NANDITA,
MD†**

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-AUG-22

PULMONARY DISEASES

KUMAR, AVNEE, MD

Provider ID: N/A

36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-JUL-23

SURI, RAJAT, MD†

Provider ID: N/A

36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-AUG-21

RADIATION ONCOLOGY

CHUNG, ARTHUR, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207

WILDOMAR, CA 92595
Effective as of 01-SEP-23

CHUNG, ARTHUR, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-JUN-23

CHUNG, ARTHUR, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-JUN-23

KANG, JOSEPH, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-JUN-23

KANG, JOSEPH, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-DEC-23

KANG, JOSEPH, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-JUN-23

KANG, JOSEPH, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-JUL-23

LAWRENSON, LESLEY, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-NOV-23

MASON, JAMES, MD†

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAR-10

MASON, JAMES, MD†

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-14

MASON, JAMES, MD†

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-14

MASON, JAMES, MD†

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-14

MERLO, CLIFFORD, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-JUN-23

MERLO, CLIFFORD, MD

Provider ID: N/A

36320 INLAND VALLEY DR

STE 207

WILDOMAR, CA 92595

Effective as of 01-JUN-23

RHA, JANICE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 105
WILDOMAR, CA 92595
Effective as of 01-MAR-19

RHA, JANICE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 105
WILDOMAR, CA 92595
Effective as of 01-AUG-23

SUN, JASON, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-JUL-23

SUN, JASON, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-JUN-23

SUN, JASON, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-NOV-23

**REGISTERED DIETITIAN /
NUTRITIONIST**

ATTOBRA, TATIANA, RD

Provider ID: N/A

36320 INLAND VALLEY DR

STE 301

WILDOMAR, CA 92595

Effective as of 01-DEC-22

**REGISTERED PHYSICAL
THERAPIST**

ALY, DILYANA, PT†

Provider ID: N/A

36243 INLAND VALLEY DR
STE 110
WILDOMAR, CA 92595
Effective as of 01-JUL-19

ALY, DILYANA, PT†

Provider ID: N/A

36243 INLAND VALLEY DR
STE 110
WILDOMAR, CA 92595
Effective as of 01-JUL-19

CASTELLON, SHAWN, PT

Provider ID: N/A

32246 CLINTON KEITH RD
STE 103
WILDOMAR, CA 92595
Effective as of 01-JUL-23

CASTELLON, SHAWN, PT

Provider ID: N/A

32246 CLINTON KEITH RD
STE 103
WILDOMAR, CA 92595
Effective as of 01-JUL-23

TSAI, CHIAHONG, PT

Provider ID: N/A

32246 CLINTON KEITH RD
STE 103
WILDOMAR, CA 92595
Effective as of 01-NOV-23

TSAI, CHIAHONG, PT

Provider ID: N/A

32246 CLINTON KEITH RD

STE 103
WILDOMAR, CA 92595
Effective as of 01-NOV-23

SPEECH PATHOLOGIST

WIRTH, LAURA, SP

Provider ID: N/A
36330 HIDDEN SPRINGS
RD STE E
WILDOMAR, CA 92595
Effective as of 01-JUN-22

WIRTH, LAURA, SP

Provider ID: N/A
36330 HIDDEN SPRINGS
RD STE E
WILDOMAR, CA 92595
Effective as of 01-JUN-22

**SURGERY COLON
SURGERY**

GORSKI, TITO, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAR-19

GORSKI, TITO, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAY-22

GORSKI, TITO, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

GORSKI, TITO, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

SURGERY GENERAL

AHMED, MOHAMED, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-OCT-22

AHMED, MOHAMED, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-23

AHMED, MOHAMED, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-23

ATCHISON, MARVIN, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-JUL-21

ATCHISON, MARVIN, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-JUL-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-JUL-21

ATCHISON, MARVIN, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

ATCHISON, MARVIN, MD†

Provider ID: N/A
31537 RANCHO PUEBLO
RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-SEP-22

ATCHISON, MARVIN, MD†

Provider ID: N/A
31537 RANCHO PUEBLO
RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-MAY-22

ATCHISON, MARVIN, MD†

Provider ID: N/A
31537 RANCHO PUEBLO
RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-JUL-21

ATCHISON, MARVIN, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-SEP-22

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-MAR-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-APR-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-DEC-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-DEC-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-DEC-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-DEC-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAR-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAR-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-APR-20

BARRERA, KAYLENE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-APR-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAY-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-MAY-22

CORDERO, RAYMUND, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

CORDERO, RAYMUND, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22

CORDERO, RAYMUND, MD†

Provider ID: N/A

36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-FEB-21

CORDERO, RAYMUND, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAR-19

DADA, STEPHEN, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAR-24

DADA, STEPHEN, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-DEC-23

DADA, STEPHEN, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-DEC-23

DADA, STEPHEN, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-NOV-23

DEARING, DAVID, MD†

Provider ID: N/A

36243 INLAND VALLEY DR
STE 280
WILDOMAR, CA 92595
Effective as of 01-DEC-12

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-APR-22

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595

Effective as of 01-SEP-16

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

GORSKI, YARA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22

GORSKI, YARA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

GORSKI, TITO, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22

GORSKI, TITO, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-DEC-23

GORSKI, TITO, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-DEC-23

HUSTED, JOHN, MD†

Provider ID: N/A

36243 INLAND VALLEY DR
STE 280
WILDOMAR, CA 92595
Effective as of 01-MAR-13

JOHNSEN, HEGE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAR-19

JOHNSEN, HEGE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR

STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

JOHNSEN, HEGE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

JOHNSEN, HEGE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-DEC-17

JOHNSEN, HEGE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-APR-22

KARMUR, AMIT, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-DEC-23

KARMUR, AMIT, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-JAN-22

KARMUR, AMIT, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22

LEE, JENNY, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAR-19

MAC, OLIVIA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAR-23

MAC, OLIVIA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAR-23

MAC, OLIVIA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-APR-23

MAC, OLIVIA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-DEC-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-DEC-19

NAFIU, BOLAJI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-APR-20

NAFIU, BOLAJI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-JAN-20

NAFIU, BOLAJI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22

NOURI, SARVENAZ, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-JAN-23

NOURI, SARVENAZ, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-JAN-23

NOURI, SARVENAZ, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-NOV-22

NOURI, SARVENAZ, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-NOV-22

NOURI, SARVENAZ, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-FEB-23

TIU, BRIAN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-AUG-18

TIU, BRIAN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-SEP-22

WANG, XIUJIE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-SEP-19

WANG, XIUJIE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-DEC-21

WANG, XIUJIE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-MAR-20

**SURGERY GENERAL
VASCULAR**

GORSKI, YARA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-MAY-22

GORSKI, YARA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-SEP-16

GORSKI, YARA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-SEP-16

GORSKI, YARA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-MAR-19

GORSKI, YARA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-MAY-22

KARMUR, AMIT, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-MAY-22

KARMUR, AMIT, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-MAY-22

KARMUR, AMIT, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-JAN-22

KARMUR, AMIT, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-JUL-22

KARMUR, AMIT, DO†

Provider ID: N/A

31537 INLAND VALLEY DR,
STE 202
WILDOMAR, CA 92595

Effective as of 01-JAN-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-DEC-21

NAFIU, BOLAJI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-MAY-22

TIU, BRIAN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-MAY-22

TIU, BRIAN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-MAR-19

TIU, BRIAN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-MAY-19

TIU, BRIAN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-MAY-22

TIU, BRIAN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-APR-22

TIU, BRIAN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-APR-22

WANG, XIUJIE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-OCT-20

WANG, XIUJIE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-OCT-20

WANG, XIUJIE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-MAY-22

CAPISTRANO BEACH CARE CENTER

35410 DEL REY
CAPISTRANO BEACH, CA
92624
(949) 496-5786
Effective as of 01-AUG-14

CAPISTRANO BEACH EXTENDED CARE AND LIVING CTR

35410 DEL REY
CAPISTRANO BEACH, CA
92624
(949) 496-5786
Effective as of 01-JAN-12

BAYSHIRE CARLSBAD

3140 EL CAMINO REAL
CARLSBAD, CA 92008
(760) 720-9898
Effective as of 01-JUL-22

LAS VILLAS DE CARLSBAD OPERATIONS LLC

1088 LAGUNA DR
CARLSBAD, CA 92008
(760) 434-7116
Effective as of 01-FEB-13

SOUTH BAY POST ACUTE CARE

553 F ST
CHULA VISTA, CA 91910
(619) 426-8611
Effective as of 01-NOV-19

AVOCADO POST ACUTE

510 E WASHINGTON AVE
EL CAJON, CA 92020
(619) 440-1211
Effective as of 01-JAN-20

BRADLEY COURT SPECIAL CARE CENTER

675 E BRADLEY AVE
EL CAJON, CA 92021
(619) 448-6633
Effective as of 01-DEC-21

COTTONWOOD CANYON HEALTHCARE CENTER

1391 E MADISON AVE
EL CAJON, CA 92021
(619) 444-1107
Effective as of 01-OCT-11

COUNTRY HILLS POST ACUTE

1580 BROADWAY
EL CAJON, CA 92021
(619) 441-8745
Effective as of 15-NOV-20

MAGNOLIA POST ACUTE CARE

635 S MAGNOLIA AVE
EL CAJON, CA 92020
(616) 442-8826
Effective as of 01-NOV-19

MAGNOLIA SPECIAL CARE CENTER

635 S MAGNOLIA AVE
EL CAJON, CA 92020
(619) 442-8826
Effective as of 01-JAN-12

MAGNOLIA SPECIAL CARE CTR

635 S MAGNOLIA AVE
EL CAJON, CA 92020
(619) 442-8826
Effective as of 01-JAN-12

PARKSIDE HEALTH AND WELLNESS CENTER

444 W LEXINGTON AVE
EL CAJON, CA 92020
(619) 442-7744
Effective as of 01-NOV-19

PARKSIDE SPECIAL CARE

CENTER

444 W LEXINGTON AVE
EL CAJON, CA 92020
(619) 442-7744
Effective as of 01-JAN-12

SAN DIEGO POST ACUTE CENTER

1201 S ORANGE AVE
EL CAJON, CA 92020
(619) 441-1988
Effective as of 01-SEP-14

SOMERSET SUBACUTE AND CARE

151 CLAYDELLE AVE
EL CAJON, CA 92020
(619) 442-0245
Effective as of 01-NOV-19

VICTORIA POST ACUTE CARE

654 S ANZA ST
EL CAJON, CA 92020
(619) 440-5005
Effective as of 01-NOV-19

VICTORIA SPECIAL CARE CTR

654 S ANZA ST
EL CAJON, CA 92020
(619) 440-5005
Effective as of 01-JAN-12

VILLA LAS PALMAS HEALTHCARE CTR

622 S ANZA ST
EL CAJON, CA 92020
(619) 442-0544
Effective as of 01-OCT-11

AVIARA HEALTHCARE CENTER

944 REGAL RD
ENCINITAS, CA 92024
(760) 944-0331
Effective as of 01-OCT-11

ENCINITAS NURSING AND

REHAB CTR

900 SANTA FE DR
ENCINITAS, CA 92024
(760) 753-6423
Effective as of 01-DEC-12

ESCONDIDO CARE CENTER

421 E MISSION AVE
ESCONDIDO, CA 92025
(760) 747-0430
Effective as of 01-MAY-13

**LIFE CARE CENTER OF
ESCONDIDO**

1980 FELICITA RD
ESCONDIDO, CA 92025
(760) 741-6109
Effective as of 01-JAN-12

PALOMAR HEIGHTS CARE CTR

1260 E OHIO AVE
ESCONDIDO, CA 92027
(760) 746-1100
Effective as of 01-JAN-12

**PALOMAR VISTA
HEALTHCARE CTR**

201 N FIG ST
ESCONDIDO, CA 92025
(760) 746-0303
Effective as of 01-NOV-11

REDWOOD TERRACE

710 W 13TH AVE
ESCONDIDO, CA 92025
(760) 291-2736
Effective as of 01-NOV-17

VALLE VISTA POST ACUTE

1025 W 2ND AVE
ESCONDIDO, CA 92025
(760) 745-1842
Effective as of 01-DEC-12

**FALLBROOK SKILLED
NURSING**

325 POTTER ST
FALLBROOK, CA 92028
(760) 728-2330
Effective as of 01-FEB-20

DEVONSHIRE CARE CENTER

1350 E DEVONSHIRE AVE
HEMET, CA 92544
(951) 925-2571
Effective as of 01-JAN-12

**HEMET GLOBAL MEDICAL
CENTER**

1117 E DEVONSHIRE AVE
HEMET, CA 92543
(951) 652-2811
Effective as of 01-JAN-20

MANORCARE HEALTH

SERVICES HEMET

1717 W STETSON AVE
HEMET, CA 92545
(951) 925-9171
Effective as of 01-JAN-12

**RAMONA REHAB AND POST
ACUTE CTR**

485 W JOHNSTON AVE
HEMET, CA 92543
(951) 652-0011
Effective as of 15-APR-19

SAN JACINTO HEALTHCARE

275 N SAN JACINTO ST
HEMET, CA 92543
(951) 658-9441
Effective as of 01-MAR-13

**THE VILLAGE HEALTHCARE
CENTER**

2400 W ACACIA AVE
HEMET, CA 92545
(951) 766-5116
Effective as of 01-JAN-12

LA JOLLA NURSING AND

REHAB CTR

2552 TORREY PINES RD
LA JOLLA, CA 92037
(858) 453-5810
Effective as of 01-DEC-12

THE COVE AT LA JOLLA

7160 FAY AVE
LA JOLLA, CA 92037
(858) 459-4361
Effective as of 01-NOV-19

**ARBOR HILLS NURSING
CENTER**

7800 PARKWAY DR
LA MESA, CA 91942
(619) 460-2330
Effective as of 01-DEC-20

COMMUNITY CARE CENTER

8665 LA MESA BLVD
LA MESA, CA 91942
(619) 465-0702
Effective as of 01-APR-16

**COUNTRY MANOR LA MESA
HEALTHCARE CENTER**

5696 LAKE MURRAY BLVD
LA MESA, CA 91942
(619) 460-7871
Effective as of 01-AUG-14

**GROSSMONT POST ACUTE
CARE**

8787 CENTER DR
LA MESA, CA 91942
(619) 460-4444
Effective as of 01-NOV-19

LA MESA HEALTHCARE CTR

3780 MASSACHUSETTS
AVE
LA MESA, CA 91941
(619) 465-1313
Effective as of 01-OCT-11

PARKWAY HILLS NURSING & REHAB

7760 PARKWAY DR
LA MESA, CA 91942
(619) 469-0124
Effective as of 01-APR-20

LAGUNA HILLS HEALTH AND REHAB CTR

24452 HEALTH CENTER DR
LAGUNA HILLS, CA 92653
(949) 837-8000
Effective as of 01-APR-18

PALM TERRACE HLTHCARE AND REHAB CTR

24962 CALLE ARAGON
LAGUNA WOODS, CA 92637
(949) 587-9000
Effective as of 01-NOV-11

FREEDOM VILLAGE HEALTHCARE CTR

23442 EL TORO RD
LAKE FOREST, CA 92630
(949) 472-8353
Effective as of 01-JAN-12

LAKE FOREST NURSING CENTER

25652 OLD TRABUCO RD
LAKE FOREST, CA 92630
(949) 380-9380
Effective as of 01-JAN-12

BELLA VISTA HEALTH CENTER

7922 PALM ST
LEMON GROVE, CA 91945
(619) 644-1000
Effective as of 01-SEP-13

LEMON GROVE CARE AND REHAB CTR

8351 BROADWAY

LEMON GROVE, CA 91945
(619) 463-0294
Effective as of 01-NOV-11

MURRIETA HEALTH AND REHABILITATION CENTER

24100 MONROE AVE
MURRIETA, CA 92562
(951) 600-4640
Effective as of 01-JAN-12

CASTLE MANOR NURSING AND REHABILITATION CTR

541 S V AVE
NATIONAL CITY, CA 91950
(619) 791-7900
Effective as of 01-DEC-20

FRIENDSHIP MANOR NURSING AND REHABILITATION CTR

902 EUCLID AVE
NATIONAL CITY, CA 91950
(619) 791-7700
Effective as of 01-DEC-20

PARADISE VALLEY HEALTH CARE CENTER

2575 E 8TH ST
NATIONAL CITY, CA 91950
(619) 470-6700
Effective as of 01-OCT-20

WINDSOR GARDENS CONV CTR OF SAN DIEGO

220 E 24TH ST
NATIONAL CITY, CA 91950
(619) 474-6741
Effective as of 01-JAN-12

LA PALOMA HEALTHCARE CTR

3232 THUNDER DR
OCEANSIDE, CA 92056
(760) 724-2193
Effective as of 01-OCT-11

BOULDER CREEK POST ACUTE

12696 MONTE VISTA RD
POWAY, CA 92064
(858) 487-6242
Effective as of 01-APR-20

POWAY HEALTHCARE CENTER

15632 POMERADO RD
POWAY, CA 92064
(858) 485-5153
Effective as of 01-OCT-11

THE VILLAS AT POWAY

15615 POMERADO RD
POWAY, CA 92064
(858) 613-4545
Effective as of 01-JAN-12

VILLA MONTE VISTA

12696 MONTE VISTA RD
POWAY, CA 92064
(858) 487-6242
Effective as of 01-JAN-12

ARROYO VISTA NURSING CTR

3022 45TH ST
SAN DIEGO, CA 92105
(619) 283-5855
Effective as of 01-NOV-11

BRIGHTON PLACE SAN DIEGO

1350 EUCLID AVE
SAN DIEGO, CA 92105
(619) 263-2166
Effective as of 01-JAN-12

CARMEL MOUNTAIN REHAB AND HEALTHCARE CTR

11895 AVENUE OF INDUSTRY
SAN DIEGO, CA 92128
(858) 673-0101
Effective as of 01-NOV-11

CLAIREMONT HEALTHCARE AND WELLNESS CENTER LLC

8060 FROST ST
SAN DIEGO, CA 92123
(858) 278-4750
Effective as of 01-NOV-17

GOLDEN HILL POST ACUTE

1201 34TH ST
SAN DIEGO, CA 92102
(619) 232-2946
Effective as of 01-MAY-23

JACOB HEALTH CARE CENTER LLC

4075 54TH ST
SAN DIEGO, CA 92105
(619) 582-5168
Effective as of 01-APR-16

KEARNY MESA CONVALESCENT AND NURSING HOME

7675 FAMILY CIR
SAN DIEGO, CA 92111
(858) 278-8121
Effective as of 01-DEC-20

MISSION HILLS POST ACUTE CARE

3680 REYNARD WAY
SAN DIEGO, CA 92103
(619) 297-4484
Effective as of 01-NOV-19

POINT LOMA CONVALESCENT HSP

3232 DUKE ST
SAN DIEGO, CA 92110
(619) 224-4141
Effective as of 01-JAN-12

REO VISTA HEALTHCARE CTR

6061 BANBURY ST
SAN DIEGO, CA 92139

(619) 475-2211
Effective as of 01-OCT-11

ST PAULS HEALTH CARE CENTER

235 NUTMEG ST
SAN DIEGO, CA 92103
(619) 677-3895
Effective as of 01-JAN-18

THE SHORES POST ACUTE

2828 MEADOW LARK DR
SAN DIEGO, CA 92123
(858) 277-6460
Effective as of 01-OCT-13

THE SPRINGS AT PACIFIC REGENT

3884 NOBEL DR
SAN DIEGO, CA 92122
(858) 625-8700
Effective as of 01-NOV-11

TORREY PINES SENIOR LIVING

13101 HARTFIELD AVE
SAN DIEGO, CA 92130
(858) 259-2222
Effective as of 01-JUN-16

UNIVERSITY CARE CENTER

5602 UNIVERSITY AVE
SAN DIEGO, CA 92105
(619) 583-1993
Effective as of 01-OCT-11

VILLA RANCHO BERNARDO CARE CENTER

15720 BERNARDO CENTER DR
SAN DIEGO, CA 92127
(858) 672-3900
Effective as of 01-JAN-12

WINDSOR GARDENS CONV AND REHAB OF GOLDEN HILL

1201 34TH ST
SAN DIEGO, CA 92102
(619) 232-2946
Effective as of 01-JAN-12

BROOKDALE SAN JUAN CAPISTRANO

31741 RANCHO VIEJO RD
SAN JUAN CAPISTRANO, CA 92675
(949) 248-8855
Effective as of 01-JUN-16

STANFORD COURT SKILLED NURSING AND REHAB CENTER

8778 CUYAMACA ST
SANTEE, CA 92071
(619) 449-5555
Effective as of 01-DEC-20

BRIGHTON PLACE EAST

8625 LAMAR ST
SPRING VALLEY, CA 91977
(619) 461-3222
Effective as of 01-JAN-12

BRIGHTON PLACE SPRING VALLEY


9009 CAMPO RD
SPRING VALLEY, CA 91977
(619) 460-2711
Effective as of 01-JAN-12

SUN CITY CONVALESCENT CENTER



27600 ENCANTO DR
SUN CITY, CA 92586
(951) 679-6858
Effective as of 01-JAN-12

TEMECULA HEALTHCARE CENTER



44280 CAMPANULA WAY
TEMECULA, CA 92592

 (951) 466-0200
Effective as of 02-MAR-22



LA FUENTE POST ACUTE

 247 E BOBIER DR
VISTA, CA 92084
 (760) 945-3033
Effective as of 01-DEC-21



LIFE CARE CENTER OF VISTA

 304 N MELROSE DR
VISTA, CA 92083
 (760) 724-8222
Effective as of 01-JAN-12



RANCHO VISTA

 760 E BOBIER DR
VISTA, CA 92084
 (760) 941-1480
Effective as of 01-FEB-13

VISTA HEALTHCARE CENTER

 247 E BOBIER DR
VISTA, CA 92084
 (760) 945-3033
Effective as of 01-OCT-13

**VISTA KNOLL SPECIALIZED
CARE FACILITY**

 2000 WESTWOOD RD
VISTA, CA 92083
 (760) 630-2273
Effective as of 01-NOV-11

ALPINE

**SAN YSIDRO HEALTH ALPINE
 FAMILY MEDICINE**

Provider ID: 517802

1620 ALPINE BLVD STE 110
 ALPINE, CA 91901-1103

Phone: 619-662-4100

After Hours Phone:
 619-662-4100

License Number: PA20490

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: SAN
 YSIDRO HEALTH ALPINE
 FAMILY MEDICINE

Website: www.mtnhealth.or
 g

**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

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: SAN
 YSIDRO HEALTH ALPINE

FAMILY MEDICINE

Website: www.mtnhealth.or
 g

**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

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: SAN
 YSIDRO HEALTH ALPINE
 FAMILY MEDICINE

Website: www.mtnhealth.or
 g

**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

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: SAN

YSIDRO HEALTH ALPINE
 FAMILY MEDICINE

Website: www.mtnhealth.or
 g

**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

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: SAN
 YSIDRO HEALTH ALPINE
 FAMILY MEDICINE

Website: www.mtnhealth.or
 g

**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


Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No






American Sign Language (ASL):
 N

Accessibility: CONTACT




**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**



PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH ALPINE
 FAMILY MEDICINE
 Website: www.mtnhealth.org

**SAN YSIDRO HEALTH ALPINE
 FAMILY MEDICINE**






Provider ID: 517802
 1620 ALPINE BLVD STE 110
 ALPINE, CA 91901-1103
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: A158569
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH ALPINE
 FAMILY MEDICINE
 Website: www.mtnhealth.org

**SAN YSIDRO HEALTH ALPINE
 FAMILY MEDICINE**




Provider ID: 517802
 1620 ALPINE BLVD STE 110
 ALPINE, CA 91901-1103
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: A97270
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):



N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH ALPINE
 FAMILY MEDICINE
 Website: www.mtnhealth.org

**SAN YSIDRO HEALTH ALPINE
 FAMILY MEDICINE**

Provider ID: 517802
 1620 ALPINE BLVD STE 110
 ALPINE, CA 91901-1103
 Phone: 619-445-6200
 After Hours Phone:
 619-445-6200
 License Number: 20A17296
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH ALPINE
 FAMILY MEDICINE
 Website: www.mtnhealth.org

**SAN YSIDRO HEALTH ALPINE
 FAMILY MEDICINE**



Provider ID: 517802
 1620 ALPINE BLVD STE 110
 ALPINE, CA 91901-1103
 Phone: 619-662-4100
 Fax: 619-205-6305
 After Hours Phone:
 619-662-4100
 License Number: C172036
 Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH ALPINE
 FAMILY MEDICINE
 Website: www.mtnhealth.org

**SAN YSIDRO HEALTH ALPINE
 FAMILY MEDICINE**

Provider ID: 517802
 1620 ALPINE BLVD STE 110
 ALPINE, CA 91901-1103
 Phone: 619-662-4100
 Fax: 619-205-6305
 After Hours Phone:
 619-662-4100
 License Number: DC28335
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH ALPINE
 FAMILY MEDICINE
 Website: www.mtnhealth.org

**SAN YSIDRO HEALTH ALPINE
 FAMILY MEDICINE**

Provider ID: 517802
 1620 ALPINE BLVD STE 110
 ALPINE, CA 91901
 Phone: (619) 662-4100
 Fax: (619) 320-3347

☎ After Hours Phone: (619) 662-4100
 License Number: 090000681
 NPI: 1770124315
 Accepting New Patients: Y
 Min/Max Age: 0\150
 Site English Spoken: Y
 Site Languages(s) Spoken: Arabic, Norwegian, Spanish, Swedish
 Cultural Competency: N
 ⌚ Hours: M-F
 8:00AM-5:00PM
 American Sign Language (ASL): N
 N
 ♿ Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 🌐 Website: www.mtnhealth.org

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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 N
 ♿ Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 🌐 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: A49273
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 🌐 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 🌐 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 🌐 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 🌐 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:




**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**




760-736-6767
Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE N
 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
 Accepting New Patients: YES


 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 Website: N/A







TRUECARE

Provider ID: 480120
 1295 CARLSBAD VILLAGE DR STE 100
 CARLSBAD, CA 92008
 Phone: (760) 736-6767
 Fax: (760) 720-7204
 After Hours Phone: (760) 736-6767
 License Number: 080000630
 NPI: 1245246917
 Accepting New Patients: Y
 Min/Max Age: 0\150
 Site English Spoken: Y
 Cultural Competency: N
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-2:00PM
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 Website: N/A







CHULA VISTA

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
 CHULA VISTA, CA

91910-2628
 Phone: 619-515-2500
 Fax: 619-397-1161
 After Hours Phone: 619-515-2500
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 252 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: 619-515-2500
 After Hours Phone: 619-515-2500
 License Number: A116680
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH

CTR

Provider ID: 206355
 251 LANDIS AVE
 CHULA VISTA, CA
 91910-2628
 Phone: 619-515-2500
 After Hours Phone:
 619-515-2500
 License Number: PT37189
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: CHULA
 VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

**CHULA VISTA FAMILY HLTH
 CTR**

Provider ID: 206355
 251 LANDIS AVE
 CHULA VISTA, CA
 91910-2628
 Phone: 619-515-2500
 After Hours Phone:
 619-515-2500
 License Number: PT295173
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: CHULA

VISTA FAMILY HLTH CTR
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: CHULA
 VISTA FAMILY HLTH CTR
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: CHULA
 VISTA FAMILY HLTH CTR
 Website: 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: 20A11087
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org




**SAN YSIDRO HEALTH CHULA
 VISTA**

Provider ID: 427322
 678 3RD AVE
 CHULA VISTA, CA
 91910-5736
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: 20A12555
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):




**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**

<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</i>  <i>Website: www.ihpsocal.org</i></p>	<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</i>  <i>Website: www.ihpsocal.org</i></p>	<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</i>  <i>Website: www.ihpsocal.org</i></p>
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SAN YSIDRO HEALTH CHULA VISTA



Provider ID: 427322
 678 3RD AVE
 CHULA VISTA, CA
 91910-5736
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: 20A13225
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):



SAN YSIDRO HEALTH CHULA VISTA



Provider ID: 427322
 678 3RD AVE
 CHULA VISTA, CA
 91910-5736
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: 20A19485
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*




SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
 CHULA VISTA, CA
 91910-5736
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: 20A14025
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):







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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**

<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</i>  <i>Website: www.ihpsocal.org</i></p>	<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</i>  <i>Website: www.ihpsocal.org</i></p>	<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</i>  <i>Website: www.ihpsocal.org</i></p>
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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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):



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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*




SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
 CHULA VISTA, CA
 91910-5736
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: A138474
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):







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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**

<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</i>  <i>Website: www.ihpsocal.org</i></p>	<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</i>  <i>Website: www.ihpsocal.org</i></p>	<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</i>  <i>Website: www.ihpsocal.org</i></p>
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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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):



SAN YSIDRO HEALTH CHULA VISTA



Provider ID: 427322
 678 3RD AVE
 CHULA VISTA, CA
 91910-5736
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: A177922
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*




SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
 CHULA VISTA, CA
 91910-5736
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: A164392
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):







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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**

<p>N  <i>Accessibility: CONTACT PROVIDER</i> Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA  <i>Website: www.ihpsocal.org</i></p>	<p>N  <i>Accessibility: CONTACT PROVIDER</i> Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA  <i>Website: www.ihpsocal.org</i></p>	<p>N  <i>Accessibility: CONTACT PROVIDER</i> Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA  <i>Website: www.ihpsocal.org</i></p>
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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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):



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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

SAN YSIDRO HEALTH CHULA VISTA




Provider ID: 427322
 678 3RD AVE
 CHULA VISTA, CA
 91910-5736
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: A120584
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: SAN
 YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*




N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: SAN
 YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: SAN
 YSIDRO HEALTH CHULA VISTA
 *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: A123604
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):







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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):


SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
 CHULA VISTA, CA
 91910-5736
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: A120672
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):


**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**

<p>N  <i>Accessibility: CONTACT PROVIDER</i> Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA  <i>Website: www.ihpsocal.org</i></p>	<p>N  <i>Accessibility: CONTACT PROVIDER</i> Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA  <i>Website: www.ihpsocal.org</i></p>	<p>N  <i>Accessibility: CONTACT PROVIDER</i> Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA  <i>Website: www.ihpsocal.org</i></p>
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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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):



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: A50477
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: SAN
 YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*




N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: SAN
 YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: SAN
 YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
 CHULA VISTA, CA
 91910-5736
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: DC20760
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):







SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
 CHULA VISTA, CA
 91910-5736
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: A56153
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**

<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</i>  <i>Website: www.ihpsocal.org</i></p>	<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</i>  <i>Website: www.ihpsocal.org</i></p>	<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</i>  <i>Website: www.ihpsocal.org</i></p>
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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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):



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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*




SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
 CHULA VISTA, CA
 91910-5736
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: A80185
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):



SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
 CHULA VISTA, CA
 91910-5736
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: A87650
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):


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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**


N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: SAN
 YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*



SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
 CHULA VISTA, CA
 91910-5736
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: A66903
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):



N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: SAN
 YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*



SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
 CHULA VISTA, CA
 91910-5736
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: A69264
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: SAN
 YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*



SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
 CHULA VISTA, CA
 91910-5736
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: DC31963
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: SAN
 YSIDRO HEALTH CHULA VISTA
 *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: G78814
Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish




Cultural Competency: No
American Sign Language (ASL):
 N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 *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
Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 *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: DC26269

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**

Accepting New Patients: YES

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

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE
CHULA VISTA, CA
91910-2628

Phone: 619-515-2500

After Hours Phone: 619-515-2500

License Number: C174771

Accepting New Patients: YES

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

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

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: NP23687

Accepting New Patients: YES

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

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

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

Accepting New Patients: YES

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

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

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

Accepting New Patients: YES

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

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

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

Accepting New Patients: YES


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

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
 CHULA VISTA, CA
 91910-2628

 Phone: 619-515-2500

 After Hours Phone:
 619-515-2500

License Number: NP95001964

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
 Spanish

Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: CHULA
 VISTA FAMILY HLTH CTR

 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

Accepting New Patients: YES

Site English Spoken: Yes


Site Languages(s) Spoken:
 Spanish

Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: CHULA
 VISTA FAMILY HLTH CTR


 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

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
 Spanish

Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: CHULA
 VISTA FAMILY HLTH CTR


 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

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:

Spanish

Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: CHULA
 VISTA FAMILY HLTH CTR


 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

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
 Spanish

Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: CHULA
 VISTA FAMILY HLTH CTR


 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

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**

License Number: PT292823

Accepting New Patients: YES


Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 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

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 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

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500

License Number: A73172

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 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

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500

License Number: A78355

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: CHULA


Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
 .D1 العيادات الصحية المؤهلة فيدرالياً


VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
 CHULA VISTA, CA
 91910-2628

 Phone: 619-515-2500

 After Hours Phone:
 619-515-2500

License Number: A164859

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
 Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: CHULA
 VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
 CHULA VISTA, CA
 91910-2628

 Phone: 619-515-2500

 After Hours Phone:
 619-515-2500

License Number: A177698

Accepting New Patients: YES


Site English Spoken: Yes

Site Languages(s) Spoken:
 Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: CHULA
 VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
 CHULA VISTA, CA
 91910-2628

 Phone: 619-515-2500

 After Hours Phone:
 619-515-2500

License Number: A163464

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
 Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: CHULA
 VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
 CHULA VISTA, CA
 91910-2628

 Phone: 619-515-2500

 After Hours Phone:
 619-515-2500

License Number: A118095

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
 Spanish


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: CHULA
 VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
 CHULA VISTA, CA
 91910-2628

 Phone: 619-515-2500

 After Hours Phone:
 619-515-2500

License Number: A154298

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
 Spanish


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: CHULA
 VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
 CHULA VISTA, CA
 91910-2628

 Phone: 619-515-2500

 After Hours Phone:

619-515-2500
 License Number: A119689
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
 CHULA VISTA, CA
 91910-2628
 Phone: 619-515-2500
 After Hours Phone: 619-515-2500
 License Number: A114181
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE

CHULA VISTA, CA
 91910-2628
 Phone: 619-515-2500
 After Hours Phone: 619-515-2500
 License Number: A148014
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
 CHULA VISTA, CA
 91910-2628
 Phone: 619-515-2500
 After Hours Phone: 619-515-2500
 License Number: A153344
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org


CHULA VISTA FAMILY HLTH CTR
 Provider ID: 206355
 251 LANDIS AVE
 CHULA VISTA, CA
 91910-2628
 Phone: 619-515-2500
 After Hours Phone: 619-515-2500
 License Number: A113001
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 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: 20A11535

Accepting New Patients: YES

Site English Spoken: Yes


Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 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

Accepting New Patients: YES

Site English Spoken: Yes


Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: 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: DPM2930

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA


 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

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: DC33295

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA


 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


Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D1
العيادات الصحية المؤهلة فيدرالياً**

American Sign Language (ASL): N


N
 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA

 *Website: www.ihpsocal.org*

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

 *Website: www.fhcsd.org*

American Sign Language (ASL): N

N
 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: OTAY FAMILY HEALTH CLINIC

 *Website: www.ihpsocal.org*

CHULA VISTA PEDIATRICS

Provider ID: 482034

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

 *Phone: 619-662-4100*

 *After Hours Phone: 619-662-4100*

License Number: C51110

Accepting New Patients: YES

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: CHULA VISTA PEDIATRICS


 *Website: www.ihpsocal.org*

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641

 352 L ST
CHULA VISTA, CA
91911-1208

 *Phone: 619-515-2325*


 *After Hours Phone: 619-515-2325*

License Number: PA19306

Accepting New Patients: YES

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-RICE FAM HC


 *Website: www.fhcsd.org*

OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

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

 *Phone: 619-205-1376*

 *After Hours Phone: 619-205-1376*

License Number: A179598

Accepting New Patients: YES

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: OTAY FAMILY HEALTH CLINIC


 *Website: www.ihpsocal.org*

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641

 352 L ST
CHULA VISTA, CA
91911-1208

 *Phone: 619-515-2325*

 *After Hours Phone: 619-515-2325*

License Number: A144995


Accepting New Patients: YES


 *Site English Spoken: Yes*
Cultural Competency: No


American Sign Language (ASL):

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


Accepting New Patients: YES

 *Site English Spoken: Yes*
Cultural Competency: No

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

Accepting New Patients: YES



 *Site English Spoken: Yes*
Cultural Competency: No

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**





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

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-RICE FAM HC
 *Website: www.fhcsd.org*





N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-RICE FAM HC
 *Website: www.fhcsd.org*

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: OTAY FAMILY HEALTH CLINIC
 *Website: www.ihpsocal.org*

CHULA VISTA PEDIATRICS

Provider ID: 482034
 855 3RD AVE STE 2200
 CHULA VISTA, CA
 91911-1353
 *Phone: 619-662-4100*
Fax: 619-662-4196
 *After Hours Phone: 619-662-4100*
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No



OTAY FAMILY HEALTH CLINIC



Provider ID: 314546
 1637 3RD AVE STE H
 CHULA VISTA, CA
 91911-5823
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: A123170
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No



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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N


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

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: CHULA VISTA PEDIATRICS
 *Website: www.ihpsocal.org*

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: OTAY FAMILY HEALTH CLINIC
 *Website: www.ihpsocal.org*

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: CHULA VISTA PEDIATRICS
 *Website: www.ihpsocal.org*






FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641
 352 L ST
 CHULA VISTA, CA
 91911-1208
 *Phone: 619-515-2325*
Fax: 619-420-0660
 *After Hours Phone: 619-515-2325*
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No


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*
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):


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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT*

**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**

PROVIDER
Medical Group/IPA: CHULA
VISTA PEDIATRICS
 Website: www.ihpsocal.org

PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 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




Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: SP18192


Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: G72486




Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA




Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: PA54404

Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

SAN YSIDRO HEALTH CHULA VISTA




Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: G59670

Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

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

Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
 CHULA VISTA, CA
 91910-5736
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
 License Number: G80234
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH CHULA VISTA
 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: NP12112
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
 CHULA VISTA, CA
 91910-5736
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
 License Number: NP95015413
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

CHULA VISTA PEDIATRICS

Provider ID: 482034
 855 3RD AVE STE 2200
 CHULA VISTA, CA 91911
 Phone: (619) 662-4100
 Fax: (619) 662-4196
 After Hours Phone: (619) 662-4100
 NPI: 1326486861
 Accepting New Patients: Y
 Min/Max Age: 0\150
 Site English Spoken: Y
 Cultural Competency: N
 Hours: M-F 9:00AM-4:00PM
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 Website: www.ihpsocal.org

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641
 352 L ST
 CHULA VISTA, CA 91911
 Phone: (619) 515-2325
 Fax: (619) 420-0660
 After Hours Phone: (619) 515-2325
 License Number: 550002305
 NPI: 1083959464
 Accepting New Patients: Y
 Min/Max Age: 0\150
 Site English Spoken: Y
 Cultural Competency: N
 Hours: M-F 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
 Email: chantalt@fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 Fax: (619) 397-1161
 After Hours Phone: (619) 515-2500

NPI: 1346480837

Accepting New Patients: Y

Min/Max Age: 0\150

Site English Spoken: Y

Site Language(s) Spoken: Spanish

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-6941

After Hours Phone: (619) 662-4100

NPI: 1326486861

Accepting New Patients: Y

Min/Max Age: 0\150

Site English Spoken: Y

Site Language(s) Spoken: Spanish, Tagalog

Cultural Competency: Y

Hours: M-F

8:00AM-5:00PM

SA 8:00AM-4:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP



Website: www.syhealth.org /clinics/chula- vista- medic al- plaza

PROVIDER

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON

Website: www.fhcsd.org

EL CAJON

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

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON

CAJON

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone: 619-515-2498

License Number: NP95009180

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON

CAJON

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone: 619-515-2498

License Number: NP95007000

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT

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

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**

PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

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

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

License Number: NP95013978

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

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

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

License Number: PA20396

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

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

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

License Number: PT292482

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

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

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

License Number: NP95021154

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

**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

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

**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

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal .D1
العيادات الصحية المؤهلة فيدرالياً**

PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

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

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

License Number: RN810863
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

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

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

License Number: A175325
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

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

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

License Number: A68463
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

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

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

License Number: A164859
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

**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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

**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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**

PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

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

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

License Number: A83390
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

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

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

License Number: DC33150
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

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

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

License Number: DPM5661
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

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

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

License Number: C174771
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

**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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

**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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT

PROVIDER
 Medical Group/IPA: FAMILY
 HLTH CTR SAN DIEGO-EL
 CAJON
 Website: www.fhcsd.org

PROVIDER
 Medical Group/IPA: FAMILY
 HLTH CTR SAN DIEGO-EL
 CAJON
 Website: www.fhcsd.org

 Accessibility: CONTACT
PROVIDER
 Medical Group/IPA: FAMILY
 HLTH CTR SAN DIEGO-EL
 CAJON
 Website: www.fhcsd.org

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

Provider ID: 418340
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
 619-515-2498
 License Number: NM1721





Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
 HLTH CTR SAN DIEGO-EL
 CAJON
 Website: www.fhcsd.org

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

Provider ID: 418340
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 Fax: 619-269-0191
 After Hours Phone:
 619-515-2498
 License Number: NM1721

Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
 HLTH CTR SAN DIEGO-EL
 CAJON
 Website: www.fhcsd.org


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

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




Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
 HLTH CTR SAN DIEGO-EL
 CAJON
 Website: www.fhcsd.org

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





Provider ID: 418340
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
 619-515-2498
 License Number: NP15444

Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT

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

Provider ID: 418340
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 Fax: 619-269-0191
 After Hours Phone:
 619-515-2498
 License Number: 20A19473

Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N


**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

Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No







American Sign Language (ASL):

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**




- N**
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*
- CENTRO MEDICO EL CAJON**
Provider ID: 478971
 133 W MAIN ST STE 100
 EL CAJON, CA 92020-3325
 *Phone: 619-401-0404*
 *After Hours Phone: 619-401-0404*
License Number: A151547
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
-  *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: CENTRO MEDICO EL CAJON
 *Website: N/A*
- CENTRO MEDICO EL CAJON**
Provider ID: 478971
 133 W MAIN ST STE 100
 EL CAJON, CA 92020-3325
 *Phone: 619-401-0404*
 *After Hours Phone: 619-401-0404*
License Number: A158569
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
-  *Accessibility: CONTACT PROVIDER*
- Medical Group/IPA: CENTRO MEDICO EL CAJON*
 *Website: N/A*
- CENTRO MEDICO EL CAJON**
Provider ID: 478971
 133 W MAIN ST STE 100
 EL CAJON, CA 92020-3325
 *Phone: 619-401-0404*
 *After Hours Phone: 619-401-0404*
License Number: A98486
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
-  *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: CENTRO MEDICO EL CAJON
 *Website: N/A*
- CENTRO MEDICO EL CAJON**
Provider ID: 478971
 133 W MAIN ST STE 100
 EL CAJON, CA 92020-3325
 *Phone: 619-401-0404*
 *After Hours Phone: 619-401-0404*
License Number: G52812
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
-  *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: CENTRO MEDICO EL CAJON
 *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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
-  *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: CENTRO MEDICO EL CAJON
 *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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
-  *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: CENTRO MEDICO EL CAJON
 *Website: N/A*
- CENTRO MEDICO EL CAJON**
Provider ID: 478971
 133 W MAIN ST STE 100
 EL CAJON, CA 92020-3325




 Phone: 619-873-8940
 After Hours Phone:
 619-873-8940
 License Number: A113241
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: CENTRO
 MEDICO EL CAJON
 Website: N/A

CENTRO MEDICO EL CAJON







Provider ID: 478971
 133 W MAIN ST STE 100
 EL CAJON, CA 92020-3325
 Phone: 619-873-8940
 After Hours Phone:
 619-873-8940
 License Number: A114674
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: CENTRO
 MEDICO EL CAJON
 Website: N/A

CENTRO MEDICO EL CAJON





Provider ID: 478971
 133 W MAIN ST STE 100
 EL CAJON, CA 92020-3325
 Phone: 619-873-8940
 After Hours Phone:
 619-873-8940
 License Number: DPM1536



Accepting New Patients: YES N
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: CENTRO
 MEDICO EL CAJON
 Website: N/A

CENTRO MEDICO EL CAJON


Provider ID: 478971
 133 W MAIN ST STE 100
 EL CAJON, CA 92020-3325
 Phone: 619-873-8940
 After Hours Phone:
 619-873-8940
 License Number: PA16673
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: CENTRO
 MEDICO EL CAJON
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N



 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: CENTRO
 MEDICO EL CAJON
 Website: N/A

CENTRO MEDICO EL CAJON






Provider ID: 478971
 133 W MAIN ST STE 100
 EL CAJON, CA 92020-3325
 Phone: 619-873-8940
 Fax: 619-401-0522
 After Hours Phone:
 619-873-8940
 License Number: 550000430
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: Yes
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: CENTRO
 MEDICO EL CAJON
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish, Tagalog
 Cultural Competency: No
 American Sign Language (ASL):



 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON
 *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
Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON
 *Website: N/A*

SAN YSIDRO HEALTH EL CAJON




Provider ID: 569910
 *875 EL CAJON BLVD EL CAJON, CA 92020-5714*
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: 550002514
Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: No

American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON
 *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
Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON
 *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
Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:

Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON
 *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
Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON
 *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
Accepting New Patients: YES

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON
 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
 Accepting New Patients: YES

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog
 Cultural Competency: No
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog
 Cultural Competency: No
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog
 Cultural Competency: No
 American Sign Language (ASL): N



Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON
 Website: N/A

SAN YSIDRO HEALTH EL CAJON






Provider ID: 569910

875 EL CAJON BLVD






**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**

EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: A87650
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish, Tagalog
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH EL CAJON
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish, Tagalog
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH EL CAJON
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish, Tagalog
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH EL CAJON
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish, Tagalog
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH EL CAJON
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish, Tagalog
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH EL CAJON
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish, Tagalog
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH EL CAJON


 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

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON

 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


Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON

 Website: N/A

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021-7416

 Phone: 619-795-5991

 After Hours Phone:
619-795-5991

License Number: 20A14222

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LA
MAESTRA CHC EL CAJON
BROADWAY


 Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021-7416

 Phone: 619-795-5991

 After Hours Phone:
619-795-5991

License Number: 20A6433

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LA
MAESTRA CHC EL CAJON
BROADWAY

 Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021-7416

 Phone: 619-795-5991

 After Hours Phone:
619-795-5991

License Number: A123929

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LA
MAESTRA CHC EL CAJON
BROADWAY


 Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021-7416

 Phone: 619-795-5991

 After Hours Phone:
619-795-5991

License Number: A160760

Accepting New Patients: YES

Site English Spoken: Yes




Cultural Competency: No

American Sign Language (ASL):
N



**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: LA MAESTRA CHC EL CAJON BROADWAY
 *Website: www.lamaestra.org*




LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501
 1032 BROADWAY EL CAJON, CA 92021-7416
 *Phone: 619-795-5991*
 *After Hours Phone: 619-795-5991*
License Number: G50634
Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: LA MAESTRA CHC EL CAJON BROADWAY
 *Website: www.lamaestra.org*

LA MAESTRA CHC EL CAJON BROADWAY




Provider ID: 418501
 1032 BROADWAY EL CAJON, CA 92021-7416
 *Phone: 619-795-5991*
 *After Hours Phone: 619-795-5991*
License Number: PA21625
Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No



American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: LA MAESTRA CHC EL CAJON BROADWAY
 *Website: www.lamaestra.org*




LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501
 1032 BROADWAY EL CAJON, CA 92021-7416
 *Phone: 619-795-5991*
 *After Hours Phone: 619-795-5991*
License Number: PA58466
Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: LA MAESTRA CHC EL CAJON BROADWAY
 *Website: www.lamaestra.org*

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501
 1032 BROADWAY EL CAJON, CA 92021-7416
 *Phone: 619-795-5991*
Fax: 619-795-5992
 *After Hours Phone: 619-795-5991*
Accepting New Patients: YES




Site English Spoken: Yes
Cultural Competency: No

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: LA MAESTRA CHC EL CAJON BROADWAY
 *Website: www.lamaestra.org*

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501
 1032 BROADWAY EL CAJON, CA 92021-7416
 *Phone: 619-795-5991*
Fax: 619-795-5992
 *After Hours Phone: 619-795-5991*
License Number: 550003567

Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: LA MAESTRA CHC EL CAJON BROADWAY
 *Website: 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HLTH CTR SAN DIEGO-EL
 CAJON
 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: 20A13700
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: CHASE
 AVENUE FAMILY HEALTH
 CTRS INC
 Website: www.fhcsd.org

**CHASE AVENUE FAMILY
 HEALTH CTRS INC**

Provider ID: 206354
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710

Phone: 619-515-2499
 After Hours Phone:
 619-515-2499
 License Number: A110192
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: CHASE
 AVENUE FAMILY HEALTH
 CTRS INC
 Website: www.fhcsd.org

**CHASE AVENUE FAMILY
 HEALTH CTRS INC**

Provider ID: 206354
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: 619-515-2499
 After Hours Phone:
 619-515-2499
 License Number: A138887
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: CHASE
 AVENUE FAMILY HEALTH
 CTRS INC
 Website: www.fhcsd.org

CHASE AVENUE FAMILY

HEALTH CTRS INC
 Provider ID: 206354
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: 619-515-2499
 After Hours Phone:
 619-515-2499
 License Number: A170055
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: CHASE
 AVENUE FAMILY HEALTH
 CTRS INC
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: CHASE
 AVENUE FAMILY HEALTH


**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**


CTRS INC


 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

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHASE
AVENUE FAMILY HEALTH
CTRS INC

 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

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHASE
AVENUE FAMILY HEALTH
CTRS INC


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: PT293536

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: 20A11535

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: 20A13060

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: 20A13745

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

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 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

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


License Number: 20A14919
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

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


License Number: A107093
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

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


License Number: A113001
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON


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

License Number: 20A7241
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

FAMILY HLTH CTR SAN DIEGO-EL CAJON

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

License Number: A114181
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal .D1 العيادات الصحية المؤهلة فيدرالياً


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

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


License Number: A116680
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

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


License Number: A127798
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

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


License Number: A138815
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON


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

License Number: A118095
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**


 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

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


License Number: A146838
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

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


License Number: A148014
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

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


License Number: A154298
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON


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

License Number: A147976
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N




**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 *Website: www.lamaestra.org*

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 *Website: www.lamaestra.org*

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 *Website: www.lamaestra.org*

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267
 165 S 1ST ST
 EL CAJON, CA 92019-4795
 *Phone: 619-312-0347*
 *After Hours Phone: 619-312-0347*


License Number: 20A14222
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 *Website: www.lamaestra.org*

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267
 165 S 1ST ST
 EL CAJON, CA 92019-4795
 *Phone: 619-312-0347*
 *After Hours Phone: 619-312-0347*


License Number: A123929
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 *Website: www.lamaestra.org*

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267
 165 S 1ST ST
 EL CAJON, CA 92019-4795
 *Phone: 619-312-0347*
 *After Hours Phone: 619-312-0347*



License Number: PA58466
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 *Website: www.lamaestra.org*


LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267
 165 S 1ST ST
 EL CAJON, CA 92019-4795
 *Phone: 619-312-0347*
 *After Hours Phone: 619-312-0347*

License Number: 20A6433
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N




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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N



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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**


 **Accessibility:** CONTACT PROVIDER
 Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
 **Website:** www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267
 165 S 1ST ST
 EL CAJON, CA 92019
 **Phone:** (619) 312-0347
Fax: (619) 749-5480
 **After Hours Phone:** (619) 312-0347
NPI: 1336353721

Accepting New Patients: Y
Min/Max Age: 0\150

 **Site English Spoken:** Y
Cultural Competency: Y

 **Hours:** M-TU
 8:00AM-5:00PM
 TH-F 8:00AM-5:00PM



American Sign Language (ASL): N

 **Accessibility:** CONTACT PROVIDER

Medical Group/IPA: La Maestra Family Clinic

 **Website:** www.lamaestra.org
Email:
aschmaltz@lamaestra.org



CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354
 1111 W CHASE AVE
 EL CAJON, CA 92020
 **Phone:** (619) 515-2499
Fax: (619) 593-7164

 **After Hours Phone:** (619) 515-2499

NPI: 1104861681
Accepting New Patients: Y

Min/Max Age: 0\150


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

Cultural Competency: N



American Sign Language (ASL): N

 **Accessibility:** CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego

 **Website:** www.fhcsd.org
Email: jaquelininc@fhcsd.org

LA MAESTRA CHC EL CAJON BROADWAY


Provider ID: 418501
 1032 BROADWAY
 EL CAJON, CA 92021
 **Phone:** (619) 795-5991
Fax: (619) 795-5992

 **After Hours Phone:** (619) 795-5991

License Number: 550003567
NPI: 1134590086

Accepting New Patients: Y
Min/Max Age: 0\150

 **Site English Spoken:** Y
Cultural Competency: Y

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

American Sign Language (ASL): N



 **Accessibility:** CONTACT PROVIDER

Medical Group/IPA: La Maestra Family Clinic

 **Website:** www.lamaestra.org

g



SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910
 875 EL CAJON BLVD
 EL CAJON, CA 92020
 **Phone:** (619) 662-4100
Fax: (619) 785-3356


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

License Number: 550002514
NPI: 1568845741


Accepting New Patients: Y
Min/Max Age: 0\150

 **Site English Spoken:** Y
 **Site Languages(s) Spoken:** Spanish, Arabic, Farsi, Russian, Latin

Cultural Competency: Y

 **Hours:** M-F
 8:00AM-5:00PM



American Sign Language (ASL): N

 **Accessibility:** CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

 **Website:** www.syhealth.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
 EL CAJON, CA 92020
 **Phone:** (619) 515-2498
Fax: (619) 269-0191

 **After Hours Phone:** (619) 515-2498

License Number: 550003553
NPI: 1932561198

Accepting New Patients: Y

Min/Max Age: 0\150

Site English Spoken: Y
 Cultural Competency: N

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

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: Family
 Health Centers of San Diego

Website: www.fhcsd.org
 Email: janellek@fhcsd.org

CENTRO MEDICO EL CAJON

Provider ID: 478971

133 W MAIN ST STE 100
 EL CAJON, CA 92020

Phone: (619) 873-8940
 Fax: (619) 401-0522

After Hours Phone: (619)
 873-8940

License Number: 550000430

NPI: 1154480069

Accepting New Patients: Y

Min/Max Age: 0\999

Site English Spoken: Y
 Cultural Competency: Y

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

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: BORREGO
 COMMUNITY HEALTH
 FOUNDTION

Website: N/A

Email:

iselaocha@borregohealth.org

ENCINITAS

TRUECARE

Provider ID: 480243

1130 2ND ST
 ENCINITAS, CA
 92024-5008

Phone: 760-736-6767

After Hours Phone:
 760-736-6767

License Number: 20A17306

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: TRUECARE

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

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: TRUECARE

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

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: TRUECARE

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

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: TRUECARE

Website: N/A

TRUECARE

Provider ID: 480243

1130 2ND ST
 ENCINITAS, CA
 92024-5008

Phone: 760-753-7842

After Hours Phone:

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**

760-753-7842
License Number: A116562
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE

Provider ID: 480243
 1130 2ND ST
ENCINITAS, CA
92024-5008
 Phone: 760-753-7842
Fax: 760-736-8740
 After Hours Phone:
760-753-7842
License Number: 80000638
Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N



Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE

Provider ID: 480243
 1130 2ND ST
ENCINITAS, CA 92024
 Phone: (760) 753-7842
Fax: (760) 736-8740
 After Hours Phone: (760)
753-7842
License Number: 080000638
NPI: 1245246917
Accepting New Patients: Y
Min/Max Age: 0\150
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-TH
8:00AM-5:00PM
F 8:30AM-5:30PM
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: IHP of Southern Cal-PHP
 *Website: N/A*




ESCONDIDO

**NEIGHBORHOOD
 HEALTHCARE GRAND AVE**

Provider ID: 206269
 1001 E GRAND AVE
 ESCONDIDO, CA
 92025-4604
 *Phone: 760-520-8200*
Fax: 360-462-2749
 *After Hours Phone:
 760-520-8200*
License Number: 80000483
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):



N
 *Accessibility: CONTACT PROVIDER*
*Medical Group/IPA:
 NEIGHBORHOOD
 HEALTHCARE GRAND AVE*
 *Website: www.ihpsocal.org*

**NEIGHBORHOOD
 HEALTHCARE GRAND AVE**

Provider ID: 206269
 1001 E GRAND AVE
 ESCONDIDO, CA
 92025-4604
 *Phone: 760-520-8200*
 *After Hours Phone:
 760-520-8200*
License Number: A94128



Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
 N
 *Accessibility: CONTACT PROVIDER*
*Medical Group/IPA:
 NEIGHBORHOOD
 HEALTHCARE GRAND AVE*
 *Website: www.ihpsocal.org*





**NEIGHBORHOOD
 HEALTHCARE GRAND AVE**

Provider ID: 206269
 1001 E GRAND AVE
 ESCONDIDO, CA
 92025-4604
 *Phone: 760-520-8200*
 *After Hours Phone:
 760-520-8200*
License Number: PA51508
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
 N





 *Accessibility: CONTACT PROVIDER*
*Medical Group/IPA:
 NEIGHBORHOOD
 HEALTHCARE GRAND AVE*
 *Website: www.ihpsocal.org*


**NEIGHBORHOOD
 HEALTHCARE GRAND AVE**

Provider ID: 206269
 1001 E GRAND AVE
 ESCONDIDO, CA
 92025-4604
 *Phone: 760-520-8200*
Fax: 360-462-2749


 *After Hours Phone:
 760-520-8200*
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
 N
 *Accessibility: CONTACT PROVIDER*
*Medical Group/IPA:
 NEIGHBORHOOD
 HEALTHCARE GRAND AVE*
 *Website: www.ihpsocal.org*






**NEIGHBORHOOD
 HEALTHCARE GRAND AVE**

Provider ID: 206269
 1001 E GRAND AVE
 ESCONDIDO, CA
 92025-4604
 *Phone: 760-520-8200*
Fax: 360-462-2749
 *After Hours Phone:
 760-520-8200*
License Number: 550000697
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
 N






 *Accessibility: CONTACT PROVIDER*
*Medical Group/IPA:
 NEIGHBORHOOD
 HEALTHCARE GRAND AVE*
 *Website: www.ihpsocal.org*

**NEIGHBORHOOD
 HEALTHCARE GRAND AVE**




Provider ID: 206269
 1001 E GRAND AVE
 ESCONDIDO, CA

92025-4604
 Phone: 760-520-8200
Fax: 360-462-2749
 After Hours Phone:
760-520-8200
License Number: 80000397
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE GRAND AVE
 Website: www.ihpsocal.org






**NEIGHBORHOOD
HEALTHCARE ESCONDIDO**





Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: 20A14292
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org






**NEIGHBORHOOD
HEALTHCARE ESCONDIDO**

Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: A107557
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

**NEIGHBORHOOD
HEALTHCARE ESCONDIDO**

Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: A109655
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org


**NEIGHBORHOOD
HEALTHCARE ESCONDIDO**
Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: A119661
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO


 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


Accepting New Patients: YES

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO

 Website: 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

Accepting New Patients: YES

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE VALLEY

PARKWAY


 Website: N/A

**NEIGHBORHOOD
 HEALTHCARE ESCONDIDO**

Provider ID: 206270

 460 N ELM ST
 ESCONDIDO, CA
 92025-3002

 Phone: 760-520-8100

 After Hours Phone:
 760-520-8100

License Number: A61751

Accepting New Patients: YES

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

Medical Group/IPA:


NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 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

Accepting New Patients: YES

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Medical Group/IPA:


NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org

**NEIGHBORHOOD
 HEALTHCARE ESCONDIDO**

Provider ID: 206270

 460 N ELM ST
 ESCONDIDO, CA
 92025-3002

 Phone: 760-520-8100

 After Hours Phone:
 760-520-8100

License Number: A159727


Accepting New Patients: YES

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

Medical Group/IPA:


NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org

**NEIGHBORHOOD
 HEALTHCARE ESCONDIDO**

Provider ID: 206270

 460 N ELM ST
 ESCONDIDO, CA
 92025-3002

 Phone: 760-520-8100

 After Hours Phone:
 760-520-8100

License Number: A78116

Accepting New Patients: YES

☐ Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 NEIGHBORHOOD
 HEALTHCARE ESCONDIDO
 🌐 Website: www.ihpsocal.org

**NEIGHBORHOOD
 HEALTHCARE ESCONDIDO**

Provider ID: 206270
 📍 460 N ELM ST
 ESCONDIDO, CA
 92025-3002
 📞 Phone: 760-520-8100
 ☎ After Hours Phone:
 760-520-8100
 License Number: A82173
 Accepting New Patients: YES
 ☐ Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 NEIGHBORHOOD
 HEALTHCARE ESCONDIDO
 🌐 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: A45413
 Accepting New Patients: YES
 ☐ Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 NEIGHBORHOOD
 HEALTHCARE ESCONDIDO
 🌐 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
 Accepting New Patients: YES
 ☐ Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 NEIGHBORHOOD
 HEALTHCARE GRAND AVE
 🌐 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
 Accepting New Patients: YES
 ☐ Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 NEIGHBORHOOD
 HEALTHCARE GRAND AVE
 🌐 Website: www.ihpsocal.org

**NEIGHBORHOOD
 HEALTHCARE ESCONDIDO**



Provider ID: 206270
 📍 460 N ELM ST
 ESCONDIDO, CA
 92025-3002
 📞 Phone: 760-520-8100
 Fax: 360-466-2745
 ☎ After Hours Phone:
 760-520-8100
 Accepting New Patients: YES
 ☐ Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 NEIGHBORHOOD
 HEALTHCARE ESCONDIDO
 🌐 Website: www.ihpsocal.org

**NEIGHBORHOOD
 HEALTHCARE ESCONDIDO**







Provider ID: 206270
 📍 460 N ELM ST
 ESCONDIDO, CA

92025-3002
 Phone: 760-520-8100
Fax: 360-466-2745
 After Hours Phone:
760-520-8100
License Number: 80000397
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org




**NEIGHBORHOOD
HEALTHCARE ESCONDIDO**

Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: A94128
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 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: DC12036
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

**NEIGHBORHOOD
HEALTHCARE ESCONDIDO**

Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: DC28605
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

**NEIGHBORHOOD
HEALTHCARE ESCONDIDO**

Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: G61829
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

**NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL**

Provider ID: 424775
 426 N DATE ST
ESCONDIDO, CA
92025-3409
 Phone: 760-690-5900
 After Hours Phone:
760-690-5900
License Number: A56054
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD


Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
 .D1 العيادات الصحية المؤهلة فيدرالياً


HEALTHCARE PEDIATRICS
 AND PRENATAL

 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

Accepting New Patients: YES

 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N


 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: SAN
 YSIDRO HEALTH ESCONDIDO
 FAMILY MEDICINE

 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

Accepting New Patients: YES

 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: SAN
 YSIDRO HEALTH ESCONDIDO
 FAMILY MEDICINE

 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

Accepting New Patients: YES

 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N


 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: SAN
 YSIDRO HEALTH ESCONDIDO
 FAMILY MEDICINE


 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

Accepting New Patients: YES

 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N


 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA:
 NEIGHBORHOOD
 HEALTHCARE PEDIATRICS
 AND PRENATAL


 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

Accepting New Patients: YES

 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N


 Accessibility: CONTACT
 PROVIDER

Medical Group/IPA:
 NEIGHBORHOOD
 HEALTHCARE PEDIATRICS
 AND PRENATAL






 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 NEIGHBORHOOD
 HEALTHCARE PEDIATRICS
 AND PRENATAL
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 NEIGHBORHOOD
 HEALTHCARE PEDIATRICS
 AND PRENATAL



 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 NEIGHBORHOOD
 HEALTHCARE PEDIATRICS
 AND PRENATAL
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 NEIGHBORHOOD
 HEALTHCARE PEDIATRICS
 AND PRENATAL
 Website: N/A

**NEIGHBORHOOD
 HEALTHCARE PEDIATRICS
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 NEIGHBORHOOD
 HEALTHCARE PEDIATRICS
 AND PRENATAL
 Website: www.ihpsocal.org

**NEIGHBORHOOD
 HEALTHCARE VALLEY
 PARKWAY**

Provider ID: 206271
 728 E VALLEY PKWY
 ESCONDIDO, CA
 92025-3052
 Phone: 760-737-6900
 After Hours Phone:

760-737-6900
 License Number: A145349
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 NEIGHBORHOOD
 HEALTHCARE VALLEY
 PARKWAY
 Website: N/A

**NEIGHBORHOOD
 HEALTHCARE VALLEY
 PARKWAY**

Provider ID: 206271
 728 E VALLEY PKWY
 ESCONDIDO, CA
 92025-3052
 Phone: 760-737-6900
 After Hours Phone:
 760-737-6900
 License Number: A139490
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 NEIGHBORHOOD
 HEALTHCARE VALLEY
 PARKWAY
 Website: N/A

**NEIGHBORHOOD
 HEALTHCARE PEDS AND**

PRENATAL
 Provider ID: 206266
 425 N DATE ST
 ESCONDIDO, CA
 92025-3413
 Phone: 760-520-8340
 After Hours Phone:
 760-520-8340
 License Number: A67626
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 NEIGHBORHOOD
 HEALTHCARE PEDS AND
 PRENATAL
 Website: www.ihpsocal.org

**NEIGHBORHOOD
 HEALTHCARE PEDS 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 NEIGHBORHOOD

HEALTHCARE PEDS AND
 PRENATAL
 Website: www.ihpsocal.org

**NEIGHBORHOOD
 HEALTHCARE VALLEY
 PARKWAY**

Provider ID: 206271
 728 E VALLEY PKWY
 ESCONDIDO, CA
 92025-3052
 Phone: 760-737-6900
 After Hours Phone:
 760-737-6900
 License Number: A120348
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 NEIGHBORHOOD
 HEALTHCARE VALLEY
 PARKWAY
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD
 HEALTHCARE VALLEY
 PARKWAY

Website: N/A

**NEIGHBORHOOD
 HEALTHCARE VALLEY
 PARKWAY**

Provider ID: 206271

728 E VALLEY PKWY
 ESCONDIDO, CA
 92025-3052

Phone: 760-737-6900

Fax: 360-462-2748

After Hours Phone:
 760-737-6900

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD
 HEALTHCARE VALLEY
 PARKWAY

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

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD
 HEALTHCARE VALLEY
 PARKWAY

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

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD
 HEALTHCARE VALLEY
 PARKWAY

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

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD
 HEALTHCARE VALLEY
 PARKWAY

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

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER

Medical Group/IPA:

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**


*NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY*

 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

Accepting New Patients: YES

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:


*NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY*

 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

Accepting New Patients: YES

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH ESCONDIDO
FAMILY MEDICINE


 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

Accepting New Patients: YES

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH ESCONDIDO
FAMILY MEDICINE


 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

Accepting New Patients: YES

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH ESCONDIDO
FAMILY MEDICINE


 Website: N/A

**SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE**

Provider ID: 588941

 704 E GRAND AVE
ESCONDIDO, CA
92025-4405

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: C171064

Accepting New Patients: YES

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER






Medical Group/IPA: SAN
YSIDRO HEALTH ESCONDIDO
FAMILY MEDICINE

 Website: N/A

**ESCONDIDO FAMILY HEALTH
CENTER**

Provider ID: 652372

 128 N BROADWAY





ESCONDIDO, CA 92025
 Phone: (619) 515-2474
 After Hours Phone: (619) 515-2474
 License Number: 550002865
 NPI: 1417640491
 Accepting New Patients: Y
 Min/Max Age: 0\999
 Site English Spoken: Y
 Cultural Competency: N
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: Family Health Centers of San Diego
 Website: N/A



**SAN YSIDRO HEALTH
 ESCONDIDO FAMILY
 MEDICINE**

Provider ID: 588941
 704 E GRAND AVE
 ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 Fax: (619) 662-7952
 After Hours Phone: (619) 662-4100
 NPI: 1801438239
 Accepting New Patients: Y
 Min/Max Age: 0\120
 Site English Spoken: Y
 Cultural Competency: N
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 Website: N/A






NEIGHBORHOOD

**HEALTHCARE PEDIATRICS
 AND PRENATAL**



Provider ID: 424775
 426 N DATE ST
 ESCONDIDO, CA 92025
 Phone: (760) 690-5900
 Fax: (360) 462-2747
 After Hours Phone: (760) 690-5900
 License Number: 550000511
 NPI: 1437335353
 Accepting New Patients: Y
 Min/Max Age: 0\21
 Site English Spoken: Y
 Cultural Competency: N
 Hours: M-F
 8:00AM-5:00PM
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 Website: N/A




**NEIGHBORHOOD
 HEALTHCARE PEDIATRICS AND
 PRENATAL**


Provider ID: 206266
 425 N DATE ST
 ESCONDIDO, CA 92025
 Phone: (760) 520-8340
 Fax: (360) 462-2752
 After Hours Phone: (760) 520-8340
 NPI: 1265618185
 Accepting New Patients: Y
 Min/Max Age: 0\21
 Site English Spoken: Y
 Cultural Competency: N
 Hours: M-F
 8:00AM-5:00PM


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 Website: www.ihpsocal.org



**NEIGHBORHOOD
 HEALTHCARE VALLEY
 PARKWAY**

Provider ID: 206271
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 Fax: (360) 462-2748
 After Hours Phone: (760) 737-6900
 License Number: 080000158



NPI: 1720264641
 Accepting New Patients: Y
 Min/Max Age: 0\150
 Site English Spoken: Y
 Cultural Competency: N

 Hours: M-TU
 8:00AM-5:00PM
 W 9:00AM-5:00PM
 TH-F 8:00AM-5:00PM

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 Website: N/A

**NEIGHBORHOOD
 HEALTHCARE ESCONDIDO**

Provider ID: 206270
 460 N ELM ST
 ESCONDIDO, CA 92025
 Phone: (760) 520-8100

Fax: (360) 466-2745
 ☎ After Hours Phone: (760)
 520-8100
 License Number: 080000397
 NPI: 1598703647

Accepting New Patients: Y
 Min/Max Age: 0\150

☐ Site English Spoken: Y
 Cultural Competency: N

🕒 Hours: M-F
 8:00AM-5:00PM
 SA 8:00AM-0:00PM

American Sign Language (ASL):
 N

♿ Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: IHP of
 Southern Cal-PHP

🌐 Website: www.ihpsocal.org

CENTRO MEDICO ESCONDIDO

Provider ID: 419344
 📍 1121 E WASHINGTON AVE
 ESCONDIDO, CA 92025
 ☎ Phone: (760) 871-0606
 Fax: (858) 634-6918

☎ After Hours Phone: (760)
 871-0606

License Number: 550001260
 NPI: 1023349883

Accepting New Patients: Y
 Min/Max Age: 0\999

☐ Site English Spoken: Y
 Cultural Competency: Y

🕒 Hours: SU 8:00AM-0:00PM
 M-F 8:00AM-8:00PM
 SA 8:00AM-0:00PM

American Sign Language (ASL):
 N

♿ Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: BORREGO

COMMUNITY HEALTH
 FOUNDTION

🌐 Website: N
 Email:
 iselaochoa@borregohealth.org

FALLBROOK

**FALLBROOK FAMILY HLTH
 CTR**

Provider ID: 183910
 📍 1328 S MISSION RD
 FALLBROOK, CA
 92028-4006

☎ Phone: 760-451-4720

Fax: 760-451-4700

☎ After Hours Phone:
 760-451-4720

Accepting New Patients: YES

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

Cultural Competency: No

American Sign Language (ASL):
 N

♿ Accessibility: CONTACT
 PROVIDER

Medical Group/IPA:
 FALLBROOK FAMILY HLTH
 CTR

🌐 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

Accepting New Patients: YES

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

Cultural Competency: No

American Sign Language (ASL):
 N

♿ Accessibility: CONTACT
 PROVIDER

Medical Group/IPA:
 FALLBROOK FAMILY HLTH
 CTR

🌐 Website: N/A

VISTA COMMUNITY CLINIC

Provider ID: 624122

📍 321 E ALVARADO ST
 FALLBROOK, CA
 92028-2912

☎ Phone: 760-723-6200

☎ After Hours Phone:
 760-723-6200

License Number: NP95003447

Accepting New Patients: YES

☐ Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

♿ Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: VISTA
 COMMUNITY CLINIC







🌐 Website: www.vistacommunityclinic.org

**FALLBROOK FAMILY HLTH
 CTR**








Provider ID: 183910

📍 1328 S MISSION RD
 FALLBROOK, CA
 92028-4006

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**



 Phone: 760-451-4770
 After Hours Phone:
760-451-4770
 License Number: A169529
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
 Cultural Competency: No
 American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Medical Group/IPA:
FALLBROOK FAMILY HLTH
CTR
 Website: N/A

VISTA COMMUNITY CLINIC

Provider ID: 624122
 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760)
723-6200
 License Number: 550004110
 NPI: 1851300123
 Accepting New Patients: N
 Min/Max Age: 0\999
 Site English Spoken: Y
 Cultural Competency: Y
 Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM
 American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC



Provider ID: 624122
 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760)
723-6200
 License Number: 550003781
 NPI: 1851300123
 Accepting New Patients: N
 Min/Max Age: 0\999
 Site English Spoken: Y
 Cultural Competency: Y
 Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM
 American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC



Provider ID: 624122
 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760)
723-6200
 License Number: 080000002
 NPI: 1851300123
 Accepting New Patients: N
 Min/Max Age: 0\999
 Site English Spoken: Y
 Cultural Competency: Y
 Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER
 Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122
 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760)
723-6200
 License Number: 550004110
 NPI: 1316501562
 Accepting New Patients: N
 Min/Max Age: 0\999
 Site English Spoken: Y
 Cultural Competency: Y
 Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM
 American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122
 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760)
723-6200
 License Number: 080000002

**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**

NPI: 1649662719
 Accepting New Patients: N
 Min/Max Age: 0\999
 Site English Spoken: Y
 Cultural Competency: Y
 Hours: M 8:00AM-4:00PM
 TU 8:00AM-0:30PM
 W-TH 8:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122
 321 E ALVARADO ST
 FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 License Number: 550003781
 NPI: 1649662719
 Accepting New Patients: N
 Min/Max Age: 0\999
 Site English Spoken: Y
 Cultural Competency: Y
 Hours: M 8:00AM-4:00PM
 TU 8:00AM-0:30PM
 W-TH 8:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122
 321 E ALVARADO ST
 FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 License Number: 550004110
 NPI: 1649662719
 Accepting New Patients: N
 Min/Max Age: 0\999
 Site English Spoken: Y
 Cultural Competency: Y
 Hours: M 8:00AM-4:00PM
 TU 8:00AM-0:30PM
 W-TH 8:00AM-5:00PM
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122
 321 E ALVARADO ST
 FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 License Number: 550003781
 NPI: 1316501562
 Accepting New Patients: N
 Min/Max Age: 0\999
 Site English Spoken: Y
 Cultural Competency: Y
 Hours: M 8:00AM-4:00PM
 TU 8:00AM-0:30PM
 W-TH 8:00AM-5:00PM
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 Website: www.vistacommunityclinic.org




VISTA COMMUNITY CLINIC

Provider ID: 624122
 321 E ALVARADO ST
 FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 License Number: 080000002
 NPI: 1316501562
 Accepting New Patients: N
 Min/Max Age: 0\999
 Site English Spoken: Y
 Cultural Competency: Y
 Hours: M 8:00AM-4:00PM
 TU 8:00AM-0:30PM
 W-TH 8:00AM-5:00PM
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 Website: www.vistacommunityclinic.org





FALLBROOK FAMILY HLTH CTR

Provider ID: 183910
 1328 S MISSION RD
 FALLBROOK, CA 92028
 Phone: (760) 451-4720
 Fax: (760) 451-4700
 After Hours Phone: (760) 451-4720


License Number: 080000150
 NPI: 1982756086
 Accepting New Patients: Y
 Min/Max Age: 0\999
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 Cultural Competency: N
 Hours: M-F
 8:00AM-5:00PM
 SA 8:00AM-5:00PM
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 Website: N/A
 Email: a.escobedo@chsica.org


IMPERIAL BEACH

IMPERIAL BEACH HEALTH CENTER




Provider ID: 179678
 949 PALM AVE
 IMPERIAL BEACH, CA 91932-1503
 Phone: 619-429-3733
 After Hours Phone: 619-429-3733
 License Number: A51447
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IMPERIAL




BEACH HEALTH CENTER
 Website: www.ihpsocal.org
IMPERIAL BEACH HEALTH CENTER
 Provider ID: 179678
 949 PALM AVE
 IMPERIAL BEACH, CA 91932-1503
 Phone: 619-429-3733
 After Hours Phone: 619-429-3733

License Number: A66830
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IMPERIAL BEACH HEALTH CENTER
 Website: www.ihpsocal.org

IMPERIAL BEACH HEALTH CENTER



Provider ID: 179678
 949 PALM AVE
 IMPERIAL BEACH, CA 91932
 Phone: (619) 429-3733
 Fax: (619) 628-5550
 After Hours Phone: (619) 429-3733
 License Number: 090000119
 NPI: 1790718351
 Accepting New Patients: Y
 Min/Max Age: 0\150
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: Y
 Hours: M-F
 8:00AM-5:00PM
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 Website: www.ihpsocal.org


LA MESA

LA MESA PEDIATRICS

Provider ID: 480827
 8881 FLETCHER PKWY STE 200
 LA MESA, CA 91942-3135
 Phone: 619-464-6434
 After Hours Phone: 619-464-6434
 License Number: NP95017921
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: LA MESA PEDIATRICS
 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

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA MESA
PEDIATRICS

Website: N/A

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: Yes

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA MESA
PEDIATRICS

Website: N/A

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA MESA
PEDIATRICS

Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827

8881 FLETCHER PKWY STE
200
LA MESA, CA 91942-3135

Phone: 619-464-6434

Fax: 619-464-5109

After Hours Phone:
619-464-6434

License Number: 20A11733

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA MESA
PEDIATRICS

Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827

8881 FLETCHER PKWY STE
200
LA MESA, CA 91942-3135

Phone: 619-464-6434

Fax: 619-464-5109

After Hours Phone:
619-464-6434

License Number: A113241

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA MESA
PEDIATRICS

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

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA MESA
PEDIATRICS

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

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

LA MESA PEDIATRICS

Provider ID: 480827

8881 FLETCHER PKWY STE
200
LA MESA, CA 91942

Phone: (619) 464-6434







Fax: (619) 464-5109

After Hours Phone: (619)
464-6434

License Number: 550000430







**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**



NPI: 1033759311
 Accepting New Patients: Y
 Min/Max Age: 0\21
 Site English Spoken: Y
 Cultural Competency: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION
 Website: N/A
 Email:
 iselaochoa@borregohealth.org







Provider ID: 353843
 10039 VINE ST
 LAKESIDE, CA 92040-3120
 Phone: 858-218-3000
 After Hours Phone:
 858-218-3000
 License Number: A43914
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA:
 NEIGHBORHOOD HEALTHCARE LAKESIDE
 Website: www.ihpsocal.org

Provider ID: 353843
 10039 VINE ST
 LAKESIDE, CA 92040-3120
 Phone: 858-218-3000
 After Hours Phone:
 858-218-3000
 License Number: DC33688
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA:
 NEIGHBORHOOD HEALTHCARE LAKESIDE
 Website: www.ihpsocal.org

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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA:
 NEIGHBORHOOD HEALTHCARE LAKESIDE
 Website: www.ihpsocal.org







NEIGHBORHOOD HEALTHCARE LAKESIDE
 Provider ID: 353843
 10039 VINE ST
 LAKESIDE, CA 92040-3120
 Phone: 858-218-3000
 After Hours Phone:
 858-218-3000
 License Number: A75411
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA:
 NEIGHBORHOOD HEALTHCARE LAKESIDE
 Website: www.ihpsocal.org





NEIGHBORHOOD HEALTHCARE LAKESIDE
 Provider ID: 353843
 10039 VINE ST
 LAKESIDE, CA 92040-3120
 Phone: 858-218-3000
 Fax: 360-462-2744
 After Hours Phone:
 858-218-3000
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA:
 NEIGHBORHOOD HEALTHCARE LAKESIDE
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE LAKESIDE

NEIGHBORHOOD HEALTHCARE LAKESIDE







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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 NEIGHBORHOOD
 HEALTHCARE LAKESIDE
 Website: www.ihpsocal.org



**NEIGHBORHOOD
 HEALTHCARE LAKESIDE**
 Provider ID: 353843
 10039 VINE ST
 LAKESIDE, CA 92040
 Phone: (858) 218-3000
 Fax: (360) 462-2744
 After Hours Phone: (858)
 218-3000
 License Number: 080000483
 NPI: 1932384120
 Accepting New Patients: Y
 Min/Max Age: 0\150
 Site English Spoken: Y
 Cultural Competency: N
 Hours: M-F
 8:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP of






Southern Cal-PHP
 Website: www.ihpsocal.org





LEMON GROVE

**LEMON GROVE FAMILY
 HEALTH CENTER**
 Provider ID: 419139
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
 Phone: 619-515-2550
 After Hours Phone:
 619-515-2550
 License Number: A178499
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: LEMON
 GROVE FAMILY HEALTH
 CENTER
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: LEMON
 GROVE FAMILY HEALTH
 CENTER
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: LEMON
 GROVE FAMILY HEALTH
 CENTER
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL): Site English Spoken: Yes
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 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

Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 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
Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 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

Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 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






Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER


Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA 91945-1604
 Phone: 619-515-2550






 *After Hours Phone:*
619-515-2550
License Number: NP95013978
Accepting New Patients: YES
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER
 *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
Accepting New Patients: YES
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER
 *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
Accepting New Patients: YES
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER
 *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
Accepting New Patients: YES
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER
 *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
Accepting New Patients: YES
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER
 *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
Accepting New Patients: YES
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER
 *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

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

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

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

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

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A102060

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON

GROVE FAMILY HEALTH CENTER

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

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

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

Accepting New Patients: YES




Site English Spoken: Yes
Cultural Competency: No



American Sign Language (ASL):
N

Accessibility: CONTACT




PROVIDER
 Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No




American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 Website: N/A



LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139
 7592 BROADWAY
 LEMON GROVE, CA 91945-1604
 Phone: 619-515-2550
 After Hours Phone: 619-515-2550
 License Number: A114181
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):




N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):






N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 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
 Accepting New Patients: YES
 Site English Spoken: Yes

Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 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

Accepting New Patients: YES

☐ Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

🌐 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

📍 7592 BROADWAY
LEMON GROVE, CA
91945-1604

☎ Phone: 619-515-2550

🕒 After Hours Phone:
619-515-2550

License Number: A154838

Accepting New Patients: YES

☐ Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

🌐 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

📍 7592 BROADWAY
LEMON GROVE, CA
91945-1604

☎ Phone: 619-515-2550

🕒 After Hours Phone:

619-515-2550

License Number: A163464

Accepting New Patients: YES

☐ Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

🌐 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

📍 7592 BROADWAY
LEMON GROVE, CA
91945-1604

☎ Phone: 619-515-2550

🕒 After Hours Phone:
619-515-2550

License Number: A164859

Accepting New Patients: YES

☐ Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

🌐 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

Accepting New Patients: YES

☐ Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

🌐 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

📍 7592 BROADWAY
LEMON GROVE, CA 91945

☎ Phone: (619) 515-2550

Fax: (619) 825-9577

🕒 After Hours Phone: (619)
515-2550

License Number: 550001268

NPI: 1427282466

Accepting New Patients: Y
Min/Max Age: 0\150

☐ Site English Spoken: Y
Cultural Competency: N

🕒 Hours: M-F
9:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Family
Health Centers of San Diego

🌐 Website: N/A

Email: valeriade@fhcsd.org

NATIONAL CITY

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

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: FAMILY
 HEALTH CTR SD NATIONAL
 CITY

Website: www.fhcsd.org

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

1000 EUCLID AVE
 NATIONAL CITY, CA
 91950-3856

Phone: 619-515-2399

After Hours Phone:
 619-515-2399

License Number: NP95010663

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: FAMILY

HEALTH CTR SD NATIONAL
 CITY

Website: www.fhcsd.org

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

330 E 8TH ST
 NATIONAL CITY, CA
 91950-2312

Phone: 619-662-4100

After Hours Phone:
 619-662-4100

License Number: 20A12653

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: SAN
 YSIDRO HEALTH SOUTH BAY

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

330 E 8TH ST
 NATIONAL CITY, CA
 91950-2312

Phone: 619-662-4100

After Hours Phone:
 619-662-4100

License Number: A133539

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: SAN

YSIDRO HEALTH SOUTH BAY

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

330 E 8TH ST
 NATIONAL CITY, CA
 91950-2312

Phone: 619-662-4100

After Hours Phone:
 619-662-4100

License Number: G71855

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: SAN
 YSIDRO HEALTH SOUTH BAY

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

330 E 8TH ST
 NATIONAL CITY, CA
 91950-2312

Phone: 619-662-4100

Fax: 619-259-2807

After Hours Phone:
 619-662-4100

Accepting New Patients: YES


Site English Spoken: Yes

Cultural Competency: No




American Sign Language (ASL):
 N



Accessibility: CONTACT
 PROVIDER

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**




Medical Group/IPA: SAN
YSIDRO HEALTH SOUTH BAY
 Website: www.ihpsocal.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270
 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
 Phone: 619-280-4213
 After Hours Phone:
619-280-4213
License Number: A167184
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org



LA MAESTRA FAMILY CLINIC INC



Provider ID: 185270
 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
 Phone: 619-434-7308
 After Hours Phone:
619-434-7308
License Number: 20A6433
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT




PROVIDER
Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270
 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
 Phone: 619-434-7308
 After Hours Phone:
619-434-7308
License Number: A123929
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N




 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org


LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270
 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
 Phone: 619-434-7308
 After Hours Phone:
619-434-7308
License Number: C55979
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):



N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270
 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
 Phone: 619-434-7308
 After Hours Phone:
619-434-7308
License Number: G45632
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N




 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 Website: 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
Accepting New Patients: YES




 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 *Website: www.lamaestra.org*

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
 *Phone: 619-564-8765*
 *After Hours Phone:*
619-564-8765
License Number: NP95009891
Accepting New Patients: YES




 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 *Website: 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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 *Website: www.lamaestra.org*





FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930
 1000 EUCLID AVE
 NATIONAL CITY, CA
 91950-3856
 *Phone: 619-515-2399*
 *After Hours Phone:*
619-515-2399








License Number: 20A18460
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Medical Group/IPA: FAMILY
HEALTH CTR SD NATIONAL
CITY
 *Website: www.fhcsd.org*

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930
 1000 EUCLID AVE
 NATIONAL CITY, CA
 91950-3856
 *Phone: 619-515-2399*

 *After Hours Phone:*
619-515-2399
License Number: A163862
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Medical Group/IPA: FAMILY
HEALTH CTR SD NATIONAL
CITY
 *Website: www.fhcsd.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
Accepting New Patients: YES
 *Site English Spoken: Yes*
 *Site Language(s) Spoken:*
Tagalog, Lao, Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN -
NATIONAL C
 *Website: www.operationsa*
mahan.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

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
 Tagalog, Lao, Spanish

Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN -
 NATIONAL C

Website: www.operationsa
 mahan.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

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
 Tagalog, Lao, Spanish

Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN -
 NATIONAL C

Website: www.operationsa
 mahan.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

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
 Tagalog, Lao, Spanish

Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN -
 NATIONAL C

Website: www.operationsa
 mahan.org

**OPERATION SAMAHAN
 GRANGER SCHOOL BASED**

Provider ID: 418302

2101 GRANGER AVE
 NATIONAL CITY, CA
 91950-6208

Phone: 844-200-2426

After Hours Phone:
 844-200-2426

License Number: NP95000203

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN
 GRANGER SCHOOL BASED

Website: www.operationsa
 mahan.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

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA:





OPERATION SAMAHAN
 GRANGER SCHOOL BASED

Website: www.operationsa
 mahan.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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH NATIONAL
 CITY
 Website: www.ihpsocal.org







**SAN YSIDRO HEALTH
 NATIONAL CITY**

Provider ID: 227412
 1136 D AVE
 NATIONAL CITY, CA
 91950-3412
 Phone: 619-662-4100
 Fax: 619-474-3722
 After Hours Phone:
 619-662-4100
 License Number: G46444
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH NATIONAL
 CITY
 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
 After Hours Phone:
 844-200-2426
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 OPERATION SAMAHAN
 GRANGER SCHOOL BASED
 Website: [www.operationsa
 mahan.org](http://www.operationsamahan.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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH NATIONAL
 CITY
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
 NATIONAL CITY**

Provider ID: 227412
 1136 D AVE
 NATIONAL CITY, CA
 91950-3412
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: C55180
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH NATIONAL
 CITY
 Website: www.ihpsocal.org






**SAN YSIDRO HEALTH
 NATIONAL CITY**

Provider ID: 227412
 1136 D AVE
 NATIONAL CITY, CA
 91950-3412
 Phone: 619-662-4100
 Fax: 619-474-3722
 After Hours Phone:
 619-662-4100
 License Number: A55469
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN




**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**

YSIDRO HEALTH NATIONAL CITY
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY






Provider ID: 227412
 1136 D AVE
 NATIONAL CITY, CA
 91950-3412
 Phone: 619-662-4100
 Fax: 619-336-2323
 After Hours Phone:
 619-662-4100
 License Number: A112571
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH NATIONAL CITY
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS




Provider ID: 227418
 2400 E 8TH ST STE A
 NATIONAL CITY, CA
 91950-2956
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: G88347
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Tagalog, Spanish
 Cultural Competency: No



American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH PARADISE HILLS
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS






Provider ID: 227418
 2400 E 8TH ST STE A
 NATIONAL CITY, CA
 91950-2956
 Phone: 619-662-4100
 Fax: 619-259-2806
 After Hours Phone:
 619-662-4100
 License Number: 20A11518
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Tagalog, Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH PARADISE HILLS
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS






Provider ID: 227418
 2400 E 8TH ST STE A
 NATIONAL CITY, CA
 91950-2956
 Phone: 619-662-4100
 After Hours Phone:





619-662-4100
 License Number: A167529
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Tagalog, Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH PARADISE HILLS
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS






Provider ID: 227418
 2400 E 8TH ST STE A
 NATIONAL CITY, CA
 91950-2956
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: A118227
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Tagalog, Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH PARADISE HILLS
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418
 2400 E 8TH ST STE A
 NATIONAL CITY, CA
 91950-2956
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: A157488
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Tagalog, Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH PARADISE
 HILLS
 Website: www.ihpsocal.org






**SAN YSIDRO HEALTH
 PARADISE HILLS**
 Provider ID: 227418
 2400 E 8TH ST STE A
 NATIONAL CITY, CA
 91950-2956
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: A138534
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Tagalog, Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN




YSIDRO HEALTH PARADISE
 HILLS
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
 PARADISE HILLS**
 Provider ID: 227418
 2400 E 8TH ST STE A
 NATIONAL CITY, CA
 91950-2956
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: A146819
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Tagalog, Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH PARADISE
 HILLS
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
 PARADISE HILLS**
 Provider ID: 227418
 2400 E 8TH ST STE A
 NATIONAL CITY, CA
 91950-2956
 Phone: 619-662-4100
 Fax: 619-259-2807
 After Hours Phone:
 619-662-4100
 License Number: A113624
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:






Tagalog, Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH PARADISE
 HILLS
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH NATIONAL
 CITY
 Website: www.ihpsocal.org


**SAN YSIDRO HEALTH
 PARADISE HILLS**
 Provider ID: 227418
 2400 E 8TH ST STE A
 NATIONAL CITY, CA
 91950-2956
 Phone: 619-662-4100
 Fax: 619-259-2807
 After Hours Phone:





619-662-4100
 License Number: A71304
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Tagalog, Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH PARADISE
 HILLS
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH NATIONAL
 CITY
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
 NATIONAL CITY**






Provider ID: 227412
 1136 D AVE

NATIONAL CITY, CA
 91950-3412
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: A138919
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH NATIONAL
 CITY
 Website: www.ihpsocal.org





**SAN YSIDRO HEALTH
 PARADISE HILLS**

Provider ID: 227418
 2400 E 8TH ST STE A
 NATIONAL CITY, CA
 91950-2956
 Phone: 619-662-4100
 Fax: 619-259-2807
 After Hours Phone:
 619-662-4100
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Tagalog, Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH PARADISE
 HILLS
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH NATIONAL
 CITY
 Website: www.ihpsocal.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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Tagalog, Lao, Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:

OPERATION SAMAHAN - NATIONAL C

Website: www.operationsamahan.org

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

1000 EUCLID AVE
 NATIONAL CITY, CA
 91950-3856

Phone: 619-515-2399

Fax: 619-269-0053

After Hours Phone:
 619-515-2399

License Number: 550000465

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY

Website: www.fhcsd.org

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

1000 EUCLID AVE
 NATIONAL CITY, CA
 91950-3856

Phone: 619-515-2399

After Hours Phone:
 619-515-2399

License Number: PA55660

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY

Website: www.fhcsd.org

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

1000 EUCLID AVE
 NATIONAL CITY, CA
 91950-3856

Phone: 619-515-2399

Fax: 619-269-0053

After Hours Phone:
 619-515-2399

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY

Website: www.fhcsd.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

2400 E 8TH ST STE A
 NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619)
 662-4100

NPI: 1598907487

Accepting New Patients: Y

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken:
 Tagalog, Spanish

Cultural Competency: Y

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

American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

Website: syhealth.org/clinics/paradise-hills-family-clinic

OPERATION SAMAHAN GRANGER SCHOOL BASED

Provider ID: 418302

2101 GRANGER AVE
 NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 434-8999

After Hours Phone: (844)
 200-2426

License Number: 550002622

NPI: 1205134517

Accepting New Patients: Y

Min/Max Age: 0\150

Site English Spoken: Y
 Cultural Competency: N

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

American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: Operation Samahan

Website: www.operationsamahan.org

**SAN YSIDRO HEALTH
 NATIONAL CITY**

Provider ID: 227412

1136 D AVE
 NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 474-3722

After Hours Phone: (619)
 662-4100

NPI: 1003869363

Accepting New Patients: Y

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken:
 Spanish

Cultural Competency: Y

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

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: IHP of
 Southern Cal-PHP

Website: syhealth.org/clinics/national-city-family-clinic-1

**OPERATION SAMAHAN -
 NATIONAL C**

Provider ID: 417102

2743 HIGHLAND AVE
 NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 474-3919

After Hours Phone: (844)
 200-2426

License Number: 090000183

NPI: 1801907449

Accepting New Patients: Y

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken:
 Tagalog, Lao, Spanish

Cultural Competency: Y

Hours: M-TH
 8:00AM-6:00PM
 F 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: Operation
 Samahan

Website: www.operationsamahan.org

**FAMILY HEALTH CTR SD
 NATIONAL CITY**

Provider ID: 418930

1000 EUCLID AVE
 NATIONAL CITY, CA 91950

Phone: (619) 515-2399

Fax: (619) 269-0053

After Hours Phone: (619)
 515-2399

License Number: 550000465

NPI: 1417409228

Accepting New Patients: Y

Min/Max Age: 0\150

Site English Spoken: Y
 Cultural Competency: N

Hours: M 8:30AM-3:30PM
 TU 10:30AM-5:30PM
 W 8:30AM-3:30PM
 TH 10:30AM-5:30PM
 F 8:30AM-3:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: Family
 Health Centers of San Diego

Website: www.fhcsd.org

**SAN YSIDRO HEALTH SOUTH
 BAY**

Provider ID: 361428

330 E 8TH ST
 NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 434-3514

After Hours Phone: (619)
 662-4100

NPI: 1851757215

Accepting New Patients: Y

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken:
 Spanish, Tagalog

Cultural Competency: Y

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

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: IHP of
 Southern Cal-PHP

Website: www.syhealth.org

Email:

dinah.pierce@syhealth.org

**LA MAESTRA FAMILY CLINIC
 INC**

Provider ID: 185270

217 HIGHLAND AVE
 NATIONAL CITY, CA 91950

Phone: (619) 434-7308




Fax: (619) 434-7310




After Hours Phone: (619)
 434-7308

NPI: 1336353721

Accepting New Patients: Y

Min/Max Age: 0\150







 Site English Spoken: Y
 Cultural Competency: N
 Hours: TH 8:00AM-2:00PM
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: La Maestra Family Clinic
 Website: www.lamaestra.org
 Email: aschmaltz@lamaestra.org

Fax: 760-414-3731
 After Hours Phone: 760-631-5000
 License Number: A130883
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org


760-631-5000
 License Number: NP95003571
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

OCEANSIDE

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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org



VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
 OCEANSIDE, CA 2057-6043
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
 License Number: NP95009284
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org


VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
 OCEANSIDE, CA 2057-6043
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
 License Number: 20A18374
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org




VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
 OCEANSIDE, CA 2057-6043
 Phone: 760-631-5000

VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
 OCEANSIDE, CA 2057-6043
 Phone: 760-631-5000
 After Hours Phone:

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

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA

COMMUNITY CLINIC

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

4700 N RIVER RD
 OCEANSIDE, CA 2057-6043

Phone: 760-631-5000

After Hours Phone:
 760-631-5000

License Number: A149340

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA

COMMUNITY CLINIC

Website: www.vistacommunityclinic.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

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: Yes

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA

COMMUNITY CLINIC HORNE STREET

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

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA

COMMUNITY CLINIC HORNE STREET

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: PA19825

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

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

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA

COMMUNITY CLINIC HORNE STREET

Website: N/A

**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

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**

☎ *After Hours Phone:*
760-631-5000
License Number: 80000510
Accepting New Patients: NO
☑ *Site English Spoken:* Yes
Cultural Competency: Yes
American Sign Language (ASL):
N
♿ *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC PIER
VIEW WAY
🌐 *Website:* www.vistacommunityclinic.org

**VISTA COMMUNITY CLINIC
PIER VIEW WAY**

Provider ID: 402434
📍 818 PIER VIEW WAY
OCEANSIDE, CA
92054-2803
☎ *Phone:* 760-631-5000
Fax: 760-414-3892
☎ *After Hours Phone:*
760-631-5000
Accepting New Patients: YES
☑ *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
♿ *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC PIER
VIEW WAY
🌐 *Website:* www.vistacommunityclinic.org

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
Accepting New Patients: YES
☑ *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
♿ *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
🌐 *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
Accepting New Patients: YES
☑ *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
♿ *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
🌐 *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
Accepting New Patients: YES
☑ *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
♿ *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
🌐 *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
Accepting New Patients: YES
☑ *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
♿ *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
🌐 *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
Accepting New Patients: YES

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 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

Accepting New Patients: YES

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC HORNE
STREET

 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

Accepting New Patients: YES

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC HORNE
STREET

 Website: N/A


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

Accepting New Patients: YES

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: 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

Accepting New Patients: YES

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415


 Phone: 760-757-4566

 After Hours Phone:
760-757-4566

License Number: PA22667


Accepting New Patients: YES

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-757-4566

 After Hours Phone:
760-757-4566

License Number: C152937

Accepting New Patients: YES

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476
 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415
 Phone: 760-757-4566
 After Hours Phone: 760-757-4566
 License Number: PA53036
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476
 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415
 Phone: 760-757-4566
 Fax: 760-736-8740
 After Hours Phone: 760-757-4566
 Accepting New Patients: YES
 Site English Spoken: Yes

Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476
 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415
 Phone: 760-757-4566
 Fax: 760-736-8740
 After Hours Phone: 760-757-4566
 License Number: 80000240
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476
 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415
 Phone: 760-757-4566
 Fax: 760-757-3004
 After Hours Phone: 760-757-4566
 License Number: A66289

Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296479
 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415
 Phone: 760-757-4566
 After Hours Phone: 760-757-4566
 License Number: A64435
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476
 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415
 Phone: 760-736-6767
 After Hours Phone: 760-736-6767
 License Number: 20A7241
 Accepting New Patients: YES

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476
 605 CROUCH ST BLDG C
 OCEANSIDE, CA
 92054-4415
 Phone: 760-736-6767
 After Hours Phone: 760-736-6767
 License Number: A131678
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476
 605 CROUCH ST BLDG C
 OCEANSIDE, CA
 92054-4415
 Phone: 760-736-6767
 After Hours Phone: 760-736-6767
 License Number: NP95012681
 Accepting New Patients: YES
 Site English Spoken: Yes

Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476
 605 CROUCH ST BLDG C
 OCEANSIDE, CA
 92054-4415
 Phone: 760-736-6767
 After Hours Phone: 760-736-6767
 License Number: NP95013879
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476
 605 CROUCH ST BLDG C
 OCEANSIDE, CA
 92054-4415
 Phone: 760-757-4566
 After Hours Phone: 760-757-4566
 License Number: 20A15689
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:

Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
 OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 License Number: 550004110
 NPI: 1851300123
 Accepting New Patients: Y
 Min/Max Age: 0\999
 Site English Spoken: Y
 Cultural Competency: Y
 Hours: M-F 8:00AM-5:00PM
 SA 9:00AM-4:00PM
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436
 517 N HORNE ST
 OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 Fax: (760) 414-3892

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**

☎ After Hours Phone: (760) 631-5000
 License Number: 080000745
 NPI: 1609094036
 Accepting New Patients: Y
 Min/Max Age: 0\999
 ☑ Site English Spoken: Y
 Cultural Competency: Y
 ⌚ Hours: M-F
 8:00AM-5:00PM
 SA 9:00AM-4:00PM
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 🌐 Website: www.vistacommunityclinic.org
 Email: credentialing@vcc.org

**VISTA COMMUNITY CLINIC
 PIER VIEW WAY**

Provider ID: 402434
 📍 818 PIER VIEW WAY
 OCEANSIDE, CA 92054
 ☎ Phone: (760) 631-5000
 Fax: (760) 414-3892
 ☎ After Hours Phone: (760) 631-5000
 License Number: 080000510
 NPI: 1629357355
 Accepting New Patients: Y
 Min/Max Age: 0\999
 ☑ Site English Spoken: Y
 Cultural Competency: Y
 ⌚ Hours: M-TU
 8:00AM-5:00PM
 W 8:00AM-7:00PM
 TH-F 8:00AM-5:00PM
 SA 9:00AM-4:00PM
 American Sign Language (ASL):

N
 ♿ Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 🌐 Website: www.vistacommunityclinic.org
 Email: credentialing@vcc.org

**VISTA COMMUNITY CLINIC
 PIER VIEW WAY**

Provider ID: 402434
 📍 818 PIER VIEW WAY
 OCEANSIDE, CA 92054
 ☎ Phone: (760) 631-5000
 Fax: (760) 414-3892
 ☎ After Hours Phone: (760) 631-5000
 License Number: 080000510
 NPI: 1629357355

Accepting New Patients: Y
 Min/Max Age: 0\999
 ☑ Site English Spoken: Y
 Cultural Competency: Y

⌚ Hours: M-TU
 8:00AM-5:00PM
 W 8:00AM-7:00PM
 TH-F 8:00AM-5:00PM
 SA 9:00AM-4:00PM

American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 🌐 Website: www.vistacommunityclinic.org
 Email: credentialing@vcc.org

**VISTA COMMUNITY CLINIC
 HORNE STREET**

Provider ID: 402436

📍 517 N HORNE ST
 OCEANSIDE, CA 92054
 ☎ Phone: (760) 631-5000
 Fax: (760) 414-3892
 ☎ After Hours Phone: (760) 631-5000

License Number: 080000745
 NPI: 1609094036
 Accepting New Patients: Y
 Min/Max Age: 0\999

☑ Site English Spoken: Y
 Cultural Competency: Y

⌚ Hours: M-F
 8:00AM-5:00PM
 SA 9:00AM-4:00PM
 American Sign Language (ASL):

N
 ♿ Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 🌐 Website: www.vistacommunityclinic.org
 Email: credentialing@vcc.org

VISTA COMMUNITY CLINIC

Provider ID: 206341
 📍 4700 N RIVER RD
 OCEANSIDE, CA 92057
 ☎ Phone: (760) 631-5000
 Fax: (760) 414-3892
 ☎ After Hours Phone: (760) 631-5000

License Number: 080000002
 NPI: 1649662719
 Accepting New Patients: Y
 Min/Max Age: 0\999

☑ Site English Spoken: Y
 Cultural Competency: Y

⌚ Hours: M-F
 8:00AM-5:00PM
 SA 9:00AM-4:00PM

**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**

American Sign Language (ASL): 631-5000
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 Website: www.vistacommunityclinic.org
 License Number: 550003781
 NPI: 1316501562
 Accepting New Patients: Y
 Min/Max Age: 0\999
 Site English Spoken: Y
 Cultural Competency: Y
 Hours: M-F
 8:00AM-5:00PM
 SA 9:00AM-4:00PM

VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
 OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 License Number: 080000002
 NPI: 1316501562

Accepting New Patients: Y
 Min/Max Age: 0\999

Site English Spoken: Y
 Cultural Competency: Y
 Hours: M-F
 8:00AM-5:00PM
 SA 9:00AM-4:00PM

American Sign Language (ASL): 631-5000
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 Website: www.vistacommunityclinic.org
 License Number: 550003781
 NPI: 1851300123
 Accepting New Patients: Y
 Min/Max Age: 0\999
 Site English Spoken: Y
 Cultural Competency: Y
 Hours: M-F
 8:00AM-5:00PM
 SA 9:00AM-4:00PM

VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
 OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 Website: www.vistacommunityclinic.org
 License Number: 550004110
 NPI: 1316501562
 Accepting New Patients: Y
 Min/Max Age: 0\999
 Site English Spoken: Y
 Cultural Competency: Y
 Hours: M-F
 8:00AM-5:00PM
 SA 9:00AM-4:00PM

VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
 OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000

License Number: 550003781
 NPI: 1851300123
 Accepting New Patients: Y
 Min/Max Age: 0\999
 Site English Spoken: Y
 Cultural Competency: Y
 Hours: M-F
 8:00AM-5:00PM
 SA 9:00AM-4:00PM

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
 OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000

License Number: 550004110
 NPI: 1316501562
 Accepting New Patients: Y
 Min/Max Age: 0\999
 Site English Spoken: Y
 Cultural Competency: Y
 Hours: M-F
 8:00AM-5:00PM
 SA 9:00AM-4:00PM

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
 OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000

License Number: 080000002
 NPI: 1851300123
 Accepting New Patients: Y
 Min/Max Age: 0\999
 Site English Spoken: Y

Cultural Competency: Y

🕒 Hours: M-F
 8:00AM-5:00PM
 SA 9:00AM-4:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

📍 4700 N RIVER RD
 OCEANSIDE, CA 92057

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760) 631-5000

License Number: 550003781

NPI: 1649662719

Accepting New Patients: Y

Min/Max Age: 0\999

📄 Site English Spoken: Y
 Cultural Competency: Y

🕒 Hours: M-F
 8:00AM-5:00PM
 SA 9:00AM-4:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

📍 4700 N RIVER RD

OCEANSIDE, CA 92057

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760) 631-5000

License Number: 550004110

NPI: 1649662719

Accepting New Patients: Y

Min/Max Age: 0\999

📄 Site English Spoken: Y
 Cultural Competency: Y

🕒 Hours: M-F
 8:00AM-5:00PM
 SA 9:00AM-4:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

🌐 Website: www.vistacommunityclinic.org

PAUMA VALLEY

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Provider ID: 206267

📍 16650 HIGHWAY 76
 PAUMA VALLEY, CA
 92061-9524

☎ Phone: 760-742-9919

🕒 After Hours Phone:
 760-742-9919

License Number: G61829

Accepting New Patients: YES

📄 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

🌐 Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Provider ID: 206267

📍 16650 HIGHWAY 76
 PAUMA VALLEY, CA
 92061-9524

☎ Phone: 760-742-9919

Fax: 858-633-4696

🕒 After Hours Phone:
 760-742-9919

Accepting New Patients: YES

📄 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

🌐 Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Provider ID: 206267

📍 16650 HIGHWAY 76
 PAUMA VALLEY, CA
 92061-9524

☎ Phone: 760-742-9919

Fax: 858-633-4696



🕒 After Hours Phone:
 760-742-9919

License Number: 80000611







Accepting New Patients: YES

📄 Site English Spoken: Yes
 Cultural Competency: No




American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NEIGHBORHOOD HEALTHCARE PAUMA VALLEY
 *Website: www.ihpsocal.org*

NEIGHBORHOOD HEALTHCARE PAUMA VALLEY

Provider ID: 206267
 16650 HIGHWAY 76
 PAUMA VALLEY, CA 92061-9524
 *Phone: 760-742-9919*
 *After Hours Phone: 760-742-9919*
License Number: A114419
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NEIGHBORHOOD HEALTHCARE PAUMA VALLEY
 *Website: www.ihpsocal.org*







NEIGHBORHOOD HEALTHCARE PAUMA VALLEY

Provider ID: 206267
 16650 HIGHWAY 76
 PAUMA VALLEY, CA 92061
 *Phone: (760) 742-9919*
Fax: (858) 633-4696
 *After Hours Phone: (760) 742-9919*
License Number: 080000611
NPI: 1407031693
Accepting New Patients: Y







Min/Max Age: 0\150
 *Site English Spoken: Y*
Cultural Competency: N
 *Hours: M-F 8:00AM-4:30PM*
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: IHP of Southern Cal-PHP
 *Website: 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: PA23310
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER
 *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*
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER
 *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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER


 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: A119661

Accepting New Patients: YES

 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY


HEALTH CENTER


 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

Accepting New Patients: YES

 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA:
 NEIGHBORHOOD
 HEALTHCARE GOLD FAMILY
 HEALTH CENTER

 Website: N/A

**NEIGHBORHOOD
 HEALTHCARE GOLD FAMILY
 HEALTH CENTER**

Provider ID: 481187

 13010 POWAY RD
 POWAY, CA 92064

 Phone: (858) 218-3000

Fax: (360) 462-2742

 After Hours Phone: (858)
 218-3000


License Number: 550004321

NPI: 1023518768

Accepting New Patients: Y

Min/Max Age: 0\150

 Site English Spoken: Y
 Cultural Competency: N

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

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: IHP of
 Southern Cal-PHP


 Website: N/A

SAN DIEGO


**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

Accepting New Patients: YES


 Site English Spoken: yes
 Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Medical Group/IPA:


OPERATION SAMAHAN - MIRA
 MESA

 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

Accepting New Patients: YES


 Site English Spoken: yes
 Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN - MIRA
 MESA





 Website: www.operationsa
 mahan.org






**OPERATION SAMAHAN - MIRA
 MESA**






Provider ID: 432308





 9855 ERMA RD STE 105


.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal .D1 العيادات الصحية المؤهلة فيدرالياً






SAN DIEGO, CA 92131-1007
 Phone: 844-200-2426
 After Hours Phone: 844-200-2426
 License Number: NP95010585
 Accepting New Patients: YES
 Site English Spoken: yes
 Site Languages(s) Spoken: Spanish, Tagalog
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA
 Website: www.operationsamahan.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
 Accepting New Patients: YES
 Site English Spoken: yes
 Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN DIEGO FAMILY CARE
 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE
 Provider ID: 482070
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
 Phone: 858-810-8700
 After Hours Phone: 858-810-8700
 License Number: NP16433
 Accepting New Patients: YES
 Site English Spoken: yes
 Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN DIEGO FAMILY CARE
 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE
 Provider ID: 482070
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
 Phone: 858-810-8700
 After Hours Phone: 858-810-8700
 License Number: G70886
 Accepting New Patients: YES
 Site English Spoken: yes
 Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN DIEGO FAMILY CARE

 Website: www.sdfamilycare.org


SAN DIEGO FAMILY CARE
 Provider ID: 482070
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
 Phone: 858-810-8700
 After Hours Phone: 858-810-8700
 License Number: A119010
 Accepting New Patients: YES
 Site English Spoken: yes
 Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN DIEGO FAMILY CARE
 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE
 Provider ID: 482070
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
 Phone: 858-810-8700
 After Hours Phone: 858-810-8700
 License Number: A137415
 Accepting New Patients: YES
 Site English Spoken: yes
 Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT




**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**

PROVIDER
Medical Group/IPA: SAN
DIEGO FAMILY CARE
 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE






Provider ID: 482070
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
 Phone: 858-810-8700
 After Hours Phone:
858-810-8700
License Number: A61238
Accepting New Patients: YES
 Site English Spoken: yes
 Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
DIEGO FAMILY CARE
 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE




Provider ID: 482070
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
 Phone: 858-810-8700
 After Hours Phone:
858-810-8700
License Number: A72833
Accepting New Patients: YES
 Site English Spoken: yes
 Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese
Cultural Competency: No

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
DIEGO FAMILY CARE
 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
 Phone: 858-810-8700
 After Hours Phone:
858-810-8700
License Number: A94449
Accepting New Patients: YES
 Site English Spoken: yes
 Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
DIEGO FAMILY CARE
 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
 Phone: 858-810-8700
 After Hours Phone:
858-810-8700
License Number: A92173
Accepting New Patients: YES
 Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
DIEGO FAMILY CARE
 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
 Phone: 858-810-8700
 After Hours Phone:
858-810-8700
License Number: C174985
Accepting New Patients: YES
 Site English Spoken: yes
 Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
DIEGO FAMILY CARE
 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
 Phone: 858-810-8700
 After Hours Phone:
858-810-8700

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**

License Number: G41532
 Accepting New Patients: YES
 Site English Spoken: yes
 Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN DIEGO FAMILY CARE
 Website: www.sdfamilycare.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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

Phone: 619-515-2444
 Fax: 858-488-1394
 After Hours Phone: 619-515-2444
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: 619-515-2444
 Fax: 858-488-1394
 After Hours Phone: 619-515-2444
 License Number: 80000115
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 Website: www.fhcsd.org

LINDA VISTA HEALTH CARE CTR




Provider ID: 206046

6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
 After Hours Phone: 858-279-0925
 License Number: A119010
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: LINDA VISTA HEALTH CARE CTR
 Website: www.sdfamilycare.org




LINDA VISTA HEALTH CARE CTR



Provider ID: 206046
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
 After Hours Phone: 858-279-0925
 License Number: A144372
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: LINDA VISTA HEALTH CARE CTR
 Website: www.sdfamilycare.org




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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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Vietnamese, Spanish,
 Chinese, Lithuanian
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: LINDA
 VISTA HEALTH CARE CTR
 Website: www.sdfamilycare
 .org

LINDA VISTA HEALTH CARE CTR
 Provider ID: 206046
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
 Fax: 858-279-0377
 After Hours Phone:
 858-279-0925
 License Number: G70886
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Vietnamese, Spanish,
 Chinese, Lithuanian
 Cultural Competency: No






American Sign Language (ASL): License Number: DPM4434
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: LINDA
 VISTA HEALTH CARE CTR
 Website: www.sdfamilycare
 .org

LINDA VISTA HEALTH CARE CTR
 Provider ID: 206046
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
 Fax: 858-279-0377
 After Hours Phone:
 858-279-0925

License Number: A93812
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Vietnamese, Spanish,
 Chinese, Lithuanian
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: LINDA
 VISTA HEALTH CARE CTR
 Website: www.sdfamilycare
 .org






LINDA VISTA HEALTH CARE CTR
 Provider ID: 206046
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
 After Hours Phone:
 858-279-0925






Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Vietnamese, Spanish,
 Chinese, Lithuanian
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: LINDA
 VISTA HEALTH CARE CTR
 Website: www.sdfamilycare
 .org




LINDA VISTA HEALTH CARE CTR
 Provider ID: 206046
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
 After Hours Phone:
 858-279-0925
 License Number: G41532
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Vietnamese, Spanish,
 Chinese, Lithuanian
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: LINDA
 VISTA HEALTH CARE CTR
 Website: www.sdfamilycare
 .org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
 After Hours Phone:
 858-279-0925
 License Number: G44807
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Vietnamese, Spanish,
 Chinese, Lithuanian
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: LINDA
 VISTA HEALTH CARE CTR
 Website: www.sdfamilycare
 .org




SAN DIEGO FAMILY CARE
 Provider ID: 482070
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
 Phone: 858-810-8700
 After Hours Phone:
 858-810-8700
 License Number: 20A12402
 Accepting New Patients: YES
 Site English Spoken: yes
 Site Languages(s) Spoken:
 Lithuanian, Vietnamese,
 Spanish, Chinese
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 DIEGO FAMILY CARE
 Website: www.sdfamilycare

.org
**LINDA VISTA HEALTH CARE
 CTR**
 Provider ID: 206046
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
 Fax: 858-633-4680
 After Hours Phone:
 858-279-0925
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Vietnamese, Spanish,
 Chinese, Lithuanian
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: LINDA
 VISTA HEALTH CARE CTR
 Website: www.sdfamilycare
 .org

**LINDA VISTA HEALTH CARE
 CTR**
 Provider ID: 206046
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
 Phone: 858-810-8700
 After Hours Phone:
 858-810-8700
 License Number: 20A12402
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Vietnamese, Spanish,
 Chinese, Lithuanian
 Cultural Competency: No
 American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: LINDA
 VISTA HEALTH CARE CTR
 Website: www.sdfamilycare
 .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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HLTH CTR SAN DIEGO-BEACH
 AREA
 Website: www.fhcsd.org

**FAMILY HLTH CTR SAN
 DIEGO-BEACH AREA**
 Provider ID: 402851
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: 619-515-2444
 After Hours Phone:
 619-515-2444
 License Number: C53623
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**

<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA</i>  <i>Website: www.fhcsd.org</i></p>	<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA</i>  <i>Website: www.fhcsd.org</i></p>	<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA</i>  <i>Website: www.fhcsd.org</i></p>
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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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 *Phone: 619-515-2444*
 *After Hours Phone: 619-515-2444*
License Number: DC20729
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA</i>  <i>Website: www.fhcsd.org</i></p>	<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA</i>  <i>Website: www.fhcsd.org</i></p>	<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA</i>  <i>Website: www.fhcsd.org</i></p>
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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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**


N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 Provider ID: 402851
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 *Phone: 619-515-2444*
 *After Hours Phone: 619-515-2444*
 License Number: NM1662
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):


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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):



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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):



N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 Provider ID: 402851
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 *Phone: 619-515-2444*
 *After Hours Phone: 619-515-2444*
 License Number: A154298
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):

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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):

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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):


**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**


N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY
 HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY
 HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY
 HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 Provider ID: 402851
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 *Phone: 619-515-2444*
 *After Hours Phone: 619-515-2444*
 License Number: A154399
 Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
 American Sign Language (ASL):

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
 Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
 American Sign Language (ASL):


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
 Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
 American Sign Language (ASL):


N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY
 HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY
 HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY
 HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 Provider ID: 402851
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 *Phone: 619-515-2444*
 *After Hours Phone: 619-515-2444*
 License Number: A163464
 Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
 American Sign Language (ASL):

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
 Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
 American Sign Language (ASL):

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
 Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
 American Sign Language (ASL):


**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**





N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA
Provider ID: 402851
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 *Phone: 619-515-2444*
 *After Hours Phone: 619-515-2444*
License Number: A108228
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):


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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):





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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*




FAMILY HLTH CTR SAN DIEGO-BEACH AREA
Provider ID: 402851
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 *Phone: 619-515-2444*
 *After Hours Phone: 619-515-2444*
License Number: A113001
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):


 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
 After Hours Phone: 619-515-2545
 License Number: 20A17657
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 Website: www.fhcsd.org




FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: 619-515-2400
 After Hours Phone: 619-515-2400
 License Number: 20A17836
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER




Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 Website: www.fhcsd.org


FAMILY HLTH CTR SD HILLCREST


Provider ID: 417937
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
 After Hours Phone: 619-515-2545
 License Number: 20A11612
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST




 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N







 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST







Provider ID: 417937
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
 After Hours Phone: 619-515-2545
 License Number: A136616
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
 N
 *Accessibility: CONTACT
PROVIDER*
*Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST*
 *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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
 N
 *Accessibility: CONTACT
PROVIDER*
*Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST*
 *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: 20A19399
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
 N
 *Accessibility: CONTACT
PROVIDER*
*Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST*
 *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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
 N
 *Accessibility: CONTACT
PROVIDER*
*Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST*
 *Website: www.fhcsd.org*

**FAMILY HLTH CTR SD
HILLCREST**



Provider ID: 417937
 4094 4TH AVE

SAN DIEGO, CA 92103-2143
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: 20A17702
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
 N
 *Accessibility: CONTACT
PROVIDER*
*Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST*
 *Website: www.fhcsd.org*

**FAMILY HLTH CTR SD
HILLCREST**

Provider ID: 417937
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 *Phone: 619-515-2545*
 *After Hours Phone:
619-515-2545*
License Number: 20A17926
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
 N
 *Accessibility: CONTACT
PROVIDER*
*Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST*
 *Website: www.fhcsd.org*

**FAMILY HLTH CTR SD
HILLCREST**

Provider ID: 417937
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 *Phone: 619-515-2545*

☎ After Hours Phone:
 619-515-2545
 License Number: A140324
 Accepting New Patients: YES
 □ Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HLTH CTR SD HILLCREST
 🌐 Website: www.fhcsd.org

**FAMILY HLTH CTR SD
 HILLCREST**

Provider ID: 417937
 📍 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 ☎ Phone: 619-515-2545
 ☎ After Hours Phone:
 619-515-2545
 License Number: A154708
 Accepting New Patients: YES
 □ Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HLTH CTR SD HILLCREST
 🌐 Website: www.fhcsd.org

**FAMILY HLTH CTR SD
 HILLCREST**

Provider ID: 417937
 📍 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 ☎ Phone: 619-515-2545
 ☎ After Hours Phone:
 619-515-2545

License Number: A169207
 Accepting New Patients: YES
 □ Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HLTH CTR SD HILLCREST
 🌐 Website: www.fhcsd.org

**FAMILY HLTH CTR SD
 HILLCREST**

Provider ID: 417937
 📍 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 ☎ Phone: 619-515-2545
 ☎ After Hours Phone:
 619-515-2545
 License Number: A171135
 Accepting New Patients: YES
 □ Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HLTH CTR SD HILLCREST
 🌐 Website: www.fhcsd.org

**FAMILY HLTH CTR SD
 HILLCREST**

Provider ID: 417937
 📍 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 ☎ Phone: 619-515-2545
 ☎ After Hours Phone:
 619-515-2545
 License Number: A177462
 Accepting New Patients: YES

□ Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HLTH CTR SD HILLCREST
 🌐 Website: www.fhcsd.org

**FAMILY HLTH CTR SD
 HILLCREST**

Provider ID: 417937
 📍 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 ☎ Phone: 619-515-2545
 ☎ After Hours Phone:
 619-515-2545
 License Number: A180044
 Accepting New Patients: YES
 □ Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HLTH CTR SD HILLCREST
 🌐 Website: www.fhcsd.org

**FAMILY HLTH CTR SD
 HILLCREST**

Provider ID: 417937
 📍 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 ☎ Phone: 619-515-2545
 ☎ After Hours Phone:
 619-515-2545
 License Number: A70175
 Accepting New Patients: YES
 □ Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
 After Hours Phone: 619-515-2545
 License Number: A80153
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
 After Hours Phone: 619-515-2545
 License Number: A80461
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
 After Hours Phone: 619-515-2545
 License Number: C52451
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
 After Hours Phone: 619-515-2545
 License Number: DC31024
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
 After Hours Phone: 619-515-2545
 License Number: DC33688
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N


Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

**FAMILY HLTH CTR SD
 HILLCREST**

Provider ID: 417937

 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
 619-515-2545

License Number: G16236

Accepting New Patients: YES

 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: FAMILY
 HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

**FAMILY HLTH CTR SD
 HILLCREST**

Provider ID: 417937

 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
 619-515-2545

License Number: G80316

Accepting New Patients: YES

 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: FAMILY
 HLTH CTR SD HILLCREST

 Website: www.fhcsd.org

**FAMILY HLTH CTR SD
 HILLCREST**

Provider ID: 417937

 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
 619-515-2545

License Number: NP18098

Accepting New Patients: YES

 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: FAMILY
 HLTH CTR SD HILLCREST


 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

Accepting New Patients: YES

 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N


 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: FAMILY
 HLTH CTR SD HILLCREST


 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

Accepting New Patients: YES

 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: FAMILY
 HLTH CTR SD HILLCREST


 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

Accepting New Patients: YES

 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N


 Accessibility: CONTACT
 PROVIDER






Medical Group/IPA: FAMILY
 HLTH CTR SD HILLCREST

 Website: www.fhcsd.org







**FAMILY HLTH CTR SD
 HILLCREST**

Provider ID: 417937

 4094 4TH AVE

SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
 After Hours Phone:
 619-515-2545
 License Number: NP95005293
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

**FAMILY HLTH CTR SD
 HILLCREST**







Provider ID: 417937
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
 After Hours Phone:
 619-515-2545
 License Number: PA21385
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

**FAMILY HLTH CTR SD
 HILLCREST**

Provider ID: 417937
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545

 After Hours Phone:
 619-515-2545
 License Number: PA23231
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

**FAMILY HLTH CTR SD
 HILLCREST**







Provider ID: 417937
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
 After Hours Phone:
 619-515-2545
 License Number: PT12930
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

**FAMILY HLTH CTR SD
 HILLCREST**

Provider ID: 417937
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
 After Hours Phone:
 619-515-2545

License Number: PT25155
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HLTH CTR SD HILLCREST
 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: PT28061
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

**FAMILY HLTH CTR SD
 HILLCREST**

Provider ID: 417937
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
 After Hours Phone:
 619-515-2545
 License Number: PT292351
 Accepting New Patients: YES

 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
 619-515-2545

License Number: PT292613

Accepting New Patients: YES

 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
 619-515-2545

License Number: PT293536


Accepting New Patients: YES

 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
 619-515-2545

License Number: PT295173

Accepting New Patients: YES

 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):  N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


 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: PT296559

Accepting New Patients: YES

 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
 619-515-2545

License Number: PT40975

Accepting New Patients: YES

 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST

 Website: www.fhcsd.org


FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

Fax: 619-501-9645

 After Hours Phone:
 619-515-2545


Accepting New Patients: YES

 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

**FAMILY HLTH CTR SD
HILLCREST**

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
Fax: 619-501-9645
 After Hours Phone:
619-515-2545

License Number: 550003099
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org


**FAMILY HLTH CTR SD
HILLCREST**

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 Phone: 619-515-2545
Fax: 619-501-9645
 After Hours Phone:
619-515-2545




License Number: A95356
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER



Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST
 Website: www.fhcsd.org

**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

Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):


N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH COMMUNITY
HEIGHTS FAMILY MED
 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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

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


Medical Group/IPA: SAN
YSIDRO HEALTH COMMUNITY
HEIGHTS FAMILY MED
 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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH COMMUNITY
HEIGHTS FAMILY MED

 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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):




**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED
 *Website: N/A*

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*





NORTH PARK FAMILY HEALTH CENTERS



Provider ID: 206362
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 *Phone: 619-515-2424*
 *After Hours Phone: 619-515-2424*
License Number: A154298
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):



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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 *Phone: 619-515-2424*
 *After Hours Phone: 619-515-2424*
License Number: A173486
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):



NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 *Phone: 619-515-2424*
 *After Hours Phone: 619-515-2424*
License Number: G78814
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):





**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*





N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*





NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 *Phone: 619-515-2424*
 *After Hours Phone: 619-515-2424*
License Number: A118095
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*


NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 *Phone: 619-515-2424*
 *After Hours Phone: 619-515-2424*
License Number: 20A20252
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 *Phone: 619-515-2424*
 *After Hours Phone: 619-515-2424*
License Number: A114181
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):





**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*


N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*





NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 *Phone: 619-515-2424*
 *After Hours Phone: 619-515-2424*
License Number: A148014
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *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: A147758
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):



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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):


**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*




NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831
 3514 30TH ST
 SAN DIEGO, CA 92104-4120
 *Phone: 619-515-2424*
 *After Hours Phone: 619-515-2424*
License Number: G78814
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

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*
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):







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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):






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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No






**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**

<p><i>American Sign Language (ASL):</i> American Sign Language (ASL): N  <i>Accessibility: CONTACT PROVIDER</i> Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS  <i>Website: www.fhcsd.org</i></p>	<p><i>American Sign Language (ASL):</i> American Sign Language (ASL): N  <i>Accessibility: CONTACT PROVIDER</i> Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS  <i>Website: www.fhcsd.org</i></p>	<p><i>American Sign Language (ASL):</i> American Sign Language (ASL): N  <i>Accessibility: CONTACT PROVIDER</i> Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS  <i>Website: www.fhcsd.org</i></p>
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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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS
 *Website: www.fhcsd.org*




NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831
 3514 30TH ST
SAN DIEGO, CA 92104-4120
 *Phone: 619-515-2424*
 *After Hours Phone: 619-515-2424*
License Number: A51318
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS
 *Website: www.fhcsd.org*




NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831
 3514 30TH ST
SAN DIEGO, CA 92104-4120
 *Phone: 619-515-2424*
 *After Hours Phone: 619-515-2424*
License Number: A68463
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS
 *Website: www.fhcsd.org*




NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362
 3544 30TH ST
SAN DIEGO, CA 92104-4120
 *Phone: 619-515-2424*
 *After Hours Phone: 619-515-2424*
License Number: 20A14794
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No







NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831
 3514 30TH ST
SAN DIEGO, CA 92104-4120
 *Phone: 619-515-2424*
 *After Hours Phone: 619-515-2424*
License Number: A164859
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No






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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No






**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**

<p><i>American Sign Language (ASL):</i> American Sign Language (ASL): N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS</i>  <i>Website: www.fhcsd.org</i></p>	<p><i>American Sign Language (ASL):</i> American Sign Language (ASL): N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS</i>  <i>Website: www.fhcsd.org</i></p>	<p><i>American Sign Language (ASL):</i> American Sign Language (ASL): N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS</i>  <i>Website: www.fhcsd.org</i></p>
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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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*




NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831
 3514 30TH ST
SAN DIEGO, CA 92104-4120
 *Phone: 619-515-2424*
 *After Hours Phone: 619-515-2424*
License Number: A118095
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*




NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831
 3514 30TH ST
SAN DIEGO, CA 92104-4120
 *Phone: 619-515-2424*
 *After Hours Phone: 619-515-2424*
License Number: A163464
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*




NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831
 3514 30TH ST
SAN DIEGO, CA 92104-4120
 *Phone: 619-515-2424*
 *After Hours Phone: 619-515-2424*
License Number: A132576
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No





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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No






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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No






**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**

<p><i>American Sign Language (ASL):</i> American Sign Language (ASL): American Sign Language (ASL): N  <i>Accessibility: CONTACT PROVIDER</i> Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS  Website: www.fhcsd.org</p>	<p><i>American Sign Language (ASL):</i> American Sign Language (ASL): American Sign Language (ASL): N  <i>Accessibility: CONTACT PROVIDER</i> Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS  Website: www.fhcsd.org</p>	<p><i>American Sign Language (ASL):</i> American Sign Language (ASL): American Sign Language (ASL): N  <i>Accessibility: CONTACT PROVIDER</i> Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS  Website: www.fhcsd.org</p>
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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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS
 Website: www.fhcsd.org




NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831
 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424
License Number: 20A14919
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS
 Website: www.fhcsd.org




NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831
 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424
License Number: A108228
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS
 Website: www.fhcsd.org




NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831
 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424
License Number: 20A11535
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No




American Sign Language (ASL): American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *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




Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No




American Sign Language (ASL): American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*



OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535
 9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129-2889
 *Phone: 844-200-2426*
 *After Hours Phone: 844-200-2426*
License Number: DC15775






Accepting New Patients: YES
 Site English Spoken: yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: OPERATION SAMAHAN RANCHO PENASQUITOS
 *Website: www.operationsamahan.org*

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535
 9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129-2889
 *Phone: 844-200-2426*
 *After Hours Phone:*

844-200-2426
License Number: DC29074
Accepting New Patients: YES
 Site English Spoken: yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: OPERATION SAMAHAN RANCHO PENASQUITOS
 *Website: www.operationsamahan.org*

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535
 9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129-2889
 *Phone: 844-200-2426*
Fax: 858-695-9074
 *After Hours Phone: 844-200-2426*
Accepting New Patients: YES
 Site English Spoken: yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: OPERATION SAMAHAN RANCHO PENASQUITOS
 *Website: www.operationsamahan.org*

**OPERATION SAMAHAN
 RANCHO PENASQUITOS**

Provider ID: 418535

9995 CARMEL MOUNTAIN
 RD STE B10 AND B11
 SAN DIEGO, CA 92129-2889

Phone: 844-200-2426

After Hours Phone:
 844-200-2426

License Number: PA19664

Accepting New Patients: YES

Site English Spoken: yes

Site Languages(s) Spoken:
 Spanish

Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN
 RANCHO PENASQUITOS

Website: www.operationsa
 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: NP22974

Accepting New Patients: YES

Site English Spoken: yes

Site Languages(s) Spoken:
 Spanish

Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN
 RANCHO PENASQUITOS

Website: www.operationsa
 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

Accepting New Patients: YES

Site English Spoken: yes

Site Languages(s) Spoken:
 Spanish

Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN
 RANCHO PENASQUITOS

Website: www.operationsa
 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

License Number: 550003857

Accepting New Patients: YES

Site English Spoken: yes

Site Languages(s) Spoken:
 Spanish

Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN
 RANCHO PENASQUITOS

Website: www.operationsa
 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

License Number: 550002478

Accepting New Patients: YES

Site English Spoken: yes

Site Languages(s) Spoken:
 Spanish

Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN
 RANCHO PENASQUITOS

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
 Accepting New Patients: YES
 Site English Spoken: yes
 Site Languages(s) Spoken: Spanish, Tagalog
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA
 Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101
 10737 CAMINO RUIZ STE 235
 SAN DIEGO, CA 92126-2375
 Phone: 844-200-2426
 Fax: 858-578-4417
 After Hours Phone: 844-200-2426
 License Number: 80000146
 Accepting New Patients: YES
 Site English Spoken: yes
 Site Languages(s) Spoken: Spanish, Tagalog
 Cultural Competency: No

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA
 Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308
 9855 ERMA RD STE 105
 SAN DIEGO, CA 92131-1007
 Phone: 844-200-2426
 After Hours Phone: 844-200-2426
 License Number: A71544
 Accepting New Patients: YES
 Site English Spoken: yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA
 Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308
 9855 ERMA RD STE 105
 SAN DIEGO, CA 92131-1007
 Phone: 844-200-2426
 After Hours Phone: 844-200-2426
 License Number: NP22974
 Accepting New Patients: YES



Site English Spoken: yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA
 Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101
 10737 CAMINO RUIZ STE 235
 SAN DIEGO, CA 92126-2375
 Phone: 844-200-2426
 After Hours Phone: 844-200-2426
 License Number: A161105
 Accepting New Patients: YES
 Site English Spoken: yes
 Site Languages(s) Spoken: Spanish, Tagalog
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA
 Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101
 10737 CAMINO RUIZ STE 235

 SAN DIEGO, CA 92126-2375
 Phone: 844-200-2426
 After Hours Phone:
 844-200-2426

License Number: C54941

Accepting New Patients: YES

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


Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Medical Group/IPA:


OPERATION SAMAHAN - MIRA
 MESA


 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

Accepting New Patients: YES

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


Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Medical Group/IPA:


OPERATION SAMAHAN - MIRA
 MESA


 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: NP95003211

Accepting New Patients: YES

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


Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Medical Group/IPA:



OPERATION SAMAHAN - MIRA
 MESA

 Website: www.operationsa
 mahan.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

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT


PROVIDER
 Medical Group/IPA: FAMILY
 HEALTH CTR IBARRA

 Website: www.fhcsd.org

**FAMILY HEALTH CTR OF
 SDELM ST**

Provider ID: 419167

 140 ELM ST
 SAN DIEGO, CA 92101-2602

 Phone: 619-515-2520
 Fax: 619-231-0431

 After Hours Phone:
 619-515-2520

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: FAMILY
 HEALTH CTR OF SDELM ST

 Website: www.fhcsd.org

**FAMILY HEALTH CTR OF
 SDELM ST**

Provider ID: 419167

 140 ELM ST
 SAN DIEGO, CA 92101-2602

 Phone: 619-515-2520
 Fax: 619-231-0431

 After Hours Phone:
 619-515-2520


License Number: 550002061

Accepting New Patients: YES






Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N





 Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: FAMILY HEALTH CTR OF SDELM ST
 Website: www.fhcsd.org

DOWNTOWN FAMILY CTR AT CONNECTIONS






Provider ID: 417782
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: 619-515-2430
 After Hours Phone: 619-515-2430
 License Number: 20A7147
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: DOWNTOWN FAMILY CTR AT CONNECTIONS
 Website: www.fhcsd.org

DOWNTOWN FAMILY CTR AT CONNECTIONS





Provider ID: 417782
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: 619-515-2430
 After Hours Phone: 619-515-2430
 License Number: PA58826
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA:


DOWNTOWN FAMILY CTR AT CONNECTIONS
 Website: www.fhcsd.org

DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: 619-515-2430
 Fax: 619-578-2410
 After Hours Phone: 619-515-2430
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: DOWNTOWN FAMILY CTR AT CONNECTIONS
 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: 619-515-2426
 After Hours Phone: 619-515-2426
 License Number: NP95004443
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HEALTH CTR IBARRA

 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: 619-515-2426
 After Hours Phone: 619-515-2426
 License Number: G149974
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HEALTH CTR IBARRA
 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: 619-515-2426
 After Hours Phone: 619-515-2426
 License Number: NP17838
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HEALTH CTR IBARRA
 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: 619-515-2426
 After Hours Phone:
 619-515-2426

License Number: PA58098
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: FAMILY
 HEALTH CTR IBARRA
 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: 619-515-2426
 After Hours Phone:
 619-515-2426

License Number: PA58905
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: FAMILY
 HEALTH CTR IBARRA
 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: 619-515-2426
 After Hours Phone:

619-515-2426
 License Number: PA21385
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HEALTH CTR IBARRA
 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: 619-515-2426
 After Hours Phone:
 619-515-2426

License Number: 20A19345
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: FAMILY
 HEALTH CTR IBARRA
 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: 619-515-2426
 After Hours Phone:
 619-515-2426

License Number: A145023
 Accepting New Patients: YES
 Site English Spoken: Yes

Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HEALTH CTR IBARRA
 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: 619-515-2426
 After Hours Phone:
 619-515-2426

License Number: A173486
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER



Medical Group/IPA: FAMILY
 HEALTH CTR IBARRA
 Website: www.fhcsd.org

**DOWNTOWN FAMILY CTR AT
 CONNECTIONS**

Provider ID: 417782
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: 619-515-2430
 Fax: 619-578-2410
 After Hours Phone:
 619-515-2430




License Number: 550002251
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):




**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**




N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA:
 DOWNTOWN FAMILY CTR AT CONNECTIONS
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE
 Provider ID: 417429
 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713
 *Phone: 619-515-2525*
 *After Hours Phone: 619-515-2525*
 License Number: A128091
 Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
 American Sign Language (ASL):




FAMILY HLTH CTR SAN DIEGOCITY COLLEGE
 Provider ID: 417429
 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713
 *Phone: 619-515-2525*
 *After Hours Phone: 619-515-2525*
 License Number: A76785
 Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
 American Sign Language (ASL):




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
 Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
 American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE
 *Website: www.fhcsd.org*





FAMILY HLTH CTR SAN DIEGOCITY COLLEGE
 Provider ID: 417429
 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713
 *Phone: 619-515-2525*
 *After Hours Phone: 619-515-2525*
 License Number: A163977
 Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
 American Sign Language (ASL):

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
 Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
 American Sign Language (ASL):

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
 Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
 American Sign Language (ASL):





N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 *Phone: 619-515-2525*
Fax: 619-501-5814
 *After Hours Phone: 619-515-2525*
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):





N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE
 *Website: www.fhcsd.org*



FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 *Phone: 619-515-2525*
Fax: 619-501-5814
 *After Hours Phone: 619-515-2525*
License Number: 550002865
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N
N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE
 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 *Phone: 619-515-2424*
Fax: 619-501-0627
 *After Hours Phone: 619-515-2424*
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No




American Sign Language (ASL): N
N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: MID-CITY COMMUNITY CLINIC
 *Website: www.sdfamilycare.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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *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: PA17220
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*



NORTH PARK FAMILY HEALTH CENTERS
 Provider ID: 206362
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 *Phone: 619-515-2424*
 *After Hours Phone: 619-515-2424*
 License Number: PA18746
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):


 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: MID-CITY COMMUNITY CLINIC
 *Website: www.sdfamilycare.org*




MID-CITY COMMUNITY CLINIC
 Provider ID: 233597
 4290 POLK AVE
 SAN DIEGO, CA 92105-1524
 *Phone: 619-563-0250*
 *After Hours Phone: 619-563-0250*
 License Number: A112176
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):



N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: MID-CITY COMMUNITY CLINIC
 *Website: www.sdfamilycare.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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):

N
 *Accessibility: CONTACT*

PROVIDER
 Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):


N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: MID-CITY COMMUNITY CLINIC
 *Website: www.sdfamilycare.org*

MID-CITY COMMUNITY CLINIC
 Provider ID: 233532
 4305 UNIVERSITY AVE STE 150
 SAN DIEGO, CA 92105-1690
 *Phone: 619-280-2058*
 *After Hours Phone: 619-280-2058*
 License Number: A152267
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**


Medical Group/IPA: MID-CITY
COMMUNITY CLINIC

 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233597

 4290 POLK AVE
SAN DIEGO, CA 92105-1524

 Phone: 619-563-0250

 After Hours Phone:
619-563-0250


License Number: DPM4434

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: MID-CITY
COMMUNITY CLINIC

 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233597

 4290 POLK AVE
SAN DIEGO, CA 92105-1524

 Phone: 619-563-0250

 After Hours Phone:
619-563-0250


License Number: G60630

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: MID-CITY
COMMUNITY CLINIC


 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690

 Phone: 619-280-2058

 After Hours Phone:
619-280-2058

License Number: A112176

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: MID-CITY
COMMUNITY CLINIC


 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690

 Phone: 619-280-2058

 After Hours Phone:
619-280-2058

License Number: A61238

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: MID-CITY
COMMUNITY CLINIC


 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690

 Phone: 619-280-2058

 After Hours Phone:
619-280-2058

License Number: A94449

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: MID-CITY
COMMUNITY CLINIC


 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690

 Phone: 619-280-2058

 After Hours Phone:
619-280-2058

License Number: A72833

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No




American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: MID-CITY
COMMUNITY CLINIC






**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**

 Website: www.sdfamilycare.org  Website: www.sdfamilycare.org  Website: www.lamaestra.org




MID-CITY COMMUNITY CLINIC

Provider ID: 233532
 4305 UNIVERSITY AVE STE 150
 SAN DIEGO, CA 92105-1690
 Phone: 619-280-2058
 After Hours Phone: 619-280-2058
 License Number: A163512
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: MID-CITY COMMUNITY CLINIC
 Website: www.sdfamilycare.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
 Phone: 619-255-9154
 After Hours Phone: 619-255-9154
 License Number: A123929
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: MID-CITY COMMUNITY CLINIC




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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC

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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**

 Website: www.lamaestra.org  Website: www.lamaestra.org  Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
 Phone: 619-255-9155
 After Hours Phone:
 619-255-9155

License Number: A82639
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC

 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: DC28966
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC


Provider ID: 185268
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
 Phone: 619-255-9155
 After Hours Phone:
 619-255-9155

License Number: G87837
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC

 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
 Phone: 619-255-9155
 After Hours Phone:
 619-255-9155

License Number: G45632
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
 Phone: 619-255-9155
 After Hours Phone:
 619-255-9155


License Number: NP95013257
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC


**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**

 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: PA13694

Accepting New Patients: YES

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

 After Hours Phone:
619-255-9155


License Number: PA21625

Accepting New Patients: YES

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

Fax: 619-284-4731

 After Hours Phone:
619-255-9155

License Number: 20A6433

Accepting New Patients: YES


 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LA

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

Fax: 619-749-5480

 After Hours Phone:
619-255-9155

License Number: A81682

Accepting New Patients: YES

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-280-7072

 After Hours Phone:
619-280-7072

License Number: 20A14222

Accepting New Patients: YES

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LA

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-564-8765

 After Hours Phone:
619-564-8765

License Number: NP95009891

Accepting New Patients: YES

 Site English Spoken: Yes

Cultural Competency: No




American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
 Phone: 619-798-3947
 After Hours Phone:
619-798-3947
License Number: DC32800
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

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

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.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

Accepting New Patients: YES
 Site English Spoken: yes
 Site Languages(s) Spoken:
Korean, Spanish, Hindi
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN DIEGO AMERICAN INDIAN HEALTH CENTER

 Website: www.sdaihc.org

SAN DIEGO AMERICAN INDIAN HEALTH CENTER

Provider ID: 207382
 2630 1ST AVE
SAN DIEGO, CA 92103-6599
 Phone: 619-234-2158
Fax: 619-234-0206
 After Hours Phone:
619-234-2158

License Number: 90000168
Accepting New Patients: YES
 Site English Spoken: yes
 Site Languages(s) Spoken:
Korean, Spanish, Hindi
Cultural Competency: No

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

Medical Group/IPA: SAN DIEGO AMERICAN INDIAN HEALTH CENTER

 Website: www.sdaihc.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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CTR IBARRA


 Website: 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: NP10769
Accepting New Patients: YES
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER



 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
Accepting New Patients: YES
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
 *Website: N/A*

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


Provider ID: 419529
 2325 COMMERCIAL ST STE 1400
 SAN DIEGO, CA 92113-1195
 *Phone: 619-515-2422*
 *After Hours Phone: 619-515-2422*


License Number: A121451
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL
 *Website: www.fhcsd.org*

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL



Provider ID: 419529
 2325 COMMERCIAL ST STE 1400
 SAN DIEGO, CA 92113-1195
 *Phone: 619-515-2422*
 *After Hours Phone: 619-515-2422*


License Number: A122238
Accepting New Patients: YES
 *Site English Spoken: Yes*

Cultural Competency: No
American Sign Language (ASL):
 N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

 *Website: www.fhcsd.org*




FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529
 2325 COMMERCIAL ST STE 1400
 SAN DIEGO, CA 92113-1195
 *Phone: 619-515-2422*
 *After Hours Phone: 619-515-2422*

License Number: NP95011254
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL
 *Website: www.fhcsd.org*

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


Provider ID: 419529
 2325 COMMERCIAL ST STE 1400
 SAN DIEGO, CA 92113-1195
 *Phone: 619-515-2422*
 *After Hours Phone: 619-515-2422*

License Number: PA20888

Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
 N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL
 *Website: www.fhcsd.org*

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529
 2325 COMMERCIAL ST STE 1400
 SAN DIEGO, CA 92113-1195
 *Phone: 619-515-2422*
 *After Hours Phone: 619-515-2422*





License Number: PA53788
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL
 *Website: www.fhcsd.org*







FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529
 2325 COMMERCIAL ST STE 1400
 SAN DIEGO, CA 92113-1195
 *Phone: 619-515-2422*
Fax: 619-269-0053


**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**



 After Hours Phone:
619-515-2422
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO
COMMERCIAL
 Website: www.fhcsd.org

**FAMILY HLTH CTR OF SD SAN
DIEGO COMMERCIAL**





Provider ID: 419529
 2325 COMMERCIAL ST STE
1400
SAN DIEGO, CA 92113-1195
 Phone: 619-515-2422
Fax: 619-269-0053
 After Hours Phone:
619-515-2422
License Number: 550003113
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO
COMMERCIAL
 Website: www.fhcsd.org

**SHERMAN HEIGHTS FAMILY
HLTH CTRS INC**


Provider ID: 356145
 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941

 Phone: 619-515-2435
 After Hours Phone:
619-515-2435
License Number: A80504
Accepting New Patients: YES
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SHERMAN
HEIGHTS FAMILY HLTH CTRS
INC
 Website: N/A

**SHERMAN HEIGHTS FAMILY
HLTH CTRS INC**

Provider ID: 356145
 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
 Phone: 619-515-2435
 After Hours Phone:
619-515-2435
License Number: A97036
Accepting New Patients: YES
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SHERMAN
HEIGHTS FAMILY HLTH CTRS
INC
 Website: N/A

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


Provider ID: 403583
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500
 After Hours Phone:
619-233-8500
License Number: A104052
Accepting New Patients: YES
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER
 Website: N/A

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





Provider ID: 403583
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
 Phone: 619-233-8500
 After Hours Phone:
619-233-8500
License Number: A109828
Accepting New Patients: YES
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER
 Website: N/A



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

Provider ID: 403583
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638






**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**

 Phone: 619-233-8500
 After Hours Phone:
 619-233-8500
 License Number: A115598
 Accepting New Patients: YES
 Site English Spoken: yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: ST
 VINCENT DE PAUL VILLAGE
 FAMILY HEALTH CENTER
 Website: N/A






 Phone: 619-233-8500
 After Hours Phone:
 619-233-8500
 License Number: A42127
 Accepting New Patients: YES
 Site English Spoken: yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: ST
 VINCENT DE PAUL VILLAGE
 FAMILY HEALTH CENTER
 Website: N/A

 Phone: 619-233-8500
 After Hours Phone:
 619-233-8500
 License Number: A60801
 Accepting New Patients: YES
 Site English Spoken: yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: ST
 VINCENT DE PAUL VILLAGE
 FAMILY HEALTH CENTER
 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
 Accepting New Patients: YES
 Site English Spoken: yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: ST
 VINCENT DE PAUL VILLAGE
 FAMILY HEALTH CENTER
 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
 Accepting New Patients: YES
 Site English Spoken: yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: ST
 VINCENT DE PAUL VILLAGE
 FAMILY HEALTH CENTER
 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
 Accepting New Patients: YES
 Site English Spoken: yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: ST
 VINCENT DE PAUL VILLAGE
 FAMILY HEALTH CENTER
 Website: N/A


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

Provider ID: 403583
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638



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

Provider ID: 403583
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638

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

Provider ID: 403583
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**

 Phone: 619-233-8500
 After Hours Phone:
 619-233-8500



License Number: A82123
 Accepting New Patients: YES
 Site English Spoken: yes
 Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: ST
 VINCENT DE PAUL VILLAGE
 FAMILY HEALTH CENTER

 Website: N/A

 Phone: 619-233-8500
 After Hours Phone:
 619-233-8500



License Number: G29879
 Accepting New Patients: YES
 Site English Spoken: yes
 Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: ST
 VINCENT DE PAUL VILLAGE
 FAMILY HEALTH CENTER

 Website: N/A

 Phone: 619-233-8500
 After Hours Phone:
 619-233-8500

License Number: G72486
 Accepting New Patients: YES
 Site English Spoken: yes
 Cultural Competency: No

American Sign Language (ASL):
 N


 Accessibility: CONTACT
 PROVIDER



Medical Group/IPA: ST
 VINCENT DE PAUL VILLAGE
 FAMILY HEALTH CENTER

 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
 Accepting New Patients: YES
 Site English Spoken: yes
 Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER



Medical Group/IPA: ST
 VINCENT DE PAUL VILLAGE
 FAMILY HEALTH CENTER

 Website: N/A

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

Provider ID: 403583

 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500
 After Hours Phone:
 619-233-8500

License Number: G71080
 Accepting New Patients: YES
 Site English Spoken: yes
 Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER



Medical Group/IPA: ST
 VINCENT DE PAUL VILLAGE
 FAMILY HEALTH CENTER

 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

Accepting New Patients: YES
 Site English Spoken: yes
 Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: SAN
 YSIDRO HEALTH 25TH ST
 FAMILY MEDICINE

 Website: N/A


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

Provider ID: 403583

 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638

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

Provider ID: 403583





 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638





**SAN YSIDRO HEALTH 25TH ST
 FAMILY MEDICINE**

Provider ID: 517403

 316 25TH ST
 SAN DIEGO, CA 92102-3016



**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**

 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: NP20849
 Accepting New Patients: YES
 Site English Spoken: yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH 25TH ST
 FAMILY MEDICINE
 Website: N/A






 Phone: 619-515-2435
 After Hours Phone:
 619-515-2435
 License Number: PA16245
 Accepting New Patients: YES
 Site English Spoken: yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SHERMAN
 HEIGHTS FAMILY HLTH CTRS
 INC
 Website: N/A

 Phone: 619-515-2435
 Fax: 619-515-2435
 After Hours Phone:
 619-515-2435
 Accepting New Patients: YES
 Site English Spoken: yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SHERMAN
 HEIGHTS FAMILY HLTH CTRS
 INC
 Website: N/A

**SHERMAN HEIGHTS FAMILY
HLTH CTRS INC**

Provider ID: 356145
 2391 ISLAND AVE
 SAN DIEGO, CA 92102-2941
 Phone: 619-515-2435
 After Hours Phone:
 619-515-2435
 License Number: NP95011254
 Accepting New Patients: YES
 Site English Spoken: yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SHERMAN
 HEIGHTS FAMILY HLTH CTRS
 INC
 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
 Accepting New Patients: YES
 Site English Spoken: yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SHERMAN
 HEIGHTS FAMILY HLTH CTRS
 INC
 Website: N/A

**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
 Accepting New Patients: YES
 Site English Spoken: yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH 25TH ST
 FAMILY MEDICINE
 Website: N/A


**SHERMAN HEIGHTS FAMILY
HLTH CTRS INC**

Provider ID: 356145
 2391 ISLAND AVE
 SAN DIEGO, CA 92102-2941




**SHERMAN HEIGHTS FAMILY
HLTH CTRS INC**

Provider ID: 356145
 2391 ISLAND AVE
 SAN DIEGO, CA 92102-2941







**SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE**

Provider ID: 517403
 316 25TH ST
 SAN DIEGO, CA 92102-3016


.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً






 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A156607
Accepting New Patients: YES
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH 25TH ST
FAMILY MEDICINE
 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: 20A11535
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org





**LOGAN HEIGHTS FAMILY
HEALTH CENTER**

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: 20A15743
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org







**LOGAN HEIGHTS FAMILY
HEALTH CENTER**

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113


.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً






 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: 20A17072
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**







Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: 20A17478
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**


Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113






 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A103099
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 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: A108228
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 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: A113001
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org






**LOGAN HEIGHTS FAMILY
HEALTH CENTER**

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A114181
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org







**LOGAN HEIGHTS FAMILY
HEALTH CENTER**

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً






 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A116680
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**







Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A118095
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**


Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113




 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A120043
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A121451
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**


Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A122238
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org





**LOGAN HEIGHTS FAMILY
HEALTH CENTER**

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A136616
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org







**LOGAN HEIGHTS FAMILY
HEALTH CENTER**

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113


.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً

 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A142703
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**







Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A146111
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 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: A147939
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org






**LOGAN HEIGHTS FAMILY
HEALTH CENTER**

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A151631
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org







**LOGAN HEIGHTS FAMILY
HEALTH CENTER**

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113


.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً






 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A154298
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**







Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A160489
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**


Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113


 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A163183
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**



Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A163464
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**


Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A163978
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A164859
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org







**LOGAN HEIGHTS FAMILY
HEALTH CENTER**

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113


Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً

 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A164889
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**







Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A169752
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**


Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113


 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A177373
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**


Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A177462
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**


Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A178499
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org





**LOGAN HEIGHTS FAMILY
HEALTH CENTER**

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A181809
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org






**LOGAN HEIGHTS FAMILY
HEALTH CENTER**

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113


**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**





 Phone: 619-515-2300
 After Hours Phone:
 619-515-2300
 License Number: A46161
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: LOGAN
 HEIGHTS FAMILY HEALTH
 CENTER
 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**






Provider ID: 206360
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
 619-515-2300
 License Number: A61687
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: LOGAN
 HEIGHTS FAMILY HEALTH
 CENTER
 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**


Provider ID: 206360
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113





 Phone: 619-515-2300
 After Hours Phone:
 619-515-2300
 License Number: A68124
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: LOGAN
 HEIGHTS FAMILY HEALTH
 CENTER
 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: A68463
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: LOGAN
 HEIGHTS FAMILY HEALTH
 CENTER
 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**


Provider ID: 206360
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300
 After Hours Phone:
 619-515-2300
 License Number: A71671
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: LOGAN
 HEIGHTS FAMILY HEALTH
 CENTER
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: LOGAN
 HEIGHTS FAMILY HEALTH
 CENTER
 Website: www.fhcsd.org







**LOGAN HEIGHTS FAMILY
HEALTH CENTER**

Provider ID: 206360
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113


.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً






 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A76785
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**







Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A77126
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**


Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113



 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A80504
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**






Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A93385
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**


Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A95577
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org





**LOGAN HEIGHTS FAMILY
HEALTH CENTER**

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A97036
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org






**LOGAN HEIGHTS FAMILY
HEALTH CENTER**

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113



**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**




 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
 License Number: C174771
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

KING CHAVEZ HEALTH CENTER






Provider ID: 451167
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
 License Number: DC27523
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: KING CHAVEZ HEALTH CENTER
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: KING CHAVEZ HEALTH CENTER
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: KING CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER




Provider ID: 451167
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: 619-662-4100
 Fax: 619-662-4158


619-662-4100
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: KING CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
 License Number: A101017
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: KING CHAVEZ HEALTH CENTER
 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
 Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: KING CHAVEZ HEALTH CENTER

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

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: KING CHAVEZ HEALTH CENTER

Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: A153223

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: KING CHAVEZ HEALTH CENTER

Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: A165432

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: KING CHAVEZ HEALTH CENTER

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: A45942

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: KING CHAVEZ HEALTH CENTER

Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: A79383

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: KING CHAVEZ HEALTH CENTER

Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: A96919

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER




**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**

Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK
 Website: www.fhcsd.org

Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK
 Website: www.fhcsd.org




**FAMILY HEALTH CTR SAN
DIEGO-OAK PARK**

Provider ID: 418142
 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429
 Phone: 619-515-2454
Fax: 619-794-2696
 After Hours Phone:
619-515-2454

Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK
 Website: www.fhcsd.org

**FAMILY HEALTH CTR SAN
DIEGO-OAK PARK**

Provider ID: 418142
 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429
 Phone: 619-515-2454
 After Hours Phone:
619-515-2454


License Number: PA58505
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK
 Website: www.fhcsd.org




**FAMILY HEALTH CTR SAN
DIEGO-OAK PARK**

Provider ID: 418142
 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429
 Phone: 619-515-2454
 After Hours Phone:
619-515-2454

License Number: C174538
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK
 Website: www.fhcsd.org




**FAMILY HEALTH CTR SAN
DIEGO-OAK PARK**

Provider ID: 418142
 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429
 Phone: 619-515-2454
Fax: 619-794-2696
 After Hours Phone:
619-515-2454

License Number: 550003556
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER




**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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER




**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
Accepting New Patients: YES
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**

<p><i>Medical Group/IPA: SAN YSIDRO HEALTH CHC - OCEAN VIEW</i>  Website: www.ihpsocal.org</p>	<p><i>Medical Group/IPA: SAN YSIDRO HEALTH CHC - OCEAN VIEW</i>  Website: www.ihpsocal.org</p>	<p><i>Medical Group/IPA: SAN YSIDRO HEALTH CHC - OCEAN VIEW</i>  Website: www.ihpsocal.org</p>
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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
Accepting New Patients: YES
 Site English Spoken: yes
Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

*Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW*
 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
Accepting New Patients: YES
 Site English Spoken: yes
Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

*Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW*
 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
Accepting New Patients: YES
 Site English Spoken: yes
Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

*Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW*
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW




Provider ID: 227409
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: A120576
Accepting New Patients: YES
 Site English Spoken: yes
Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

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
Accepting New Patients: YES
 Site English Spoken: yes
Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

SAN YSIDRO HEALTH CHC - OCEAN VIEW




Provider ID: 227409
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: A78373
Accepting New Patients: YES
 Site English Spoken: yes
Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**

<p><i>Medical Group/IPA: SAN YSIDRO HEALTH CHC - OCEAN VIEW</i>  Website: www.ihpsocal.org</p>	<p><i>Medical Group/IPA: SAN YSIDRO HEALTH CHC - OCEAN VIEW</i>  Website: www.ihpsocal.org</p>	<p><i>Medical Group/IPA: SAN YSIDRO HEALTH CHC - OCEAN VIEW</i>  Website: www.ihpsocal.org</p>
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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
Accepting New Patients: YES
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
*Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW*
 Website: www.ihpsocal.org





SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: DC33300
Accepting New Patients: YES
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
*Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW*
 Website: www.ihpsocal.org





SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
 Phone: 619-662-4100
Fax: 619-858-1003
 After Hours Phone:
619-662-4100
License Number: A88893
Accepting New Patients: YES
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
*Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW*
 Website: www.ihpsocal.org




SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: C55180
Accepting New Patients: YES
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

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
Accepting New Patients: YES
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-263-2499
 After Hours Phone:
619-263-2499
License Number: 20A7241
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


Provider ID: 206363
 *4725 MARKET ST
 SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2420*
 *After Hours Phone:
 619-515-2420*

License Number: 20A11535
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


Provider ID: 206363
 *4725 MARKET ST
 SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2420*
 *After Hours Phone:
 619-515-2420*

License Number: A154298
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


Provider ID: 206363
 *4725 MARKET ST
 SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2560*
 *After Hours Phone:
 619-515-2560*

License Number: 20A13745
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*


DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 *4725 MARKET ST
 SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2420*
 *After Hours Phone:
 619-515-2420*

License Number: A113001
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N


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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *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: 20A14919
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


Provider ID: 206363
 *4725 MARKET ST
 SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2560*
 *After Hours Phone:
 619-515-2560*

License Number: A108228
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


Provider ID: 206363
 *4725 MARKET ST
 SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2560*
 *After Hours Phone:
 619-515-2560*

License Number: A114181
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*


DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 *4725 MARKET ST
 SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2560*
 *After Hours Phone:
 619-515-2560*

License Number: 20A15471
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N


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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


Provider ID: 206363
 *4725 MARKET ST
 SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2560*
 *After Hours Phone:
 619-515-2560*

License Number: A116680
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


Provider ID: 206363
 *4725 MARKET ST
 SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2560*
 *After Hours Phone:
 619-515-2560*

License Number: A119689
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


Provider ID: 206363
 *4725 MARKET ST
 SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2560*
 *After Hours Phone:
 619-515-2560*

License Number: A137260
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*


DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 *4725 MARKET ST
 SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2560*
 *After Hours Phone:
 619-515-2560*

License Number: A118095
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N


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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
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 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


Provider ID: 206363
 *4725 MARKET ST
 SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2560*
 *After Hours Phone:
 619-515-2560*

License Number: A141057
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


Provider ID: 206363
 *4725 MARKET ST
 SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2560*
 *After Hours Phone:
 619-515-2560*

License Number: A148014
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


Provider ID: 206363
 *4725 MARKET ST
 SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2560*
 *After Hours Phone:
 619-515-2560*

License Number: A163464
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*


DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 *4725 MARKET ST
 SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2560*
 *After Hours Phone:
 619-515-2560*

License Number: A142743
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N


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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 *4725 MARKET ST
 SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2560*
 *After Hours Phone:
 619-515-2560*

License Number: A164859
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal .D1 العيادات الصحية المؤهلة فيدرالياً


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *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: A164879
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *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: A72005
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


Provider ID: 206363
 *4725 MARKET ST
 SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2560*
 *After Hours Phone:
 619-515-2560*

License Number: C174771
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*


DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 *4725 MARKET ST
 SAN DIEGO, CA 92102-4715*
 *Phone: 619-515-2560*
 *After Hours Phone:
 619-515-2560*

License Number: A178499
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N


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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: KING CHAVEZ HEALTH CENTER
 *Website: www.ihpsocal.org*


PROVIDER
 Medical Group/IPA: KING CHAVEZ HEALTH CENTER
 *Website: www.ihpsocal.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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

KING CHAVEZ HEALTH CENTER



Provider ID: 451167
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 *Phone: 619-428-4463*
 *After Hours Phone: 619-428-4463*
License Number: G71855
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: 20A8204
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):





 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: KING CHAVEZ HEALTH CENTER
 *Website: www.ihpsocal.org*

KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: 20A7435
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):



N
 *Accessibility: CONTACT*


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
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*


DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 *Phone: 619-515-2560*
 *After Hours Phone: 619-515-2560*
License Number: G78814
Accepting New Patients: YES
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: MT2061555


Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 Website: www.fhcsd.org


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: NP17362

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 Website: www.fhcsd.org


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: NP95000205

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: NP10146

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N


 Accessibility: CONTACT PROVIDER

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

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N


 Accessibility: CONTACT PROVIDER

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

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:
619-515-2560

License Number: NP95005321

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 Website: www.fhcsd.org


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 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

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 Website: www.fhcsd.org


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: PA20378

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 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

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

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

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

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

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 Website: www.fhcsd.org

Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 Website: www.fhcsd.org


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone:
 619-515-2560

License Number: PA58505
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone:
 619-515-2560




License Number: RN810863
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
 619-515-2300

License Number: DPM4819
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 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: PA60864
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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


Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300


 After Hours Phone:
619-515-2300

License Number: G78814


Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 Website: www.fhcsd.org


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NM792

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 Website: www.fhcsd.org


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP11778

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300


 After Hours Phone:
619-515-2300

License Number: G81658

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

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

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

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

Accepting New Patients: YES


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300


 After Hours Phone:
619-515-2300

License Number: NP2286


Accepting New Patients: YES

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 Website: www.fhcsd.org


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95000602

Accepting New Patients: YES

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 Website: www.fhcsd.org


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95003689

Accepting New Patients: YES

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95000205

Accepting New Patients: YES

 Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

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

Accepting New Patients: YES

 Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

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

Accepting New Patients: YES

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95011254

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95011313

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 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

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 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

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 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

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA15227

Accepting New Patients: YES


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300


 After Hours Phone:
619-515-2300

License Number: PA16245

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300


 After Hours Phone:
619-515-2300

License Number: PA17864

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA20396

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA21591

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

**LOGAN HEIGHTS FAMILY
HEALTH CENTER**

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA23258

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 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

Accepting New Patients: YES


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 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


Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 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

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PT295463

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PT30272

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PT33914

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: RN486421


Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
 619-515-2300

License Number: RN810863

Accepting New Patients: YES


Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
 619-515-2300

License Number: SP27677

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 Website: www.fhcsd.org


LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

Fax: 619-515-2510

 After Hours Phone:
 619-515-2300


License Number: A178494

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
 SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

 After Hours Phone:
 619-515-2454

License Number: 20A12796

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CTR SAN DIEGO-OAK PARK


 Website: 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

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
 Spanish

Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER


 Website: www.ibclinic.org

NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492

 1016 OUTER RD
 SAN DIEGO, CA 92154-1351

 Phone: 619-429-3733

 After Hours Phone:
 619-429-3733



License Number: A165398

Accepting New Patients: YES






Site English Spoken: Yes

Site Languages(s) Spoken:
 Spanish



**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**


Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER
 *Website: www.ibclinic.org*

NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492
 1016 OUTER RD
 SAN DIEGO, CA 92154-1351
 *Phone: 619-429-3733*
 *After Hours Phone:*
 619-429-3733
License Number: NP22031
Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER
 *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
Accepting New Patients: YES
 Site English Spoken: Yes

Site Languages(s) Spoken:
 Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER
 *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
Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER
 *Website: www.ibclinic.org*

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535
 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*
License Number: 550003857
NPI: 1699216622
Accepting New Patients: Y
Min/Max Age: 0\150
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
Cultural Competency: N
 *Hours: M-TU*
 8:30AM-5:30PM
 W 10:00AM-7:00PM
 TH-F 8:30AM-5:30PM
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: Operation Samahan
 *Website: www.operationsamahan.org*

OPERATION SAMAHAN RANCHO PENASQUITOS



Provider ID: 418535
 9995 CARMEL MOUNTAIN RD STE B10 AND B11
 SAN DIEGO, CA 92129
 *Phone: (844) 200-2426*
Fax: (858) 695-9074
 *After Hours Phone: (844) 200-2426*
License Number: 550002478
NPI: 1699216622
Accepting New Patients: Y
Min/Max Age: 0\150
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
Cultural Competency: N
 *Hours: M-TU*




8:30AM-5:30PM
 W 10:00AM-7:00PM
 TH-F 8:30AM-5:30PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: Operation
 Samahan
 Website: www.operationsamahan.org

**OPERATION SAMAHAN
 RANCHO PENASQUITOS**




Provider ID: 418535
 9995 CARMEL MOUNTAIN
 RD STE B10 AND B11
 SAN DIEGO, CA 92129
 Phone: (844) 200-2426
 Fax: (858) 695-9074
 After Hours Phone: (844)
 200-2426
 License Number: 550003857
 NPI: 1699216622
 Accepting New Patients: Y
 Min/Max Age: 0\150
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: N




 Hours: M-TU
 8:30AM-5:30PM
 W 10:00AM-7:00PM
 TH-F 8:30AM-5:30PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: Operation
 Samahan
 Website: www.operationsamahan.org

**OPERATION SAMAHAN
 RANCHO PENASQUITOS**
 Provider ID: 418535
 9995 CARMEL MOUNTAIN
 RD STE B10 AND B11
 SAN DIEGO, CA 92129
 Phone: (844) 200-2426
 Fax: (858) 695-9074
 After Hours Phone: (844)
 200-2426
 License Number: 550002478
 NPI: 1699216622







Accepting New Patients: Y
 Min/Max Age: 0\150
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: N
 Hours: M-TU
 8:30AM-5:30PM
 W 10:00AM-7:00PM
 TH-F 8:30AM-5:30PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: Operation
 Samahan
 Website: www.operationsamahan.org

**OPERATION SAMAHAN - MIRA
 MESA**

Provider ID: 417101
 10737 CAMINO RUIZ STE
 235
 SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 Fax: (858) 578-4417
 After Hours Phone: (844)
 200-2426
 License Number: 080000146

NPI: 1871680397
 Accepting New Patients: Y
 Min/Max Age: 0\150
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish, Tagalog
 Cultural Competency: Y
 Hours: M-F
 8:00AM-4:30PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: Operation
 Samahan
 Website: www.operationsamahan.org

**NORTH PARK FAMILY HEALTH
 CENTERS**

Provider ID: 416831
 3514 30TH ST
 SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 Fax: (619) 683-7586
 After Hours Phone: (619)
 515-2424
 License Number: 090000469
 NPI: 1700821303
 Accepting New Patients: Y
 Min/Max Age: 0\18
 Site English Spoken: Y
 Cultural Competency: N
 Hours: M-TH
 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

Email: jenanm@fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

3544 30TH ST
 SAN DIEGO, CA 92104

Phone: (619) 515-2424

Fax: (619) 501-0627

After Hours Phone: (619) 515-2424

NPI: 1700821303

Accepting New Patients: Y

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL): N

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego

Website: www.fhcsd.org

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998

4690 EL CAJON BLVD
 SAN DIEGO, CA 92115

Phone: (619) 662-4100

Fax: (619) 824-9076

After Hours Phone: (619) 662-4100

License Number: 550003882

NPI: 1205477841

Accepting New Patients: Y

Min/Max Age: 0\120

Site English Spoken: Y

Site Languages(s) Spoken: Chinese, Spanish, Tagalog, Vietnamese

Cultural Competency: N

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

American Sign Language (ASL): N

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

Website: N/A

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

6973 LINDA VISTA RD
 SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858) 279-0925

NPI: 1609905215

Accepting New Patients: Y

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian

Cultural Competency: Y

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

American Sign Language (ASL): N

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

6973 LINDA VISTA RD
 SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858) 279-0925

NPI: 1780665877

Accepting New Patients: Y

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian

Cultural Competency: Y

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

American Sign Language (ASL): N

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

7011 LINDA VISTA RD
 SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858) 810-8700

NPI: 1457724858

Accepting New Patients: Y

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese

Cultural Competency: Y

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

W-F 8:30AM-5:30PM
 SA 9:00AM-4:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP of
 Southern Cal-PHP
 Website: www.sdfamilycare
 .org

**FAMILY HLTH CTR SD
 HILLCREST**

Provider ID: 417937
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 Fax: (619) 501-9645
 After Hours Phone: (619)
 515-2545
 License Number: 550003099
 NPI: 1629456900
 Accepting New Patients: Y
 Min/Max Age: 0\150
 Site English Spoken: Y
 Cultural Competency: N
 Hours: M-TH
 8:00AM-9:00PM
 F 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
 Email: fabianm@fhcsd.org

**OPERATION SAMAHAN - MIRA
 MESA**

Provider ID: 432308
 9855 ERMA RD STE 105

SAN DIEGO, CA 92131
 Phone: (844) 200-2426
 Fax: (858) 536-8034
 After Hours Phone: (844)
 200-2426
 License Number: 080000146
 NPI: 1861933897
 Accepting New Patients: Y
 Min/Max Age: 0\999
 Site English Spoken: Y
 Cultural Competency: N
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: Operation
 Samahan
 Website: www.operationsa
 mahan.org

**FAMILY HLTH CTR SAN
 DIEGO-BEACH AREA**

Provider ID: 402851
 3705 MISSION BLVD
 SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 Fax: (858) 488-1394
 After Hours Phone: (619)
 515-2444
 License Number: 080000115
 NPI: 1386689701
 Accepting New Patients: Y
 Min/Max Age: 0\150
 Site English Spoken: Y
 Cultural Competency: N
 Hours: M-W
 8:30AM-5:30PM
 TH 9:00AM-6:00PM
 F 8:30AM-5:30PM

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

PROVIDER
 Medical Group/IPA: Family
 Health Centers of San Diego
 Website: www.fhcsd.org
 Email: sabay@fhcsd.org

**LOGAN HEIGHTS FAMILY
 HEALTH CENTER**

Provider ID: 206360
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 Fax: (619) 234-2447
 After Hours Phone: (619)
 515-2300
 NPI: 1447281936
 Accepting New Patients: Y
 Min/Max Age: 0\150
 Site English Spoken: Y
 Cultural Competency: N

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: Family
 Health Centers of San Diego
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org

PROVIDER
 Medical Group/IPA: Family
 Health Centers of San Diego
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org

**SHERMAN HEIGHTS FAMILY
 HLTH CTRS INC**

Provider ID: 356145
 2391 ISLAND AVE
 SAN DIEGO, CA 92102
 Phone: (619) 515-2435
 Fax: (619) 515-2435
 After Hours Phone: (619)
 515-2435
 NPI: 1174549232
 Accepting New Patients: Y
 Min/Max Age: 0\150

PROVIDER
 Medical Group/IPA: Family
 Health Centers of San Diego
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**

Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: Family Health Centers of San Diego
Website: N/A
Email: dalvarado@fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
Phone: (619) 515-2422
Fax: (619) 269-0053
After Hours Phone: (619) 515-2422

License Number: 550003113
NPI: 1235521782
Accepting New Patients: Y
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N
Hours: M-F
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
Email: dalvarado@fhcsd.org

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

Provider ID: 517403

316 25TH ST
SAN DIEGO, CA 92102
Phone: (619) 238-5551
Fax: (619) 238-3807
After Hours Phone: (619) 238-5551

NPI: 1598308926
Accepting New Patients: Y
Min/Max Age: 0\120

Site English Spoken: Y
Cultural Competency: N
Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
Fax: (619) 687-1067
After Hours Phone: (619) 233-8500
License Number: 090000297
NPI: 1598122871

Accepting New Patients: N
Min/Max Age: 0\999

Site English Spoken: Y
Cultural Competency: N
Hours: M-F
8:00AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP
Website: N/A

SAN DIEGO AMERICAN INDIAN HEALTH CENTER

Provider ID: 207382
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0206
After Hours Phone: (619) 234-2158

License Number: 090000168
NPI: 1003902917
Accepting New Patients: Y
Min/Max Age: 0\150

Site English Spoken: Y
Site Languages(s) Spoken: Korean, Spanish, Hindi
Cultural Competency: N

Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: WWW.SDAIHC.ORG

FAMILY HEALTH CTR IBARRA

Provider ID: 417987
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
Fax: (619) 255-8002
After Hours Phone: (619) 515-2426

License Number: 550003108
NPI: 1477953933

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**

Accepting New Patients: Y

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

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

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego

Website: www.fhcsd.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

Fax: (858) 633-4682

After Hours Phone: (619) 280-2058

NPI: 1962483040

Accepting New Patients: Y

Min/Max Age: 0\22

Site English Spoken: Y

Cultural Competency: Y

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

Website: www.sdfamilycare.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 280-4213

Fax: (619) 795-9849

After Hours Phone: (619) 280-4213

NPI: 1336353721

Accepting New Patients: Y

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

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

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: La

Maestra Family Clinic

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233597

4290 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 563-0250

Fax: (858) 633-4681

After Hours Phone: (619) 563-0250

NPI: 1962483040

Accepting New Patients: Y

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

Website: www.sdfamilycare.org

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

Provider ID: 417429

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

Fax: (619) 501-5814

After Hours Phone: (619) 515-2525

License Number: 550002865

NPI: 1952729303

Accepting New Patients: Y

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

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

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego

Website: www.fhcsd.org
Email: janeta@fhcsd.org

FAMILY HEALTH CTR OF SD- ELM ST

Provider ID: 419167

140 ELM ST
SAN DIEGO, CA 92101

Phone: (619) 515-2520

Fax: (619) 231-0431

After Hours Phone: (619)

515-2520
License Number: 550002061
NPI: 1316419070
Accepting New Patients: Y
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
Hours: M-F
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
Email: jinah@fhcsd.org

DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782
1250 6TH AVE STE 100
SAN DIEGO, CA 92101
Phone: (619) 515-2430
Fax: (619) 578-2410
After Hours Phone: (619) 515-2430

License Number: 550002251
NPI: 1588901045
Accepting New Patients: Y
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
Hours: M-F
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

Email: jinah@fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142
5160 FEDERAL BLVD
SAN DIEGO, CA 92105
Phone: (619) 515-2454
Fax: (619) 794-2696

After Hours Phone: (619) 515-2454
License Number: 550003556
NPI: 1336525906
Accepting New Patients: Y
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
Hours: M-F
8:30AM-5:30PM

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: Family Health Centers of San Diego
Website: www.fhcsd.org
Email: nancyl@fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
Fax: (619) 263-2499

After Hours Phone: (619) 515-2560
NPI: 1982747671
Accepting New Patients: Y
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: Family Health Centers of San Diego
Website: www.fhcsd.org
Email: nancyl@fhcsd.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
Fax: (619) 595-0258

After Hours Phone: (619) 662-4100
NPI: 1326225632

Accepting New Patients: Y
Min/Max Age: 0\150
Site English Spoken: Y
Site Languages(s) Spoken: , Spanish
Cultural Competency: Y
Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: https://www.syhealth.org/locations

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 624977
2204 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2355

Fax: (619) 232-7011
 ☎ After Hours Phone: (619) 515-2355
 NPI: 1447281936
 Accepting New Patients: Y
 Min/Max Age: 0\150
 🗣 Site English Spoken: Y
 Cultural Competency: N
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 Medical Group/IPA: Family Health Centers of San Diego
 🌐 Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 664747
 📍 2114 NATIONAL AVE SAN DIEGO, CA 92113
 ☎ Phone: (619) 515-2406
 ☎ After Hours Phone: (619) 515-2406
 License Number: 550003556
 NPI: 1336525906
 Accepting New Patients: Y
 Min/Max Age: 0\999
 🗣 Site English Spoken: Y
 Cultural Competency: N
 🕒 Hours: M-F 8:30AM-5:30PM
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 Medical Group/IPA: Family Health Centers of San Diego
 🌐 Website: www.fhcsd.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 📍 950 S EUCLID AVE SAN DIEGO, CA 92114
 ☎ Phone: (619) 662-4100
 Fax: (619) 205-1952
 ☎ After Hours Phone: (619) 662-4100
 NPI: 1538262092
 Accepting New Patients: Y
 Min/Max Age: 0\150
 🗣 Site English Spoken: Y
 🗣 Site Languages(s) Spoken: Chinese, Spanish, Tagalog, Vietnamese
 Cultural Competency: Y
 🕒 Hours: M-F 8:00AM-5:00PM SA 8:00AM-4:00PM
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 🌐 Website: www.syhealth.org /clinics/king-chavez-health-center

NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492
 📍 1016 OUTER RD SAN DIEGO, CA 92154
 ☎ Phone: (619) 429-3733
 Fax: (619) 628-5550
 ☎ After Hours Phone: (619) 429-3733
 License Number: 550001474
 NPI: 1215246996
 Accepting New Patients: Y
 Min/Max Age: 0\150
 🗣 Site English Spoken: Y

🗣 Site Languages(s) Spoken: Spanish
 Cultural Competency: Y
 🕒 Hours: M 8:30AM-5:00PM TU-TH 8:30AM-8:00PM F 8:30AM-5:00PM
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP of Southern Cal-PHP
 🌐 Website: www.ibclinic.org
 Email: avaldez@ibclinic.org

SAN MARCOS





TRUECARE




Provider ID: 625875
 📍 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973
 ☎ Phone: 760-736-6767
 ☎ After Hours Phone: 760-736-6767
 License Number: PA22667
 Accepting New Patients: YES
 🗣 Site English Spoken: Yes
 🗣 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 🌐 Website: www.ihpsocal.org



TRUECARE

Provider ID: 625875
 📍 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973





**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D1
العيادات الصحية المؤهلة فيدرالياً**

 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
 License Number: PA51867
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
 Cultural Competency: No
 American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org






Fax: 760-736-8740
 After Hours Phone:
760-736-6767
 License Number: 80000167
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
 Cultural Competency: No
 American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

760-736-6767
 License Number: 20A15159
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
 Cultural Competency: No
 American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org






TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
 License Number: 20A17306
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
 Cultural Competency: No
 American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
Fax: 760-736-8740
 After Hours Phone:
760-736-6767
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
 Cultural Competency: No
 American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
 License Number: G74757
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Medical Group/IPA: TRUECARE
 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:

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**

License Number: A116562
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
 SAN MARCOS, CA
 92069-2973
 Phone: 760-736-6767
 After Hours Phone: 760-736-6767
 License Number: A48980
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
 SAN MARCOS, CA
 92069-2973
 Phone: 760-736-6767
 After Hours Phone: 760-736-6767
 License Number: A63903
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
 SAN MARCOS, CA
 92069-2973
 Phone: 760-736-6767
 After Hours Phone: 760-736-6767
 License Number: A93248
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
 SAN MARCOS, CA
 92069-2973
 Phone: 760-736-6767
 After Hours Phone: 760-736-6767
 License Number: A60958

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
 SAN MARCOS, CA
 92069-2973
 Phone: 760-736-6767
 After Hours Phone: 760-736-6767
 License Number: A71311
 Accepting New Patients: YES

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
 Accepting New Patients: YES
 Site English Spoken: Yes

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**

Site Languages(s) Spoken: Spanish	<i>Spanish</i>	<i>Cultural Competency: No</i>
<i>Cultural Competency: No</i>	<i>Cultural Competency: No</i>	<i>American Sign Language (ASL): N</i>
<i>American Sign Language (ASL): N</i>	Accessibility: CONTACT PROVIDER	Accessibility: CONTACT PROVIDER
Accessibility: CONTACT PROVIDER	<i>Medical Group/IPA: TRUECARE</i>	<i>Medical Group/IPA: TRUECARE</i>
<i>Medical Group/IPA: TRUECARE</i>	Website: www.ihpsocal.org	Website: www.ihpsocal.org
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

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

Phone: 760-736-6767

After Hours Phone: 760-736-6767

License Number: NM235844

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

Phone: 760-736-6767

After Hours Phone: 760-736-6767

License Number: NP18874

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

Phone: 760-736-6767

After Hours Phone: 760-736-6767

License Number: G71182

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

Phone: 760-736-6767

After Hours Phone: 760-736-6767

License Number: NM235997

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

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

Accepting New Patients: YES


Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً

American Sign Language (ASL): N

N
 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE  Website: www.ihpsocal.org


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NP21368


Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL): N

N
 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE  Website: www.ihpsocal.org


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NP95001653

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE  Website: www.ihpsocal.org

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NP95002545


Accepting New Patients: YES


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE  Website: www.ihpsocal.org


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NP95003903

Accepting New Patients: YES


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE  Website: www.ihpsocal.org


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: PA17101

Accepting New Patients: YES


Site English Spoken: Yes


Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE  Website: www.ihpsocal.org


 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: PA19825

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish






Cultural Competency: No

American Sign Language (ASL):





 Accessibility: CONTACT

PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE




Provider ID: 625875
 1595 GRAND AVE STE 100
 SAN MARCOS, CA
 92069-2973
 Phone: 760-736-6767
 After Hours Phone:
 760-736-6767
 License Number: PA21723
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE




Provider ID: 625875
 1595 GRAND AVE STE 100
 SAN MARCOS, CA
 92078-2450
 Phone: 760-520-8200
 Fax: 360-462-2749
 After Hours Phone:
 760-520-8200
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
 SAN MARCOS, CA
 92078-2450
 Phone: 760-520-8200
 Fax: 360-462-2749
 After Hours Phone:
 760-520-8200
 License Number: 80000167
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org






TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
 SAN MARCOS, CA
 92078-2450
 Phone: 760-736-6767
 Fax: 760-736-6744
 After Hours Phone:
 760-736-6767
 License Number: 1598122871
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
 SAN MARCOS, CA
 92078-2450
 Phone: 760-736-6767
 Fax: 760-736-6744
 After Hours Phone:
 760-736-6767
 License Number: NP18788
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: TRUECARE
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE


Provider ID: 614511

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**

 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

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

 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

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 206426

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

License Number: 080000167

NPI: 1245246917


Accepting New Patients: Y

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Cultural Competency: N

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

SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 206426

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

License Number: 080000167

NPI: 1598484255


Accepting New Patients: Y

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Cultural Competency: N

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

SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 206426

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

License Number: 080000167

NPI: 1811617939


Accepting New Patients: Y

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Cultural Competency: N

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

SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 614511

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)

736-6767
 License Number: 080000167
 NPI: 1811617939
 Accepting New Patients: Y
 Min/Max Age: 0\999
 Site English Spoken: Y
 Cultural Competency: N
 Hours: M-F
 8:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP of
 Southern Cal-PHP
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 614511
 1595 GRAND AVE STE 106
 SAN MARCOS, CA 92078
 Phone: (760) 736-6767
 Fax: (760) 736-6744
 After Hours Phone: (760)
 736-6767
 License Number: 080000167
 NPI: 1245246917
 Accepting New Patients: Y
 Min/Max Age: 0\999
 Site English Spoken: Y
 Cultural Competency: N
 Hours: M-F
 8:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP of
 Southern Cal-PHP
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 614511
 1595 GRAND AVE STE 106
 SAN MARCOS, CA 92078
 Phone: (760) 736-6767
 Fax: (760) 736-6744
 After Hours Phone: (760)
 736-6767
 License Number: 080000167
 NPI: 1598484255
 Accepting New Patients: Y
 Min/Max Age: 0\999
 Site English Spoken: Y
 Cultural Competency: N
 Hours: M-F
 8:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP of
 Southern Cal-PHP
 Website: www.ihpsocal.org

SAN YSIDRO


**SAN YSIDRO HLTH SAN DIEGO
 PACE SENIOR HLTH SVS**
 Provider ID: 227469
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322
 Phone: 619-600-4867
 After Hours Phone:
 619-600-4867
 License Number: PA22855
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN


YSIDRO HLTH SAN DIEGO
 PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org
**SAN YSIDRO HLTH SAN DIEGO
 PACE SENIOR HLTH SVS**
 Provider ID: 227469
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322
 Phone: 619-600-4870
 After Hours Phone:
 619-600-4870
 License Number: NP95018617
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HLTH SAN DIEGO
 PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org

**SAN YSIDRO HLTH SAN DIEGO
 PACE SENIOR HLTH SVS**
 Provider ID: 227469
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: A113624
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN



**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**

*YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org*


*YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org*

*YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org*


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

*Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A120584
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org*




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

*Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A32571
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org*

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

*Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A153975
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org*

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

*Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A164201
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN*

**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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN*

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

*Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A145480
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN*




**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**

*YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org*

*YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org*


*YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org*

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

*Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A51843*

*Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No*




*American Sign Language (ASL):
N*

* Accessibility: CONTACT
PROVIDER*

*Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS*

 Website: www.ihpsocal.org

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

*Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A40473*

*Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No*



*American Sign Language (ASL):
N*

* Accessibility: CONTACT
PROVIDER*

*Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS*

 Website: www.ihpsocal.org

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

*Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: G66745*

*Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No*




*American Sign Language (ASL):
N*

* Accessibility: CONTACT
PROVIDER*

*Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS*


 Website: www.ihpsocal.org

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

*Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: C42207*




*Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No*

*American Sign Language (ASL):
N*

* Accessibility: CONTACT
PROVIDER*

Medical Group/IPA: SAN

**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*




*Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No*

*American Sign Language (ASL):
N*

* Accessibility: CONTACT
PROVIDER*

Medical Group/IPA: SAN

**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*

*Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No*


*American Sign Language (ASL):
N*

* Accessibility: CONTACT
PROVIDER*

Medical Group/IPA: SAN

**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**

*YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org*



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PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org*

*YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org*

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

*Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: NP95004315
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org*

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

*Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: DPM2930
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org*

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

*Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: NP95001960
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org*

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

*Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: NP95003671
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN*

**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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN*

**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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN*

*YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
Website: www.ihpsocal.org*

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

*Provider ID: 227469
3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
Phone: 619-662-4100
After Hours Phone:
619-662-4100
License Number: PT302385
Accepting New Patients: YES
Site English Spoken: Yes
Cultural Competency: No*

*American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
Website: www.ihpsocal.org*

**SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR**

*Provider ID: 227411
4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
Phone: 619-662-4100
After Hours Phone:
619-662-4100
License Number: 20A14949
Accepting New Patients: YES
Site English Spoken: Yes
Cultural Competency: No*

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

*PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
Website: www.ihpsocal.org*

**SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR**

*Provider ID: 227411
4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
Phone: 619-662-4100
After Hours Phone:
619-662-4100*

*License Number: 20A8516
Accepting New Patients: YES
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER*

*Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
Website: www.ihpsocal.org*

**SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR**

*Provider ID: 227411
4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
Phone: 619-662-4100
After Hours Phone:
619-662-4100*

*License Number: 20A14222
Accepting New Patients: YES
Site English Spoken: Yes*

*Cultural Competency: No
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
Website: www.ihpsocal.org*

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

*Provider ID: 227469
3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
Phone: 619-662-4100
After Hours Phone:
619-662-4100*

*License Number: PA58672
Accepting New Patients: YES
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER*

*Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
Website: www.ihpsocal.org*

**SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR**

*Provider ID: 227411
4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
Phone: 619-662-4100
After Hours Phone:
619-662-4100*

License Number: 20A12555

Accepting New Patients: YES

☐ Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

🌐 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

📍 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322

☎ Phone: 619-662-4100

Fax: 619-600-4870

🕒 After Hours Phone: 619-662-4100

Accepting New Patients: YES

☐ Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

🌐 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

📍 4050 BEYER BLVD SAN YSIDRO, CA 92173-2007

☎ Phone: 619-662-4100

🕒 After Hours Phone:

619-662-4100

License Number: A112627

Accepting New Patients: YES

☐ Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

🌐 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

📍 4050 BEYER BLVD SAN YSIDRO, CA 92173-2007

☎ Phone: 619-662-4100

🕒 After Hours Phone: 619-662-4100

License Number: A113914

Accepting New Patients: YES

☐ Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

🌐 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: A138938

Accepting New Patients: YES

☐ Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

🌐 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

📍 4050 BEYER BLVD SAN YSIDRO, CA 92173-2007

☎ Phone: 619-662-4100

🕒 After Hours Phone: 619-662-4100

License Number: A111118

Accepting New Patients: YES

☐ Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

🌐 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
 MATERNAL AND CHILD
 HEALTH CTR**

Provider ID: 227411

4050 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007

Phone: 619-662-4100

After Hours Phone:
 619-662-4100

License Number: A157505

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: SAN
 YSIDRO HEALTH MATERNAL
 AND CHILD HEALTH CTR

Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
 MATERNAL AND CHILD
 HEALTH CTR**

Provider ID: 227411

4050 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007

Phone: 619-662-4100

After Hours Phone:
 619-662-4100

License Number: A169577

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: SAN

**YSIDRO HEALTH MATERNAL
 AND CHILD HEALTH CTR**

Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
 MATERNAL AND CHILD
 HEALTH CTR**

Provider ID: 227411

4050 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007

Phone: 619-662-4100

After Hours Phone:
 619-662-4100

License Number: A175006

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: SAN
 YSIDRO HEALTH MATERNAL
 AND CHILD HEALTH CTR

Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
 MATERNAL AND CHILD
 HEALTH CTR**

Provider ID: 227411

4050 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007

Phone: 619-662-4100

After Hours Phone:
 619-662-4100

License Number: A178949

Accepting New Patients: YES

Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: SAN

YSIDRO HEALTH MATERNAL
 AND CHILD HEALTH CTR

Website: www.ihpsocal.org

**SAN YSIDRO HEALTH SAN
 YSIDRO HEALTH CENTER**

Provider ID: 206292

4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007

Phone: 619-662-4100

Fax: 619-205-6341

After Hours Phone:
 619-662-4100

License Number: A164201

Accepting New Patients: YES

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

Cultural Competency: No

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: SAN
 YSIDRO HEALTH SAN YSIDRO
 HEALTH CENTER

Website: www.ihpsocal.org






**SAN YSIDRO HEALTH SAN
 YSIDRO HEALTH CENTER**

Provider ID: 206292







4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007

Phone: 619-662-4100

Fax: 619-205-6341




 After Hours Phone:
619-662-4100
License Number: A55469
Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER**

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
Fax: 619-205-6341
 After Hours Phone:
619-662-4100
License Number: 20A7241
Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER**


Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
Fax: 619-205-6341
 After Hours Phone:
619-662-4100
License Number: DPM2930
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR**

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
Fax: 619-205-1948
 After Hours Phone:
619-662-4100
License Number: A72721
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 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: A49307
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR







 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR**

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
Fax: 619-205-1948
 After Hours Phone:
619-662-4100







License Number: A82187
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH MATERNAL
 AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
 MATERNAL AND CHILD
 HEALTH CTR**







Provider ID: 227411
 4050 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 Phone: 619-662-4100
 Fax: 619-205-1948
 After Hours Phone:
 619-662-4100
 License Number: G20087
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH MATERNAL
 AND CHILD HEALTH CTR
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH MATERNAL
 AND CHILD HEALTH CTR
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH MATERNAL
 AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
 MATERNAL AND CHILD
 HEALTH CTR**




Provider ID: 227411
 4050 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: A74960
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH MATERNAL
 AND CHILD HEALTH CTR
 Website: www.ihpsocal.org



**SAN YSIDRO HEALTH
 MATERNAL AND CHILD
 HEALTH CTR**

Provider ID: 227411
 4050 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: A94813
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER





Medical Group/IPA: SAN
 YSIDRO HEALTH MATERNAL
 AND CHILD HEALTH CTR
 Website: www.ihpsocal.org






**SAN YSIDRO HEALTH
 MATERNAL AND CHILD
 HEALTH CTR**

Provider ID: 227411
 4050 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: C149818
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH MATERNAL
 AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
 MATERNAL AND CHILD
 HEALTH CTR**

Provider ID: 227411
 4050 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: C158543
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No


American Sign Language (ASL): License Number: G52183
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH MATERNAL
 AND CHILD HEALTH CTR
 Website: www.ihpsocal.org
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH MATERNAL
 AND CHILD HEALTH CTR
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No



American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH MATERNAL
 AND CHILD HEALTH CTR
 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







**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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH MATERNAL
 AND CHILD HEALTH CTR
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish, Tagalog,
 Portuguese
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH SAN YSIDRO
 HEALTH CENTER
 Website: www.ihpsocal.org








**SAN YSIDRO HEALTH SAN
 YSIDRO HEALTH CENTER**
 Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: A180886
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish, Tagalog,
 Portuguese
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH SAN YSIDRO


HEALTH CENTER
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH SAN
 YSIDRO HEALTH CENTER**
 Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: A177337
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish, Tagalog,
 Portuguese
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH SAN YSIDRO
 HEALTH CENTER
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH SAN
 YSIDRO HEALTH CENTER**
 Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: A173435
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish, Tagalog,







Portuguese
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH SAN YSIDRO
 HEALTH CENTER
 Website: www.ihpsocal.org





**SAN YSIDRO HEALTH SAN
 YSIDRO HEALTH CENTER**
 Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: A170738
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish, Tagalog,
 Portuguese
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH SAN YSIDRO
 HEALTH CENTER
 Website: www.ihpsocal.org



**SAN YSIDRO HEALTH SAN
 YSIDRO HEALTH CENTER**
 Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007

 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: A169694
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish, Tagalog,
 Portuguese
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH SAN YSIDRO
 HEALTH CENTER
 Website: www.ihpsocal.org






**SAN YSIDRO HEALTH SAN
 YSIDRO HEALTH CENTER**

Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: A158364
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish, Tagalog,
 Portuguese
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH SAN YSIDRO
 HEALTH CENTER

 Website: www.ihpsocal.org
**SAN YSIDRO HEALTH SAN
 YSIDRO HEALTH CENTER**
 Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: A145008
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish, Tagalog,
 Portuguese
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH SAN YSIDRO
 HEALTH CENTER
 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


**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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish, Tagalog,
 Portuguese
 Cultural Competency: No




American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH SAN YSIDRO
 HEALTH CENTER
 Website: www.ihpsocal.org



**SAN YSIDRO HEALTH SAN
 YSIDRO HEALTH CENTER**






Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: A175006
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish, Tagalog,
 Portuguese
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: SAN
 YSIDRO HEALTH SAN YSIDRO
 HEALTH CENTER
 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: A66885
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org




SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
 License Number: A63844
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
 Cultural Competency: No
 American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org




SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
 License Number: A49267
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
 Cultural Competency: No
 American Sign Language (ASL):



N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
 License Number: A56153
 Accepting New Patients: YES


Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
 Cultural Competency: No
 American Sign Language (ASL):



N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100




License Number: A49307
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org



SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
 License Number: A71304
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
 Cultural Competency: No
 American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org



SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER
 Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
 License Number: A72235
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
 Cultural Competency: No
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
 License Number: A80832
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
 Cultural Competency: No
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org




SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100

License Number: A84160
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
 Cultural Competency: No
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
 License Number: DC33693


Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً

Accepting New Patients: YES

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

Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100


License Number: C51110

Accepting New Patients: YES

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

Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


 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: A99433

Accepting New Patients: YES

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

Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100


License Number: A77936

Accepting New Patients: YES

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

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: A93785

Accepting New Patients: YES

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

Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007




 Phone: 619-662-4100

Fax: 619-205-6305








 After Hours Phone: 619-662-4100

Accepting New Patients: YES


- Site English Spoken: Yes







 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER







Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: G81461
Accepting New Patients: YES
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *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: PA20490
Accepting New Patients: YES
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER






Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: NP95003355
Accepting New Patients: YES
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

HEALTH CENTER
 *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: PA17162
Accepting New Patients: YES
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: NP12112
Accepting New Patients: YES
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken: Spanish, Tagalog,*

Portuguese
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH SAN YSIDRO
 HEALTH CENTER
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH SAN
 YSIDRO HEALTH CENTER**







Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: G80107
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish, Tagalog,
 Portuguese
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH SAN YSIDRO
 HEALTH CENTER
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH SAN
 YSIDRO HEALTH CENTER**

Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007








 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: G59670
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish, Tagalog,
 Portuguese
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH SAN YSIDRO
 HEALTH CENTER
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH SAN
 YSIDRO HEALTH CENTER**






Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: C42207
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish, Tagalog,
 Portuguese
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH SAN YSIDRO
 HEALTH CENTER

 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: G51462
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish, Tagalog,
 Portuguese
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: SAN
 YSIDRO HEALTH SAN YSIDRO
 HEALTH CENTER
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH SAN
 YSIDRO HEALTH CENTER**

Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 License Number: A131952
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish, Tagalog,
 Portuguese
 Cultural Competency: No

American Sign Language (ASL): 619-662-4100
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100


License Number: A131021
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
 Cultural Competency: No
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 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:



License Number: A127188
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
 Cultural Competency: No
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org




SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100

License Number: A130348
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
 Cultural Competency: No
 American Sign Language (ASL):




N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 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: A132982
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
 Cultural Competency: No
 American Sign Language (ASL):



N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
 License Number: A138568
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
 Cultural Competency: No
 American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: A157505
Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*



License Number: A145480
Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER




Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*


License Number: A101827
Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*




SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: A104660
Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL):



N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER




Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: A106103
Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL):



N



.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal .D1 العيادات الصحية المؤهلة فيدرالياً

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: A113482



Accepting New Patients: YES
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*




SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: A114008



Accepting New Patients: YES
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: A114893

Accepting New Patients: YES
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*
Cultural Competency: No
American Sign Language (ASL): N




 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*



SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: A125329
Accepting New Patients: YES
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: 20A9907




Accepting New Patients: YES
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*
Cultural Competency: No
American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*



**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
D1. العيادات الصحية المؤهلة فيدرالياً**

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER**

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: 20A8081


Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER**




Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A101017



Accepting New Patients: YES
 Site English Spoken: Yes



 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org



**SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER**



Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: 20A17643

Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 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
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER**

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: 20A7502

Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO


HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007

 Phone: 619-205-6341

 After Hours Phone:
 619-205-6341

License Number: A64487

Accepting New Patients: YES

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

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: SAN
 YSIDRO HEALTH SAN YSIDRO
 HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007

 Phone: 619-428-4463

 After Hours Phone:
 619-428-4463

License Number: 20A8245

Accepting New Patients: YES

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

Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: SAN
 YSIDRO HEALTH SAN YSIDRO
 HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007

 Phone: 619-428-4463

 After Hours Phone:
 619-428-4463

License Number: A112627

Accepting New Patients: YES

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

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: SAN
 YSIDRO HEALTH SAN YSIDRO
 HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007

 Phone: 619-662-4100

 After Hours Phone:
 619-662-4100

License Number: 20A10964

Accepting New Patients: YES

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

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: SAN
 YSIDRO HEALTH SAN YSIDRO
 HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007

 Phone: 619-662-4100

 After Hours Phone:
 619-662-4100

License Number: 20A11153

Accepting New Patients: YES

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

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: SAN
 YSIDRO HEALTH SAN YSIDRO
 HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007


 Phone: 619-662-4100

 After Hours Phone:
 619-662-4100

License Number: 20A12653

Accepting New Patients: YES

 Site English Spoken: Yes

 Site Languages(s) Spoken:
 Spanish, Tagalog,
 Portuguese

Cultural Competency: No

American Sign Language (ASL):
 N


 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: SAN
 YSIDRO HEALTH SAN YSIDRO
 HEALTH CENTER

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
 SAN YSIDRO, CA
 92173-2007

 Phone: 619-662-4100


Fax: 619-205-6341

 After Hours Phone:
 619-662-4100

License Number: A78373

Accepting New Patients: YES

 Site English Spoken: Yes

 Site Languages(s) Spoken:
 Spanish, Tagalog,

Portuguese

Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: SAN
 YSIDRO HEALTH SAN YSIDRO
 HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
 SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 600-4870


 After Hours Phone: (619)
 662-4100

NPI: 1801438239


Accepting New Patients: Y

Min/Max Age: 0\150

 Site English Spoken: Y

 Site Languages(s) Spoken: ,
 Spanish


Cultural Competency: Y

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

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: IHP of
 Southern Cal-PHP


 Website: <https://www.syhealth.org/locations>

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


Provider ID: 206292

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6305


 After Hours Phone: (619)
 662-4100

NPI: 1952364747


Accepting New Patients: Y

Min/Max Age: 0\150

 Site English Spoken: Y

 Site Languages(s) Spoken:
 Spanish, Tagalog,
 Portuguese


Cultural Competency: Y

 Hours: M-F
 8:00AM-5:30PM
 SA 8:30AM-2:00PM

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: IHP of
 Southern Cal-PHP

 Website: www.syhealth.org/clinics/san-ysidro-health-center


SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
 SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1967


 After Hours Phone: (619)
 662-4100




NPI: 1558852947





Accepting New Patients: Y

Min/Max Age: 0\150

 Site English Spoken: Y

 Site Languages(s) Spoken:
 Spanish, Tagalog
 Cultural Competency: Y







 Hours: M-F
 8:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP of
 Southern Cal-PHP
 Website: syhealth.org/clinics/maternal-child-health-center


 Phone: 619-515-2555
 After Hours Phone:
 619-515-2555
 License Number: 20A14919
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:

SPRING VALLE, CA
 91977-4035
 Phone: 619-515-2555
 After Hours Phone:
 619-515-2555
 License Number: A108228
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER







SPRING VALLE


**GROSSMONT SPRING VALLEY
 FAMILY HLTH CTRS INC**

Provider ID: 206361
 8788 JAMACHA RD
 SPRING VALLE, CA
 91977-4035
 Phone: 619-515-2555
 After Hours Phone:
 619-515-2555
 License Number: 20A11535
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 GROSSMONT SPRING VALLEY
 FAMILY HLTH CTRS INC
 Website: www.fhcsd.org







GROSSMONT SPRING VALLEY
 FAMILY HLTH CTRS INC
 Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY
 FAMILY HLTH CTRS INC**


Provider ID: 206361
 8788 JAMACHA RD
 SPRING VALLE, CA
 91977-4035
 Phone: 619-515-2555
 After Hours Phone:
 619-515-2555
 License Number: 20A15459
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 GROSSMONT SPRING VALLEY
 FAMILY HLTH CTRS INC
 Website: www.fhcsd.org

Medical Group/IPA:
 GROSSMONT SPRING VALLEY
 FAMILY HLTH CTRS INC
 Website: www.fhcsd.org


**GROSSMONT SPRING VALLEY
 FAMILY HLTH CTRS INC**

Provider ID: 206361
 8788 JAMACHA RD
 SPRING VALLE, CA
 91977-4035
 Phone: 619-515-2555
 After Hours Phone:
 619-515-2555
 License Number: A113001
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 GROSSMONT SPRING VALLEY
 FAMILY HLTH CTRS INC
 Website: www.fhcsd.org






**GROSSMONT SPRING VALLEY
 FAMILY HLTH CTRS INC**






Provider ID: 206361
 8788 JAMACHA RD
 SPRING VALLE, CA
 91977-4035






**GROSSMONT SPRING VALLEY
 FAMILY HLTH CTRS INC**

Provider ID: 206361
 8788 JAMACHA RD







**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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 GROSSMONT SPRING VALLEY
 FAMILY HLTH CTRS INC
 Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY
 FAMILY HLTH CTRS INC**
 Provider ID: 206361
 8788 JAMACHA RD
 SPRING VALLE, CA
 91977-4035
 Phone: 619-515-2555
 After Hours Phone:
 619-515-2555
 License Number: A116680
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 GROSSMONT SPRING VALLEY
 FAMILY HLTH CTRS INC
 Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY
 FAMILY HLTH CTRS INC**
 Provider ID: 206361
 8788 JAMACHA RD
 SPRING VALLE, CA
 91977-4035
 Phone: 619-515-2555
 After Hours Phone:
 619-515-2555
 License Number: A148014
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 GROSSMONT SPRING VALLEY
 FAMILY HLTH CTRS INC
 Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY
 FAMILY HLTH CTRS INC**
 Provider ID: 206361
 8788 JAMACHA RD
 SPRING VALLE, CA
 91977-4035
 Phone: 619-515-2555
 After Hours Phone:
 619-515-2555
 License Number: A149063
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 GROSSMONT SPRING VALLEY
 FAMILY HLTH CTRS INC





 Website: www.fhcsd.org
**GROSSMONT SPRING VALLEY
 FAMILY HLTH CTRS INC**
 Provider ID: 206361
 8788 JAMACHA RD
 SPRING VALLE, CA
 91977-4035
 Phone: 619-515-2555
 After Hours Phone:
 619-515-2555
 License Number: A154298
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 GROSSMONT SPRING VALLEY
 FAMILY HLTH CTRS INC
 Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY
 FAMILY HLTH CTRS INC**
 Provider ID: 206361
 8788 JAMACHA RD
 SPRING VALLE, CA
 91977-4035
 Phone: 619-515-2555
 After Hours Phone:
 619-515-2555
 License Number: A163464
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:


**Blue Shield Promise Medi-Cal قائمة مقدمي الخدمات بشبكة .D
.D1 العيادات الصحية المؤهلة فيدرالياً**

*GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC*
 Website: www.fhcsd.org



**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**

Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: A164859
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:
*GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC*
 Website: www.fhcsd.org





**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**

Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: A169342
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):


N
 Accessibility: CONTACT

PROVIDER
Medical Group/IPA:
*GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC*
 Website: www.fhcsd.org





**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**

Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: A178499
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER




Medical Group/IPA:
*GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC*
 Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**


Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: A55932
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
*GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC*
 Website: www.fhcsd.org





**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**

Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: A68463
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:
*GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC*
 Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**

Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: A76059
Accepting New Patients: YES
 Site English Spoken: Yes

Cultural Competency: No
American Sign Language (ASL): *N*
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA:
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*




GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361
 8788 JAMACHA RD
 SPRING VALLE, CA
 91977-4035
 *Phone: 619-515-2555*
 *After Hours Phone: 619-515-2555*
License Number: G78814

Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): *N*




 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA:
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361
 8788 JAMACHA RD
 SPRING VALLE, CA
 91977-4035
 *Phone: 619-515-2555*
 *After Hours Phone: 619-515-2555*
License Number: NP10943

Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): *N*
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA:
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*




GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC



Provider ID: 206361
 8788 JAMACHA RD
 SPRING VALLE, CA
 91977-4035
 *Phone: 619-515-2555*
 *After Hours Phone: 619-515-2555*
License Number: NP95013978

Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): *N*




 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA:
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361
 8788 JAMACHA RD
 SPRING VALLE, CA
 91977-4035
 *Phone: 619-515-2555*
 *After Hours Phone:*

619-515-2555
License Number: PA54588
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): *N*
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA:
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC





Provider ID: 206361
 8788 JAMACHA RD
 SPRING VALLE, CA
 91977-4035
 *Phone: 619-515-2555*
Fax: 619-462-5584
 *After Hours Phone: 619-515-2555*

Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): *N*







 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA:
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

SPRING VALLEY







GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Provider ID: 206361

 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
 Phone: 619-515-2555
 After Hours Phone:
 619-515-2555
 License Number: C174771
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 GROSSMONT SPRING VALLEY
 FAMILY HLTH CTRS INC
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 GROSSMONT SPRING VALLEY
 FAMILY HLTH CTRS INC
 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: A118095
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA:
 GROSSMONT SPRING VALLEY
 FAMILY HLTH CTRS INC
 Website: www.fhcsd.org









**GROSSMONT SPRING VALLEY
 FAMILY HLTH CTRS INC**

Provider ID: 206361
 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 Fax: (619) 462-5584
 After Hours Phone: (619)
 515-2555
 NPI: 1508801069
 Accepting New Patients: Y
 Min/Max Age: 0\150
 Site English Spoken: Y
 Cultural Competency: N
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: Family
 Health Centers of San Diego
 Website: www.fhcsd.org





Email: angelad@fhcsd.org

VALLEY CENTER


**NEIGHBORHOOD
 HEALTHCARE**

Provider ID: 519918
 28477 LIZARD ROCKS RD
 VALLEY CENTER, CA 92082
 Phone: (760) 742-9919
 Fax: (360) 462-2750
 After Hours Phone: (760)
 742-9919
 License Number: 080000397
 NPI: 1437335148
 Accepting New Patients: Y
 Min/Max Age: 0\999
 Site English Spoken: Y
 Cultural Competency: N
 Hours: M-F
 8:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP of
 Southern Cal-PHP
 Website: N/A


**NEIGHBORHOOD
 HEALTHCARE**

Provider ID: 519918
 28477 LIZARD ROCKS RD
 VALLEY CENTER, CA 92082
 Phone: (760) 742-9919
 Fax: (360) 462-2750
 After Hours Phone: (760)
 742-9919
 License Number: 080000483
 NPI: 1437335148
 Accepting New Patients: Y
 Min/Max Age: 0\999

 Site English Spoken: Y
 Cultural Competency: N

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

American Sign Language (ASL): License Number: 080000483
 N NPI: 1437335148

 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: IHP of
 Southern Cal-PHP

 Website: N/A

**NEIGHBORHOOD
 HEALTHCARE**

Provider ID: 519918

 28477 LIZARD ROCKS RD
 VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

Fax: (360) 462-2750


 After Hours Phone: (760)
 742-9919


License Number: 080000397

NPI: 1437335148

Accepting New Patients: Y

Min/Max Age: 0\999

 Site English Spoken: Y
 Cultural Competency: N

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

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: IHP of
 Southern Cal-PHP


 Website: N/A

**NEIGHBORHOOD
 HEALTHCARE**

Provider ID: 519918

 28477 LIZARD ROCKS RD
 VALLEY CENTER, CA 92082


 Phone: (760) 742-9919
 Fax: (360) 462-2750

 After Hours Phone: (760)
 742-9919

License Number: 080000483
 NPI: 1437335148

Accepting New Patients: Y
 Min/Max Age: 0\999

 Site English Spoken: Y
 Cultural Competency: N

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

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: IHP of
 Southern Cal-PHP


 Website: N/A


VISTA

**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

Accepting New Patients: YES

 Site English Spoken: Yes
 Cultural Competency: No

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: VISTA
 COMMUNITY CLINIC


GRAPEVINE

 Website: N/A


**VISTA COMMUNITY CLINIC
 GRAPEVINE**

Provider ID: 400339

 136 GRAPEVINE RD
 VISTA, CA 92083-4004

 Phone: 760-631-5000

Fax: 760-414-3892

 After Hours Phone:
 760-631-5000

License Number: 80000328

Accepting New Patients: YES

 Site English Spoken: Yes
 Cultural Competency: Yes

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: VISTA
 COMMUNITY CLINIC


GRAPEVINE

 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

Accepting New Patients: YES

 Site English Spoken: Yes
 Cultural Competency: No







American Sign Language (ASL):
 N







 Accessibility: CONTACT
 PROVIDER





Medical Group/IPA: VCC
 DURIAN

 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: VCC
 DURIAN
 Website: N/A







Provider ID: 400339
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
 Phone: 760-631-5000
 After Hours Phone:
 760-631-5000
 License Number: DC32054
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: VISTA
 COMMUNITY CLINIC
 GRAPEVINE
 Website: N/A

Provider ID: 400339
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
 Phone: 760-631-5000
 After Hours Phone:
 760-631-5000
 License Number: PA20775
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: VISTA
 COMMUNITY CLINIC
 GRAPEVINE
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: VCC
 DURIAN
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: VISTA
 COMMUNITY CLINIC
 GRAPEVINE
 Website: N/A

**VISTA COMMUNITY CLINIC
GRAPEVINE**

Provider ID: 400339
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
 Phone: 760-631-5000
 After Hours Phone:
 760-631-5000
 License Number: RN410247
 Accepting New Patients: YES
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: VISTA
 COMMUNITY CLINIC
 GRAPEVINE
 Website: N/A

**VISTA COMMUNITY CLINIC
GRAPEVINE**

**VISTA COMMUNITY CLINIC
GRAPEVINE**

**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

Accepting New Patients: YES

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: VISTA
 COMMUNITY CLINIC

GRAPEVINE

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

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
 Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: VISTA
 COMMUNITY CLINIC

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

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
 Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: VISTA
 COMMUNITY CLINIC

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR
 VISTA, CA 92084-5218

Phone: 760-631-5000

After Hours Phone:
 760-631-5000

License Number: 20A13745

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
 Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: VISTA
 COMMUNITY CLINIC

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

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
 Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: VISTA
 COMMUNITY CLINIC

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR
 VISTA, CA 92084-5218

Phone: 760-414-3892

Fax: 760-414-3892

After Hours Phone:
 760-414-3892

License Number: 20A9149

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
 Spanish

Cultural Competency: No

American Sign Language (ASL):

N


Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: VISTA
 COMMUNITY CLINIC


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: 20A18374


Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC

 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: 20A7241

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA


COMMUNITY CLINIC


 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

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: A125026

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish


Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 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

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: A56214

Accepting New Patients: YES

Site English Spoken: Yes




Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
 License Number: DC32054




Accepting New Patients: YES

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

Cultural Competency: No
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org



VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
 License Number: DPM3999



Accepting New Patients: YES

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

Cultural Competency: No

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC



Provider ID: 206338
 1000 VALE TERRACE DR VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000

License Number: G51286



Accepting New Patients: YES

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

Cultural Competency: No
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000

License Number: G79676

Accepting New Patients: YES

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

Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000

License Number: G86902

Accepting New Patients: YES

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

Cultural Competency: No
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC






Provider ID: 206338
 1000 VALE TERRACE DR VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000

License Number: C171929




Accepting New Patients: YES



Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC






Provider ID: 206338
 1000 VALE TERRACE DR VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
 License Number: C52564
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC




Provider ID: 206338
 1000 VALE TERRACE DR VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
 License Number: A62780



Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC






Provider ID: 206338
 1000 VALE TERRACE DR VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
 License Number: A80635
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC


Provider ID: 206338
 1000 VALE TERRACE DR VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone:

760-631-5000
 License Number: C143703
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org




VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
 License Number: C162072
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org






VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR VISTA, CA 92084-5218

**.D قائمة مقدمي الخدمات بشبكة Blue Shield Promise Medi-Cal
.D1 العيادات الصحية المؤهلة فيدرالياً**






 Phone: 844-308-5003
 After Hours Phone:
 844-308-5003
 License Number: NP11448
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: VISTA
 COMMUNITY CLINIC
 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: PA20775
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: VISTA
 COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC






Provider ID: 206338

 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone:
 760-631-5000
 License Number: NP95016368
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: VISTA
 COMMUNITY CLINIC
 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
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: VISTA
 COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone:
 760-631-5000
 License Number: NP10896
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: VISTA
 COMMUNITY CLINIC
 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: NP95003571
 Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: VISTA
 COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR
 VISTA, CA 92084-5218

Phone: 760-631-5000

After Hours Phone:
 760-631-5000

License Number: NP95009149

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
 Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: VISTA
 COMMUNITY CLINIC

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR
 VISTA, CA 92084-5218

Phone: 760-631-5000

After Hours Phone:
 760-631-5000

License Number: NP95009284

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
 Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: VISTA
 COMMUNITY CLINIC

Website: www.vistacommunityclinic.org

nityclinic.org

**VISTA COMMUNITY CLINIC
 GRAPEVINE**

Provider ID: 400339

134 GRAPEVINE RD
 VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
 631-5000

License Number: 080000328

NPI: 1851300123

Accepting New Patients: Y

Min/Max Age: 0\999

Site English Spoken: Y
 Cultural Competency: Y

Hours: M 8:00AM-5:00PM
 TU 10:30AM-7:30PM
 W-F 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: IHP of
 Southern Cal-PHP

Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

VCC DURIAN

Provider ID: 411518

105 DURIAN ST STE A
 VISTA, CA 92083

Phone: (844) 308-5003

Fax: (760) 414-3892

After Hours Phone: (844)
 308-5003

License Number: 080000328

NPI: 1851300123

Accepting New Patients: Y

Min/Max Age: 0\999

Site English Spoken: Y
 Cultural Competency: Y

Hours: M-F
 8:30AM-5:00PM

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: IHP of
 Southern Cal-PHP

Website: www.vistacommunityclinic.org

VCC DURIAN

Provider ID: 411518

105 DURIAN ST STE A
 VISTA, CA 92083

Phone: (844) 308-5003

Fax: (760) 414-3892

After Hours Phone: (844)
 308-5003

License Number: 1851300123

NPI: 1851300123

Accepting New Patients: Y

Min/Max Age: 0\999

Site English Spoken: Y
 Cultural Competency: Y

Hours: M-F
 8:30AM-5:00PM

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Medical Group/IPA: IHP of
 Southern Cal-PHP

Website: www.vistacommunityclinic.org

ALPINE

CERTIFIED NURSE PRACTITIONER

KAHL, NICHOLAS

Provider ID: 517802

Provider Gender: Male

License Number: NP95006360

NPI: 1821306598

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

KAHL, NICHOLAS

Provider ID: 517802

Provider Gender: Male

License Number: NP95006360

NPI: 1821306598

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.mtnhealth.org

g
Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SANDERS, JESSICA

Provider ID: 517802

Provider Gender: Female

License Number: NP23004

NPI: 1760765333

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SANDERS, JESSICA

Provider ID: 517802

Provider Gender: Female

License Number: NP23004

NPI: 1760765333

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA

Provider ID: 517802

Provider Gender: Female

License Number: NP95005999

NPI: 1316478092

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

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

TODD, MIKAYLA

Provider ID: 517802

Provider Gender: Female

License Number: NP95005999

NPI: 1316478092

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

ABDULRAHIM, AHMED

Provider ID: 517802

Provider Gender: Male

License Number: DC28335

NPI: 1619040292

Provider English Spoken: Y

Provider Language(s)
Spoken: Burmese

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

ABDULRAHIM, AHMED

Provider ID: 517802

Provider Gender: Male

License Number: DC28335

NPI: 1619040292

Provider English Spoken: Y

Provider Language(s)
Spoken: Burmese

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

KELCHNER, MATTHEW

Provider ID: 517802

Provider Gender: Male

License Number: DC22733

NPI: 1174656755

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

CHIROPRACTOR

KELCHNER, MATTHEW

Provider ID: 517802

Provider Gender: Male

License Number: DC22733

NPI: 1174656755

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

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: Y

Min/Max Age: 0\150

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

DUBE, BIANCA

Provider ID: 543862

Provider Gender: Female

NPI: 1740535152

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

1620 ALPINE BLVD STE 110 ALPINE, CA 91901

Phone: (619) 662-4100

Fax: (619) 662-4196

After Hours Phone: (619) 662-4100

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

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

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: Y
 Min/Max Age: 0\150
 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

📍 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: Y
 Min/Max Age: 0\150
 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

📍 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

VAN HOLLEBEKE, RACHEL

Provider ID: 517802
 Provider Gender: Female
 License Number: A177337
 NPI: 1497217756

☐ Provider English Spoken: Y
 ☐ Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No

📍 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

VAN HOLLEBEKE, RACHEL

Provider ID: 517802
 Provider Gender: Female
 License Number: A177337
 NPI: 1497217756

☐ Provider English Spoken: Y
 ☐ Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No

📍 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: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

PEDIATRICS

STENSMAN, LARS

Provider ID: 517802
 Provider Gender: Male

License Number: A158569

NPI: 1659638062

Provider English Spoken: Y

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

Cultural Competency: N

Board Certified Specialty: No

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.mtnhealth.or
g

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

STENSMAN, LARS

Provider ID: 517802

Provider Gender: Male

License Number: A158569

NPI: 1659638062

Provider English Spoken: Y

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

Cultural Competency: N

Board Certified Specialty: No

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.mtnhealth.or
g

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): Website: www.mtnhealth.or
g

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

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.mtnhealth.or
g

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.mtnhealth.or
g

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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: Y
Min/Max Age: 0\150
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

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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

**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

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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

**FQHC
TRUECARE,**

Provider ID: 480120
NPI: 1245246917

Provider English Spoken: Y
Cultural Competency: N

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: Y
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

**FQHC
TRUECARE,**

Provider ID: 480120
NPI: 1245246917

Provider English Spoken: Y
Cultural Competency: N

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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

**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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

SA 8:00AM-2:00PM

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

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After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

SA 8:00AM-2:00PM

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 480120

Provider Gender: Female

License Number: A93248

NPI: 1174703680

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

SA 8:00AM-2:00PM

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 480120

Provider Gender: Female

License Number: A93248

NPI: 1174703680

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

SA 8:00AM-2:00PM

PEDIATRICS

BURGAMY, ELIZABETH

Provider ID: 326275

Provider Gender: Female

NPI: 1164609558

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SHARP MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-2:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-2:00PM

PEDIATRICS

MUTH, NATALIE

Provider ID: 328451
 Provider Gender: Female
 NPI: 1497982888
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: TRI CITY
 MEDICAL CTR, SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS, SCRIPPS
 MEMORIAL HOSPITAL

Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

PEDIATRICS

O'CONNOR, ERICA

Provider ID: 651599
 Provider Gender: Female
 NPI: 1134782725
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

3257 CAMINO DE LOS
 COCHES STE 202
 CARLSBAD, CA 92009
 Phone: (760) 633-3640
 Fax: (760) 633-3644
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 633-3640

Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

PEDIATRICS

TANAKA, MARY

Provider ID: 465387
 Provider Gender: Female
 NPI: 1295962686
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Thai

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

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

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

📍 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: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM SA 8:00AM-2:00PM

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

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🌐 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM SA 8:00AM-2:00PM

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

📍 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: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM SA 8:00AM-2:00PM

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Provider ID: 480120

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Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CHULA VISTA

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 427322

Provider Gender: Female

License Number: C52581

NPI: 1053300251

Provider English Spoken: Y

Provider Language(s)
Spoken: Cambodian, Hindi,
Spanish, Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 427322

Provider Gender: Female

License Number: C52581

NPI: 1053300251

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Provider Language(s)
Spoken: Cambodian, Hindi,
Spanish, Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

251 LANDIS AVE

CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

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Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

FERNANDEZ LEYVA, JUAN

Provider ID: 206355

Provider Gender: Male

License Number: NP95001964

NPI: 1194115568

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500
 Website: www.fhcsd.org

Email:


MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


FERNANDEZ LEYVA, JUAN

Provider ID: 206355

Provider Gender: Male

License Number: NP95001964

NPI: 1194115568

 Provider English Spoken: Y


 Provider Language(s)


Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:


MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 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: Y

Min/Max Age: 0\150

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

 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: Y

Min/Max Age: 0\150

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

 251 LANDIS AVE
CHULA VISTA, CA 91910


 Phone: (619) 515-2500

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Email:



MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

 251 LANDIS AVE
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 Website: www.fhcsd.org
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 MARTHAO@FHCS.D.ORG
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
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 MARTHAO@FHCS.D.ORG
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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


 251 LANDIS AVE
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 MARTHAO@FHCS.D.ORG
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

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

 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

QUILALANG, SUSAN

Provider ID: 427322
 Provider Gender: Female
 License Number: NP5579
 NPI: 1841200482
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 678 3RD AVE

CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

QUILALANG, SUSAN

Provider ID: 427322
 Provider Gender: Female
 License Number: NP5579
 NPI: 1841200482
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 678 3RD AVE
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 After Hours Phone: (619) 662-4100
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 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
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

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



CERTIFIED NURSE PRACTITIONER
VEGA, TERESA

Provider ID: 206355
 Provider Gender: Female
 License Number: NP95001705
 NPI: 1912304569
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No


 251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
 Email: MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
VEGA, TERESA



Provider ID: 206355
 Provider Gender: Female
 License Number: NP95001705
 NPI: 1912304569
 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 251 LANDIS AVE
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 Website: www.fhcsd.org
 Email:

MARTHAO@FHCS.D.ORG
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
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 Email:





MARTHAO@FHCS.D.ORG
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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*

 251 LANDIS AVE
CHULA VISTA, CA 91910
 *Phone: (619) 515-2500*
 *After Hours Phone: (619) 515-2500*
 *Website: www.fhcsd.org*
*Email:
MARTHAO@FHCSO.ORG
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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

 251 LANDIS AVE
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Medi-Cal Open Panel: Y
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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*

Board Certified Specialty: No

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Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N*




 *Accessibility: CONTACT PROVIDER*

CERTIFIED REGISTERED NURSE MIDWIFE

MARTINEZ, NANCY

*Provider ID: 427322
Provider Gender: Female
License Number: NM1539
NPI: 1578576070
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*

Board Certified Specialty: No

 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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

CERTIFIED REGISTERED NURSE MIDWIFE

MARTINEZ, NANCY

*Provider ID: 427322
Provider Gender: Female
License Number: NM1539
NPI: 1578576070
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
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662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

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

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

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

CHIROPRACTOR



KAZEM, HARON

Provider ID: 427322

Provider Gender: Male

License Number: DC33295



NPI: 1306221262


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Board Certified Specialty: No

 678 3RD AVE
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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

CHIROPRACTOR

KAZEM, HARON

Provider ID: 427322

Provider Gender: Male

License Number: DC33295




NPI: 1306221262


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Board Certified Specialty: No

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Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

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

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
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Accessibility: CONTACT PROVIDER

CHIROPRACTOR

PLANTE, CHARLES

Provider ID: 427322
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 License Number: DC31963
 NPI: 1760464960

Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
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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

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Min/Max Age: 0\150

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

Board Certified Specialty: No

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American Sign Language (ASL):
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Accessibility: CONTACT PROVIDER

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

ENDOCRINOLOGY

METABOLISM DIABETES

CARRILLO, MARITZA

Provider ID: 427322
 Provider Gender: Female
 License Number: A163183
 NPI: 1649628587
 Provider English Spoken: Y
 Cultural Competency: N
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 Board Certified Specialty: No
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 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

ENDOCRINOLOGY
METABOLISM DIABETES

CRUZ, MICHAEL
 Provider ID: 427322
 Provider Gender: Male
 License Number: A138772
 NPI: 1265851133
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL
 Board Certified Specialty: No
 678 3RD AVE
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

ENDOCRINOLOGY
METABOLISM DIABETES


CRUZ, MICHAEL
 Provider ID: 427322
 Provider Gender: Male
 License Number: A138772
 NPI: 1265851133
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL
 Board Certified Specialty: No
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 678 3RD AVE
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
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 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
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al- plaza
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100
 Website: [www.syhealth.org/clinics/chula- vista- medic al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM
 SA 8:00AM-2:30PM

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
 678 3RD AVE
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

FAMILY PRACTICE

ARCE GOMEZ, LAURA

Provider ID: 427322

Provider Gender: Female

License Number: A123604

NPI: 1053532986

Provider English Spoken: Y

Provider Language(s)


Spoken: Spanish, Tagalog

Cultural Competency: N


Hospital Affiliation: CHULA


VISTA COMM HOSP


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

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 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

ARCE GOMEZ, LAURA

Provider ID: 427322

Provider Gender: Female

License Number: A123604

NPI: 1053532986

Provider English Spoken: Y

Provider Language(s)


Spoken: Spanish, Tagalog

Cultural Competency: N


Hospital Affiliation: CHULA


VISTA COMM HOSP


Board Certified Specialty: No

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 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

CAMPOS, MELISSA

Provider ID: 427322

Provider Gender: Female

License Number: A138474

NPI: 1427475318

Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CAMPOS, MELISSA

Provider ID: 427322

Provider Gender: Female

License Number: A138474

NPI: 1427475318

Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No

 678 3RD AVE

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 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

DY, DIANE

Provider ID: 206355

Provider Gender: Female

License Number: A153344

NPI: 1467807560

Provider English Spoken: Y

Cultural Competency: N
Board Certified Specialty: No

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
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Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

DY, DIANE

Provider ID: 206355

Provider Gender: Female

License Number: A153344

NPI: 1467807560

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

GARCIA, KARLA

Provider ID: 427322

Provider Gender: Female

License Number: A120672

NPI: 1154647410

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL

Board Certified Specialty: No

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

GARCIA, KARLA

Provider ID: 427322

Provider Gender: Female

License Number: A120672

NPI: 1154647410

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL

Board Certified Specialty: No

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Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

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

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
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 Accessibility: CONTACT PROVIDER

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

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

JIMENEZ, KRYSTAL

Provider ID: 427322

Provider Gender: Female


License Number: A159831

NPI: 1922531250


 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

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Min/Max Age: 0\150

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

FAMILY PRACTICE


JIMENEZ, KRYSTAL

Provider ID: 427322

Provider Gender: Female


License Number: A159831

NPI: 1922531250


 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

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Min/Max Age: 0\150

American Sign Language (ASL):
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 Accessibility: CONTACT PROVIDER

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

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

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 Accessibility: CONTACT PROVIDER

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

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

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LAW, KAREN

Provider ID: 427322
 Provider Gender: Female
 License Number: A138534
 NPI: 1205253150
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: CHULA VISTA COMM HOSP
 Board Certified Specialty: No

 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER



FAMILY PRACTICE


LAW, KAREN


Provider ID: 427322

Provider Gender: Female
 License Number: A138534
 NPI: 1205253150
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: CHULA VISTA COMM HOSP
 Board Certified Specialty: No

 678 3RD AVE
 CHULA VISTA, CA 91910

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

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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


 678 3RD AVE
 CHULA VISTA, CA 91910

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
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 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

📍 678 3RD AVE
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662-4100

🌐 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

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

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

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

678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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

678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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

352 L ST
CHULA VISTA, CA 91911
Phone: (619) 515-2325
After Hours Phone: (619) 515-2325
Website: www.fhcsd.org
Email: chantalt@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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

352 L ST
CHULA VISTA, CA 91911
Phone: (619) 515-2325
After Hours Phone: (619) 515-2325
Website: www.fhcsd.org
Email: chantalt@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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

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: Y

Min/Max Age: 0\150

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

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

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Website: www.syhealth.org
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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

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

FAMILY PRACTICE

PEDROTTY, JOHN

Provider ID: 427322

Provider Gender: Male

License Number: G80234

NPI: 1992861629

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND
HEALTHCARE CTR

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PEDROTTY, JOHN

Provider ID: 427322

Provider Gender: Male

License Number: G80234

NPI: 1992861629

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PEREZ, PERLITA

Provider ID: 206355

Provider Gender: Female

License Number: A119689

NPI: 1174810972

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

Cultural Competency: N

Board Certified Specialty: No

251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PEREZ, PERLITA

Provider ID: 206355

Provider Gender: Female

License Number: A119689

NPI: 1174810972

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PIEROS, JANELLE

Provider ID: 427322

Provider Gender: Female

License Number: 20A13225

NPI: 1386935914

Provider English Spoken: Y

Provider Language(s)
Spoken: Faroese, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

PIEROS, JANELLE

Provider ID: 427322

Provider Gender: Female

License Number: 20A13225

NPI: 1386935914

Provider English Spoken: Y

Provider Language(s)
Spoken: Faroese, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
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662-4100
Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): Cultural Competency: N
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

PINA, RAQUEL

Provider ID: 206355
Provider Gender: Female
License Number: A177698
NPI: 1255893368

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PINA, RAQUEL

Provider ID: 206355
Provider Gender: Female
License Number: A177698
NPI: 1255893368

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

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PISINGER, PATRICIA

Provider ID: 427322
Provider Gender: Female
License Number: A69264
NPI: 1861428302

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

 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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER



FAMILY PRACTICE

PISINGER, PATRICIA


Provider ID: 427322
Provider Gender: Female
License Number: A69264
NPI: 1861428302

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

 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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


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

 678 3RD AVE

CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



SERPAS, SHAILA





Provider ID: 427322
 Provider Gender: Female

License Number: G74728
 NPI: 1124039136
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL
 Board Certified Specialty: No
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

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

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

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

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TEE, ALEXANDRA

Provider ID: 427322

Provider Gender: Female

License Number: A164392

NPI: 1881198406

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

TEE, ALEXANDRA

Provider ID: 427322

Provider Gender: Female

License Number: A164392

NPI: 1881198406

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Board Certified Specialty: No

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662-4100

Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

WHITLEY, NICHOLAS

Provider ID: 427322
 Provider Gender: Male
 License Number: A118250
 NPI: 1629394721
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
 Board Certified Specialty: No

 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

WHITLEY, NICHOLAS

Provider ID: 427322

Provider Gender: Male
 License Number: A118250
 NPI: 1629394721
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
 Board Certified Specialty: No


 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

YOON, RYAN

Provider ID: 427322
 Provider Gender: Male
 License Number: A114600
 NPI: 1942435144
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
 Board Certified Specialty: No





 678 3RD AVE
 CHULA VISTA, CA 91910

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

YOON, RYAN

Provider ID: 427322
 Provider Gender: Male
 License Number: A114600
 NPI: 1942435144
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
 Board Certified Specialty: No

 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FQHC

CHULA VISTA FAMILY HLTH CTR,

Provider ID: 206355
NPI: 1346480837

☐ Provider English Spoken: Y
Cultural Competency: N

📍 251 LANDIS AVE
CHULA VISTA, CA 91910

☎ Phone: (619) 515-2500
Fax: (619) 397-1161

🕒 After Hours Phone: (619) 515-2500

🌐 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

FQHC

CHULA VISTA FAMILY HLTH CTR,

Provider ID: 206355
NPI: 1346480837

☐ Provider English Spoken: Y
Cultural Competency: N

📍 251 LANDIS AVE
CHULA VISTA, CA 91910

☎ Phone: (619) 515-2500
Fax: (619) 397-1161

🕒 After Hours Phone: (619) 515-2500

🌐 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

FQHC

CHULA VISTA PEDIATRICS,

Provider ID: 482034
NPI: 1326486861

☐ Provider English Spoken: Y
Cultural Competency: N

📍 855 3RD AVE STE 2200
CHULA VISTA, CA 91911

☎ Phone: (619) 662-4100
Fax: (619) 662-4196

🕒 After Hours Phone: (619) 662-4100

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-4:00PM

FQHC

CHULA VISTA PEDIATRICS,

Provider ID: 482034
NPI: 1326486861

☐ Provider English Spoken: Y
Cultural Competency: N

📍 855 3RD AVE STE 2200
CHULA VISTA, CA 91911

☎ Phone: (619) 662-4100
Fax: (619) 662-4196

🕒 After Hours Phone: (619) 662-4100

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-4:00PM

FQHC

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC,

Provider ID: 417641
NPI: 1083959464

☐ Provider English Spoken: Y
Cultural Competency: N

📍 352 L ST
CHULA VISTA, CA 91911

☎ Phone: (619) 515-2325
Fax: (619) 420-0660

🕒 After Hours Phone: (619) 515-2325

🌐 Website: www.fhcsd.org
Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

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

FQHC

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC,

Provider ID: 417641
NPI: 1083959464

☐ Provider English Spoken: Y
Cultural Competency: N

📍 352 L ST
CHULA VISTA, CA 91911

☎ Phone: (619) 515-2325
Fax: (619) 420-0660

🕒 After Hours Phone: (619) 515-2325

🌐 Website: www.fhcsd.org
Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM



FQHC

SAN YSIDRO HEALTH CHULA VISTA,

Provider ID: 427322
 NPI: 1326486861
 Provider English Spoken: Y
 Cultural Competency: N
 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
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-4:00PM

FQHC

SAN YSIDRO HEALTH CHULA VISTA,

Provider ID: 427322
 NPI: 1326486861
 Provider English Spoken: Y
 Cultural Competency: N
 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
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-4:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


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
 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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

HEMATOLOGY / ONCOLOGY

QUIROZ, ELISA



Provider ID: 427322
Provider Gender: Female
License Number: A162816
NPI: 1932558301
 Provider English Spoken: Y




 Provider Language(s)
Spoken: Portuguese,
Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
 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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

HEMATOLOGY / ONCOLOGY







QUIROZ, ELISA

Provider ID: 427322
Provider Gender: Female
License Number: A162816
NPI: 1932558301
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Portuguese,
Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
 678 3RD AVE
CHULA VISTA, CA 91910
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662-4100
 Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

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
 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: Y
Min/Max Age: 0\150

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

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

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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

DALHOUMI, SARAH

Provider ID: 427322
 Provider Gender: Female
 License Number: A121861
 NPI: 1033435383

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

Cultural Competency: N
 Board Certified Specialty: No

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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

DALHOUMI, SARAH

Provider ID: 427322
 Provider Gender: Female
 License Number: A121861
 NPI: 1033435383
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
 Board Certified Specialty: No

678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
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 Website: www.syhealth.org /clinics/chula- vista- medic al- plaza

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

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

Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

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

Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

INTERNAL MEDICINE

UWEDJOJEVWE, LETICIA

Provider ID: 380242

Provider Gender: Female

NPI: 1891882221

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

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: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:00PM
F 8:00AM-4:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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
 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: Y
 Min/Max Age: 0\150

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

INTERNAL MEDICINE
WEN, AKI YEN CHANG

Provider ID: 427322
 Provider Gender: Male
 License Number: 20A12555
 NPI: 1205126505
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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

251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
 Email: MARTHAO@FHCS.D.ORG
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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

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

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Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

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After Hours Phone: (619)
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Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org


Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150



American Sign Language (ASL):

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

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

 251 LANDIS AVE
 CHULA VISTA, CA 91910
 *Phone: (619) 515-2500*
 *After Hours Phone: (619) 515-2500*

 *Website: www.fhcsd.org*
Email:



MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N

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

OBSTETRICS / GYNECOLOGY


CERVANTES, SANDRA

Provider ID: 206355
Provider Gender: Female
License Number: A118095


NPI: 1073701041
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No

 251 LANDIS AVE
 CHULA VISTA, CA 91910
 *Phone: (619) 515-2500*
 *After Hours Phone: (619) 515-2500*

 *Website: www.fhcsd.org*
Email:



MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N

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

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA


Provider ID: 206355
Provider Gender: Female
License Number: A118095
NPI: 1073701041

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


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

GROSSMONT HOSPITAL
Board Certified Specialty: No

 251 LANDIS AVE
 CHULA VISTA, CA 91910
 *Phone: (619) 515-2500*
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Email:



MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N

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




OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA

Provider ID: 206355
Provider Gender: Female
License Number: A163464
NPI: 1326531401


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

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No

 251 LANDIS AVE
 CHULA VISTA, CA 91910
 *Phone: (619) 515-2500*
 *After Hours Phone: (619) 515-2500*

 *Website: www.fhcsd.org*
Email:

MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

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

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 206355
Provider Gender: Female
License Number: A163464
NPI: 1326531401
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital


Board Certified Specialty: No

 251 LANDIS AVE
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Email: MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y
Min/Max Age: 0\150

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

 251 LANDIS AVE
 CHULA VISTA, CA 91910
 *Phone: (619) 515-2500*
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Email: MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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Email: MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 251 LANDIS AVE
 CHULA VISTA, CA 91910
 *Phone: (619) 515-2500*
 *After Hours Phone: (619) 515-2500*

 *Website: www.fhcsd.org*
Email: MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y
Min/Max Age: 0\150

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

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
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515-2500
 Website: www.fhcsd.org

Email:


MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

**FOLCH TORRES-AGUIAR,
BEATRIZ**

Provider ID: 206355

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

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

**FOLCH TORRES-AGUIAR,
BEATRIZ**

Provider ID: 206355

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

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

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

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

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619)
515-2500

Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206355

Provider Gender: Female

License Number: A72005

NPI: 1649208711

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

Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No

251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619)
515-2500

Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206355

Provider Gender: Female

License Number: A72005

NPI: 1649208711

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

Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No

251 LANDIS AVE
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Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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CHULA VISTA, CA 91910
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Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 251 LANDIS AVE
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 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY


MELENDEZ BERRIOS, IARA DEL


Provider ID: 206355

Provider Gender: Female

License Number: A114181

NPI: 1740514249

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,


GROSSMONT HOSPITAL


Board Certified Specialty: No

 251 LANDIS AVE

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 Phone: (619) 515-2500

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Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

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 Accessibility: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY


MELENDEZ BERRIOS, IARA DEL


Provider ID: 206355

Provider Gender: Female

License Number: A114181

NPI: 1740514249

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,


GROSSMONT HOSPITAL

Board Certified Specialty: No

 251 LANDIS AVE

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 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO


Provider ID: 427322

Provider Gender: Male

License Number: A47906

NPI: 1437181922

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: MERCY

GENERAL HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, BAKERSFIELD

MEMORIAL HOSP, SHARP

MEMORIAL HOSPITAL, SAN

JOAQUIN COMM HOSP,

SCRIPPS MERCY HOSPITAL,


SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS


MEMORIAL HOSPITAL, KERN


MEDICAL CENTER


Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

Provider ID: 427322

Provider Gender: Male

License Number: A47906

NPI: 1437181922

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

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

MEMORIAL HOSP, SHARP
MEMORIAL HOSPITAL, SAN
JOAQUIN COMM HOSP,

SCRIPPS MERCY HOSPITAL,
SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, KERN
MEDICAL CENTER

Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 206355

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND

HEALTHCARE CTR,
GROSSMONT HOSPITAL

Board Certified Specialty: No

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 206355

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 206355

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No


251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500



After Hours Phone: (619)
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Email:

MARTHAO@FHCS.D.ORG
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 251 LANDIS AVE
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 Phone: (619) 515-2500
 After Hours Phone: (619)
 515-2500
 Website: www.fhcsd.org



Email:
 MARTHAO@FHCS.D.ORG
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
SHORT, ABI ADE

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

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

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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

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

251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
 515-2500
 Website: www.fhcsd.org
 Email:

MARTHAO@FHCS.D.ORG
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

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

251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500

After Hours Phone: (619)
 515-2500

Website: www.fhcsd.org
 Email:

MARTHAO@FHCS.D.ORG
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER

Provider ID: 427322
 Provider Gender: Female
 License Number: 20A8204
 NPI: 1053407593
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, SHARP CHULA VISTA
 MED CTR
 Board Certified Specialty: No

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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER

Provider ID: 427322

Provider Gender: Female

License Number: 20A8204

NPI: 1053407593

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 206355

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 206355

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No

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Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206355

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

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

Board Certified Specialty: No

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Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y


Min/Max Age: 0\150

American Sign Language (ASL):

N
 **Accessibility: CONTACT PROVIDER**
 Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206355
 Provider Gender: Male
 License Number: G78814
 NPI: 1699790634
 **Provider English Spoken: Y**
Cultural Competency: N
Hospital Affiliation:
 GROSSMONT HOSPITAL,
 SCRIPPS MERCY HOSPITAL,
 SHARP CORONADO HOSP
 AND HEALTHCARE CTR,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA

Board Certified Specialty: No

 251 LANDIS AVE
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 **After Hours Phone: (619) 515-2500**
 **Website: www.fhcsd.org**
Email:


MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N



 **Accessibility: CONTACT PROVIDER**
 Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY

MANI, NASRIN

Provider ID: 427322

Provider Gender: Female

License Number: A40473
 NPI: 1023061314
 **Provider English Spoken: Y**
 **Provider Language(s)**
 Spoken: Arabic, Faroese,
 Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL, SHARP
 MEMORIAL HOSPITAL, UCSD
 MEDICAL CTR, SHARP CHULA
 VISTA MED CTR, GROSSMONT
 HOSPITAL

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

OPHTHALMOLOGY

MANI, NASRIN

Provider ID: 427322

Provider Gender: Female

License Number: A40473

NPI: 1023061314

 **Provider English Spoken: Y**
 **Provider Language(s)**
 Spoken: Arabic, Faroese,
 Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL, UCSD
 MEDICAL CTR, SHARP CHULA
 VISTA MED CTR, GROSSMONT
 HOSPITAL

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

OPHTHALMOLOGY



PAPASTERGIU, GEORGIOS

Provider ID: 427322

Provider Gender: Male

License Number: A127706




NPI: 1790054393


 **Provider English Spoken: Y**
 **Provider Language(s)**
 Spoken: Arabic, Farsi,
 French, Greek, Italian,
 Spanish

Cultural Competency: N

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

Board Certified Specialty: No


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

662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

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

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

 678 3RD AVE
 CHULA VISTA, CA 91910

 Phone: (619) 662-4100


 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

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

OPHTHALMOLOGY

PONS, MAURICIO

Provider ID: 427322

Provider Gender: Male

License Number: A87650

NPI: 1376723759


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


Cultural Competency: N


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

Board Certified Specialty: No

 678 3RD AVE
 CHULA VISTA, CA 91910

 Phone: (619) 662-4100


 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

PONS, MAURICIO

Provider ID: 427322

Provider Gender: Male

License Number: A87650

NPI: 1376723759

Provider English Spoken: Y


Provider Language(s) Spoken: Spanish


Cultural Competency: N


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

Board Certified Specialty: No

 678 3RD AVE
 CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

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

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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

PEDIATRICS

BARBADILLO, FERDINAND

Provider ID: 70456

Provider Gender: Male

NPI: 1982662193

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No



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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM



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
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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: No
 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: Y
 Min/Max Age: 0\19

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

PEDIATRICS


CORDOBA, MIGUEL

Provider ID: 88187
 Provider Gender: Male
 NPI: 1053382176
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N

Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19



American Sign Language (ASL):
 N



 Accessibility: CONTACT PROVIDER

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

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

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

PEDIATRICS

FLORES, ERNEST

Provider ID: 658652
 Provider Gender: Male
 NPI: 1043848807
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT

PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

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

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

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

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

Email:

HERITAGEPARKPEDIATRICS@YAHOO.COM

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

F 8:30AM-5:00PM

PEDIATRICS

GARCIA, RAFAEL

Provider ID: 360408

Provider Gender: Male

NPI: 1053414086

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

PEDIATRICS

GHAHREMANI, SIMIN

Provider ID: 482034

Provider Gender: Female

License Number: C51110

NPI: 1508904657

Provider English Spoken: Y

Provider Language(s)

Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

855 3RD AVE STE 2200

CHULA VISTA, CA 91911

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100


Website: www.ihpsocal.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

GHAHREMANI, SIMIN

Provider ID: 482034

Provider Gender: Female

License Number: C51110

NPI: 1508904657

Provider English Spoken: Y


Provider Language(s) Spoken: Farsi


Cultural Competency: N

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

Board Certified Specialty: No

 *855 3RD AVE STE 2200 CHULA VISTA, CA 91911*

 *Phone: (619) 662-4100*

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

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

GHAHREMANI, SIMIN

Provider ID: 634787

Provider Gender: Female

NPI: 1508904657

Provider English Spoken: Y


Provider Language(s) Spoken: Farsi

Cultural Competency: N

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

Board Certified Specialty: No

 *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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

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

PEDIATRICS

HOLLICK, NATALIE

Provider ID: 473802

Provider Gender: Female


NPI: 1558716845

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 *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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT*

PROVIDER Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ISAIAS, AGNELA

Provider ID: 482034

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

 *855 3RD AVE STE 2200 CHULA VISTA, CA 91911*

 *Phone: (619) 662-4100*

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

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

ISAIAS, AGNELA

Provider ID: 482034

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
 855 3RD AVE STE 2200
 CHULA VISTA, CA 91911
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PEDIATRICS

JACOBS-KLEISLI, MILAGROS



Provider ID: 467596
Provider Gender: Female
NPI: 1811221641
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation:
 GROSSMONT HOSPITAL,
 SHARP MEMORIAL HOSPITAL,
 RADY CHILDRENS HOSPITAL
 SAN DIEGO, HUNTINGTON
 MEMORIAL HOSPITAL, USC
 Arcadia Hospital
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM




PEDIATRICS


KORSAND, SID

Provider ID: 482034
Provider Gender: Male
License Number: A49591
NPI: 1588634513

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Farsi, Turkish
Cultural Competency: N

Board Certified Specialty: No

 855 3RD AVE STE 2200
 CHULA VISTA, CA 91911
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100



 Website: www.ihpsocal.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

PEDIATRICS



KORSAND, SID


Provider ID: 482034
Provider Gender: Male
License Number: A49591
NPI: 1588634513

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Farsi, Turkish
Cultural Competency: N

Board Certified Specialty: No

 855 3RD AVE STE 2200
 CHULA VISTA, CA 91911

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

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150



American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

PEDIATRICS


KORSAND, SID


Provider ID: 634788
Provider Gender: Male
NPI: 1588634513

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Farsi, Turkish
Cultural Competency: N

Board Certified Specialty: No

 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: Y
Min/Max Age: 0\19

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

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

PEDIATRICS

MCPMAHON, SHARON

Provider ID: 648721

Provider Gender: Female

NPI: 1487279246

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

📍 865 THIRD AVESTE 101
CHULA VISTA, CA 91911

☎ Phone: (619) 426-7910

Fax: (619) 426-2337

🕒 After Hours Phone: (619)
426-7910

🌐 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

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

📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

PEDIATRICS

MOSQUERA, DIANA

Provider ID: 371232

Provider Gender: Female

NPI: 1144238098

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

PEDIATRICS

MOSQUERA, DIANA

Provider ID: 463001

Provider Gender: Female

NPI: 1144238098

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

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
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

PEDIATRICS

PIANSAY, MARIA CORAZON

Provider ID: 427322
 Provider Gender: Female
 License Number: A93785
 NPI: 1669680351
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish, Tagalog
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

PIANSAY, MARIA CORAZON

Provider ID: 427322
 Provider Gender: Female
 License Number: A93785
 NPI: 1669680351
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish, Tagalog
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA
 Board Certified Specialty: No

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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

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
 251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
 Email: MARTHAO@FHCSD.ORG
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

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
 251 LANDIS AVE

CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
 Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


PEDIATRICS

SANTIAGO, ROXANE

Provider ID: 269279

Provider Gender: Female

NPI: 1033461801

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, SHARP CHULA VISTA

MED CTR, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS MEMORIAL

HOSPITAL, UCSF BENIOFF


CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL): License Number: A45942
 N

 Accessibility: CONTACT PROVIDER

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

PEDIATRICS


SHETH, HASMUKH


Provider ID: 427322

Provider Gender: Male

License Number: A45942

NPI: 1396812236

 Provider English Spoken: Y

 Provider Language(s) Spoken: Gujarati, Hindi, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA


VISTA, SCRIPPS MERCY


HOSPITAL

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER


PEDIATRICS


SHETH, HASMUKH

Provider ID: 427322

Provider Gender: Male

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

 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: Y

Min/Max Age: 0\150

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
 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
 Email:

PEDIATRICSINPARADISE@YAHOO.COM
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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

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: Y
 Min/Max Age: 0\19

American Sign Language (ASL): N
 License Number: PA61683
 NPI: 1215477765

Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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

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: Y
 Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

BALDONADO, ANALICIA

Provider ID: 417641
 Provider Gender: Female

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N

Board Certified Specialty: No

352 L ST
 CHULA VISTA, CA 91911
 Phone: (619) 515-2325
 After Hours Phone: (619) 515-2325

Website: www.fhcsd.org
 Email: chantalt@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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

352 L ST
 CHULA VISTA, CA 91911
 Phone: (619) 515-2325
 After Hours Phone: (619) 515-2325



Website: www.fhcsd.org
 Email: chantalt@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL): License Number: PA54404
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM


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
 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: Y
Min/Max Age: 0\150

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT
INDA, PRISCILLA


Provider ID: 427322
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


Board Certified Specialty: No
 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: Y
Min/Max Age: 0\150

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

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

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CHULA VISTA, CA 91910
 Phone: (619) 662-4100
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 Website: www.syhealth.org


/clinics/chula- vista- medic
al- plaza
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


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



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/clinics/chula- vista- medic
al- plaza
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

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

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 251 LANDIS AVE
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 Phone: (619) 515-2500
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 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT


REVELES, DIANA


Provider ID: 417641

Provider Gender: Female

License Number: PA19306

NPI: 1548455405

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Board Certified Specialty: No

 352 L ST
CHULA VISTA, CA 91911
 Phone: (619) 515-2325
 After Hours Phone: (619) 515-2325
 Website: www.fhcsd.org

Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT


REVELES, DIANA


Provider ID: 417641

Provider Gender: Female

License Number: PA19306




NPI: 1548455405


 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Board Certified Specialty: No

 352 L ST
CHULA VISTA, CA 91911
 Phone: (619) 515-2325
 After Hours Phone: (619) 515-2325

 *Website: www.fhcsd.org*

Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PODIATRIST


MANCHEL, BRUCE

Provider ID: 427322

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

 *Provider English Spoken: Y*

Cultural Competency: N


Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR

Board Certified Specialty: No

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

 *Website: www.syhealth.org /clinics/chula-vista-medical-plaza*

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PODIATRIST

MANCHEL, BRUCE

Provider ID: 427322

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CORONADO HOSP AND
 HEALTHCARE CTR
 Board Certified Specialty: No
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 Website: www.syhealth.org
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 al- plaza
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 206355
 Provider Gender: Female
 License Number: DPM4819
 NPI: 1326282237
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
 515-2500
 Website: www.fhcsd.org
 Email:
 MARTHAO@FHCS.D.ORG
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 206355
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 NPI: 1326282237
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
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 MARTHAO@FHCS.D.ORG
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

REGISTERED NURSE LICENSED

VOCATIONAL NURSE

QUILALANG, SUSAN

Provider ID: 427322
 Provider Gender: Female
 License Number: NP5579
 NPI: 1841200482
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100

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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

REGISTERED NURSE LICENSED

VOCATIONAL NURSE

QUILALANG, SUSAN

Provider ID: 427322
 Provider Gender: Female
 License Number: RN371480
 NPI: 1841200482
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

REGISTERED NURSE LICENSED

VOCATIONAL NURSE

QUILALANG, SUSAN


Provider ID: 427322
 Provider Gender: Female

License Number: NP5579


NPI: 1841200482


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

**REGISTERED NURSE LICENSED
VOCATIONAL NURSE**

QUILALANG, SUSAN

Provider ID: 427322


Provider Gender: Female

License Number: RN371480


NPI: 1841200482


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

**REGISTERED PHYSICAL
THERAPIST**

AMAYA, RICARDO

Provider ID: 206355

Provider Gender: Male

License Number: PT37189


NPI: 1437445566


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

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515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

**REGISTERED PHYSICAL
THERAPIST**

AMAYA, RICARDO

Provider ID: 206355

Provider Gender: Male

License Number: PT37189


NPI: 1437445566

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

**REGISTERED PHYSICAL
THERAPIST**

CUMMINGS, GEORGE

Provider ID: 206355

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

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515-2500


 Website: www.fhcsd.org
Email:

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

**REGISTERED PHYSICAL
THERAPIST**

CUMMINGS, GEORGE

Provider ID: 206355
 Provider Gender: Male
 License Number: PT295173
 NPI: 1497236384

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N

Board Certified Specialty: No

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 Email:

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

251 LANDIS AVE
 CHULA VISTA, CA 91910

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 After Hours Phone: (619)
 515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

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

**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

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Website: www.fhcsd.org
 Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

251 LANDIS AVE
 CHULA VISTA, CA 91910

Phone: (619) 515-2500
 After Hours Phone: (619)
 515-2500

Website: www.fhcsd.org
 Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

**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

251 LANDIS AVE
 CHULA VISTA, CA 91910


Phone: (619) 515-2500
 After Hours Phone: (619)
 515-2500

 Website: www.fhcsd.org
 Email: MARTHAO@FHCS.D.ORG
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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


 251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org
 Email: MARTHAO@FHCS.D.ORG
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

 251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500



 Website: www.fhcsd.org
 Email: MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST


RODRIGUEZ, CASSANDRA

Provider ID: 206355
 Provider Gender: Female
 License Number: PT292823
 NPI: 1770025595


 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org
 Email: MARTHAO@FHCS.D.ORG



Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST


RODRIGUEZ, CASSANDRA


Provider ID: 206355
 Provider Gender: Female
 License Number: PT292823
 NPI: 1770025595

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500


 Website: www.fhcsd.org
 Email: MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 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

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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
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

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

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

678 3RD AVE

CHULA VISTA, CA 91910

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662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

EL CAJON

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 569910

Provider Gender: Female

License Number: C52581

NPI: 1053300251

Provider English Spoken: Y

Provider Language(s)
Spoken: Cambodian, Hindi,
Spanish, Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL



Board Certified Specialty: No

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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 569910
 Provider Gender: Female
 License Number: C52581
 NPI: 1053300251
 Provider English Spoken: Y
 Provider Language(s) Spoken: Cambodian, Hindi, Spanish, Telugu
 Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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
 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
 Email: janellek@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER



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



CERTIFIED NURSE

PRACTITIONER

DRISCOLL, SUSAN

Provider ID: 569910
 Provider Gender: Female
 License Number: NP95012943
 NPI: 1477755684

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 875 EL CAJON BLVD
 EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org
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 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

DRISCOLL, SUSAN

Provider ID: 569910
 Provider Gender: Female
 License Number: NP95012943
 NPI: 1477755684

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 875 EL CAJON BLVD



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 After Hours Phone: (619) 662-4100
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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

 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
 Email: janellek@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):



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

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

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 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: Spanish

Cultural Competency: N
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER



HAMID, WAHIDA

Provider ID: 569910
 Provider Gender: Female
 License Number: NP95001707
 NPI: 1164812293

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

Cultural Competency: N
 Board Certified Specialty: No

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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
Hours: M-F 8:00AM-5:00PM

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

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Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER



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

CERTIFIED NURSE

PRACTITIONER

HETTIG, JUDITH


Provider ID: 418340
Provider Gender: Female
License Number: NP3439
NPI: 1396815866

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

Cultural Competency: N

Board Certified Specialty: No

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

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N



 Accessibility: CONTACT
 PROVIDER

CERTIFIED NURSE

PRACTITIONER

HETTIG, JUDITH

Provider ID: 418340
Provider Gender: Female
License Number: NP3439
NPI: 1396815866


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

Cultural Competency: N

Board Certified Specialty: No

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Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

CERTIFIED NURSE

PRACTITIONER




JENSEN, ADRIENNE


Provider ID: 569910
Provider Gender: Female
License Number: NP95023148
NPI: 1184389934

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Board Certified Specialty: No

 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: Y
Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

CERTIFIED NURSE

PRACTITIONER

JENSEN, ADRIENNE

Provider ID: 569910
Provider Gender: Female
License Number: NP95023148
NPI: 1184389934

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Board Certified Specialty: No
 875 EL CAJON BLVD
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 *Website: www.syhealth.org*
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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
 525 E MAIN ST
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 *After Hours Phone: (619) 515-2498*
 *Website: www.fhcsd.org*
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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


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Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

LU, TAMMY
Provider ID: 206354
Provider Gender: Female
License Number: NP95007253
NPI: 1457879132

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No


 1111 W CHASE AVE
 EL CAJON, CA 92020




 *Phone: (619) 515-2499*
 *After Hours Phone: (619) 515-2499*
 *Website: www.fhcsd.org*
Email: jaquelininc@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER


LU, TAMMY
Provider ID: 206354
Provider Gender: Female
License Number: NP95007253
NPI: 1457879132

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Cultural Competency: N
Board Certified Specialty: No

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 *Website: www.fhcsd.org*
Email: jaquelininc@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150



American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER


ODA, THAGHAR
Provider ID: 418340
Provider Gender: Female

License Number: NP95000205
NPI: 1063835692

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Amharic, Arabic

Cultural Competency: N
Board Certified Specialty: No

 525 E MAIN ST
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 Phone: (619) 515-2498
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515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

ODA, THAGHAR

Provider ID: 418340
Provider Gender: Female
License Number: NP95000205
NPI: 1063835692

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Amharic, Arabic

Cultural Competency: N
Board Certified Specialty: No

 525 E MAIN ST
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515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

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

 525 E MAIN ST
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515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

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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Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


OLVERA, LUISA


Provider ID: 478971
Provider Gender: Female
License Number: NP95001710
NPI: 1598161309

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

Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Board Certified Specialty: No

 133 W MAIN ST STE 100
EL CAJON, CA 92020
 Phone: (619) 401-0404
 After Hours Phone: (619)
401-0404

 Website: N/A
Email:
iselaocha@borregohealth.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N



 *Accessibility: CONTACT PROVIDER*
Hours: SU-SA 8:00AM-8:00PM

CERTIFIED NURSE

PRACTITIONER

OLVERA, LUISA



Provider ID: 478971
Provider Gender: Female
License Number: NP95001710
NPI: 1598161309

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

Hospital Affiliation: SHARP CHULA VISTA MED CTR

Board Certified Specialty: No

 133 W MAIN ST STE 100
 EL CAJON, CA 92020

 *Phone: (619) 401-0404*
 *After Hours Phone: (619) 401-0404*


 *Website: N/A*

Email: iselaochoa@borregohealth.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: SU-SA 8:00AM-8:00PM

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

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

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 *Website: www.syhealth.org*
Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 525 E MAIN ST
 EL CAJON, CA 92020

 *Phone: (619) 515-2498*
 *After Hours Phone: (619) 515-2498*

 *Website: www.fhcsd.org*
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

PRACTITIONER



SMITH, SHARON


Provider ID: 418340
Provider Gender: Female
License Number: RN428876
NPI: 1780603597


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

Board Certified Specialty: No

 525 E MAIN ST
 EL CAJON, CA 92020

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Email: janellek@fhcsd.org



Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

SMITH, SHARON


Provider ID: 418340
 Provider Gender: Female
 License Number: RN428876
 NPI: 1780603597

 Provider English Spoken: Y

 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N
 Board Certified Specialty: No

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Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
 N



 Accessibility: CONTACT PROVIDER

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

 525 E MAIN ST
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 Phone: (619) 515-2498
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 Website: www.fhcsd.org
 Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT



PROVIDER

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

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 Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

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

 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498

 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CHIROPRACTOR

SOSA, DAVID

Provider ID: 418340

Provider Gender: Male


License Number: DC33150


NPI: 1013308675

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 1111 W CHASE AVE
EL CAJON, CA 92020

 Phone: (619) 515-2499


 After Hours Phone: (619) 515-2499

 Website: www.fhcsd.org
Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 1111 W CHASE AVE
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 After Hours Phone: (619) 515-2499

 Website: www.fhcsd.org
Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CHIROPRACTOR

SOSA, DAVID

Provider ID: 418340

Provider Gender: Male


License Number: DC33150


NPI: 1013308675


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES


NAGELBERG, JODI

Provider ID: 418340

Provider Gender: Female

License Number: A146838

NPI: 1720474141


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 525 E MAIN ST

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 418340

Provider Gender: Female

License Number: A146838

NPI: 1720474141


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

AL ANI, NAJWAN


Provider ID: 418340

Provider Gender: Female

License Number: A144974

NPI: 1275948473

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic


Cultural Competency: N

Board Certified Specialty: No

 525 E MAIN ST

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

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


FAMILY PRACTICE

AL ANI, NAJWAN

Provider ID: 418340
Provider Gender: Female
License Number: A144974
NPI: 1275948473

Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic
Cultural Competency: N

Board Certified Specialty: No

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Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

ALGHAMDI, ASMA

Provider ID: 569910
Provider Gender: Female
License Number: A167529
NPI: 1316310840

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

ALGHAMDI, ASMA

Provider ID: 569910
Provider Gender: Female
License Number: A167529
NPI: 1316310840

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

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 Website: www.syhealth.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*


FAMILY PRACTICE


BRUHN, JOSHUA

Provider ID: 418340
Provider Gender: Male
License Number: A186694
NPI: 1447888284


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N

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


FAMILY PRACTICE

BRUHN, JOSHUA


Provider ID: 418340
Provider Gender: Male
License Number: A186694
NPI: 1447888284

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

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 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N

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

FAMILY PRACTICE

CORMAN, DANIEL

Provider ID: 418340

Provider Gender: Male

License Number: 20A13060

NPI: 1629339593

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

525 E MAIN ST

EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

525 E MAIN ST

EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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: Y

Min/Max Age: 0\150

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

GHAFARI, DAUOD

Provider ID: 478971

Provider Gender: Male

License Number: A98486

NPI: 1053417691

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Board Certified Specialty: No

133 W MAIN ST STE 100

EL CAJON, CA 92020


Phone: (619) 401-0404

After Hours Phone: (619)
401-0404

Website: N/A

Email:



iselaocha@borregohealth.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER





FAMILY PRACTICE


GHAFFARI, DAUOD

Provider ID: 478971
 Provider Gender: Male
 License Number: A98486
 NPI: 1053417691

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Spanish
 Cultural Competency: N

Board Certified Specialty: No

 133 W MAIN ST STE 100
 EL CAJON, CA 92020
 Phone: (619) 401-0404
 After Hours Phone: (619)
 401-0404
 Website: N/A
 Email:
 iselaochoa@borregohealth.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

GORDON, CHRISTOPHER


Provider ID: 418340
 Provider Gender: Male
 License Number: A83390
 NPI: 1477711521

 Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No

 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
 515-2498
 Website: www.fhcsd.org
 Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y


Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE


GORDON, CHRISTOPHER

Provider ID: 418340
 Provider Gender: Male
 License Number: A83390
 NPI: 1477711521

 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
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 515-2498
 Website: www.fhcsd.org
 Email: janellek@fhcsd.org


Medi-Cal Open Panel: Y


Min/Max Age: 0\150
 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

 1111 W CHASE AVE
 EL CAJON, CA 92020
 Phone: (619) 515-2499
 After Hours Phone: (619)
 515-2499
 Website: www.fhcsd.org
 Email: jaquelininc@fhcsd.org


Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

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

 1111 W CHASE AVE
 EL CAJON, CA 92020
 Phone: (619) 515-2499
 After Hours Phone: (619)
 515-2499
 Website: www.fhcsd.org
 Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 American Sign Language (ASL):
 N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

KASAWA, JOHN


Provider ID: 569910

Provider Gender: Male

License Number: A79338

NPI: 1134230329


 *Provider English Spoken: Y*


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

Cultural Competency: N

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


KASAWA, JOHN

Provider ID: 569910

Provider Gender: Male

License Number: A79338

NPI: 1134230329


 *Provider English Spoken: Y*

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

Cultural Competency: N

Board Certified Specialty: No

 875 EL CAJON BLVD
EL CAJON, CA 92020

 *Phone: (619) 662-4100*

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

662-4100

 *Website: www.syhealth.org*

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

LIN, SHUANG

Provider ID: 206354

Provider Gender: Female

License Number: A138887

NPI: 1689093684


 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Mandarin*

Cultural Competency: N

Board Certified Specialty: No

 1111 W CHASE AVE
EL CAJON, CA 92020

 *Phone: (619) 515-2499*

 *After Hours Phone: (619) 515-2499*

 *Website: www.fhcsd.org*

Email: jaquelin@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

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

FAMILY PRACTICE

LIN, SHUANG

Provider ID: 206354

Provider Gender: Female

License Number: A138887

NPI: 1689093684

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Mandarin*

Cultural Competency: N

Board Certified Specialty: No

 1111 W CHASE AVE

EL CAJON, CA 92020

 *Phone: (619) 515-2499*

 *After Hours Phone: (619) 515-2499*

 *Website: www.fhcsd.org*


Email: jaquelin@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

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

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT*

PROVIDER
Hours: M-F 8:00AM-5:00PM

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

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: Y
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

PUTRUS, RAMIZ

Provider ID: 185267
Provider Gender: Male
License Number: A68184
NPI: 1144300534

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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

Website: www.lamaestra.org NPI: 1245401298

g
Email:
aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PUTRUS, RAMIZ

Provider ID: 185267
Provider Gender: Male
License Number: A68184
NPI: 1144300534

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

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

Website: www.lamaestra.org
g
Email:

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SALEM, RAMSEY

Provider ID: 569910
Provider Gender: Male
License Number: A158364

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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: Y
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

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: Y
Min/Max Age: 0\150

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
 1032 BROADWAY
 EL CAJON, CA 92021
 Phone: (619) 795-5991
 After Hours Phone: (619)
 795-5991
 Website: www.lamaestra.org
 g
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:30AM-5:30PM

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
 1032 BROADWAY
 EL CAJON, CA 92021
 Phone: (619) 795-5991
 After Hours Phone: (619)
 795-5991
 Website: www.lamaestra.org
 g
 Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 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
 165 S 1ST ST
 EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619)
 312-0347
 Website: www.lamaestra.org
 g

Email: aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

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
 165 S 1ST ST
 EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619)
 312-0347
 Website: www.lamaestra.org
 g
 Email: aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FQHC

CENTRO MEDICO EL CAJON,

Provider ID: 478971
 NPI: 1154480069
 Provider English Spoken: Y
 Cultural Competency: N
 133 W MAIN ST STE 100
 EL CAJON, CA 92020
 Phone: (619) 873-8940
 Fax: (619) 401-0522
 After Hours Phone: (619)
 873-8940
 Website: N/A
 Email: iselaochoa@borregohealth.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: SU-SA 8:00AM-8:00PM

FQHC

CENTRO MEDICO EL CAJON,

Provider ID: 478971

NPI: 1154480069

☐ Provider English Spoken: Y
Cultural Competency: N

📍 133 W MAIN ST STE 100
EL CAJON, CA 92020

☎ Phone: (619) 873-8940

Fax: (619) 401-0522

🕒 After Hours Phone: (619)
873-8940

🌐 Website: N/A

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

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

FQHC

CHASE AVENUE FAMILY

HEALTH CTRS INC,

Provider ID: 206354

NPI: 1104861681

☐ Provider English Spoken: Y
Cultural Competency: N

📍 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

Email: jaquelin@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): Medi-Cal Open Panel: Y

N

♿ Accessibility: CONTACT
PROVIDER

FQHC

CHASE AVENUE FAMILY

HEALTH CTRS INC,

Provider ID: 206354

NPI: 1104861681

☐ Provider English Spoken: Y
Cultural Competency: N

📍 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
Email: jaquelin@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

FQHC

FAMILY HLTH CTR SAN

DIEGO-EL CAJON,

Provider ID: 418340

NPI: 1932561198

☐ Provider English Spoken: Y
Cultural Competency: N

📍 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
Email: janellek@fhcsd.org

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

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

FQHC

FAMILY HLTH CTR SAN

DIEGO-EL CAJON,

Provider ID: 418340

NPI: 1932561198

☐ Provider English Spoken: Y
Cultural Competency: N

📍 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
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

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

FQHC

LA MAESTRA CHC EL CAJON



BROADWAY,

Provider ID: 418501

NPI: 1134590086

☐ Provider English Spoken: Y
Cultural Competency: N

📍 1032 BROADWAY

EL CAJON, CA 92021
 Phone: (619) 795-5991
 Fax: (619) 795-5992
 After Hours Phone: (619) 795-5991
 Website: www.lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

FQHC

LA MAESTRA CHC EL CAJON BROADWAY,

Provider ID: 418501
 NPI: 1134590086
 Provider English Spoken: Y
 Cultural Competency: N
 1032 BROADWAY
 EL CAJON, CA 92021
 Phone: (619) 795-5991
 Fax: (619) 795-5992
 After Hours Phone: (619) 795-5991
 Website: www.lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

FQHC

LA MAESTRA FAMILY CLINIC INC,


Provider ID: 185267

NPI: 1336353721
 Provider English Spoken: Y
 Cultural Competency: N
 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
 Email: aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU 8:00AM-5:00PM
 TH-F 8:00AM-5:00PM

FQHC

LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185267
 NPI: 1336353721
 Provider English Spoken: Y
 Cultural Competency: N
 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
 Email: aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU 8:00AM-5:00PM
 TH-F 8:00AM-5:00PM






FQHC

SAN YSIDRO HEALTH EL CAJON,

Provider ID: 569910
 NPI: 1568845741
 Provider English Spoken: Y
 Cultural Competency: N
 875 EL CAJON BLVD
 EL CAJON, CA 92020
 Phone: (619) 662-4100
 Fax: (619) 785-3356
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH EL CAJON,

Provider ID: 569910
 NPI: 1568845741
 Provider English Spoken: Y
 Cultural Competency: N
 875 EL CAJON BLVD
 EL CAJON, CA 92020
 Phone: (619) 662-4100
 Fax: (619) 785-3356
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

HEPATOLOGY

GISH, ROBERT

Provider ID: 185267
 Provider Gender: Male
 License Number: G45632
 NPI: 1548281322
 Provider English Spoken: Y
 Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
 Cultural Competency: N
 Hospital Affiliation: LOMA LINDA UNIVERSITY COMM MED CTR
 Board Certified Specialty: No
 165 S 1ST ST
 EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619) 312-0347
 Website: www.lamaestra.org
 Email: aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM

HEPATOLOGY

GISH, ROBERT

Provider ID: 185267
 Provider Gender: Male
 License Number: G45632
 NPI: 1548281322
 Provider English Spoken: Y
 Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
 Cultural Competency: N
 Hospital Affiliation: LOMA LINDA UNIVERSITY COMM MED CTR
 Board Certified Specialty: No
 165 S 1ST ST
 EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619) 312-0347
 Website: www.lamaestra.org
 Email: aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM
INTERNAL MEDICINE
AL-TAMEEMI, AHMED
 Provider ID: 478971
 Provider Gender: Male
 License Number: A151547
 NPI: 1134513211
 Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No
 133 W MAIN ST STE 100
 EL CAJON, CA 92020
 Phone: (619) 401-0404
 After Hours Phone: (619) 401-0404
 Website: N/A
 Email: iselaochoa@borregohealth.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

AL-TAMEEMI, AHMED

Provider ID: 478971
 Provider Gender: Male
 License Number: A151547
 NPI: 1134513211
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 133 W MAIN ST STE 100
 EL CAJON, CA 92020
 Phone: (619) 401-0404
 After Hours Phone: (619) 401-0404
 Website: N/A
 Email: iselaochoa@borregohealth.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER






INTERNAL MEDICINE


AWDISHO, ALAN

Provider ID: 569910
 Provider Gender: Male
 License Number: 20A18702
 NPI: 1164795498
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

INTERNAL MEDICINE






AWDISHO, ALAN


Provider ID: 569910
 Provider Gender: Male
 License Number: 20A18702
 NPI: 1164795498
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150

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

INTERNAL MEDICINE



CARPENTER, 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
 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: Y
 Min/Max Age: 0\150

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

INTERNAL MEDICINE


CARPENTER, 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
 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: Y
 Min/Max Age: 0\150
 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
 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
 515-2498
 Website: www.fhcsd.org
 Email: janellek@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:30AM-5:30PM


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

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org


Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): Cultural Competency: N

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

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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


Hospital Affiliation: ST AGNES MEDICAL CENTER, CITY OF HOPE NATIONAL MED CTR, JOHN F KENNEDY MEMORIAL HOSP, SUTTER MEDICAL


CENTER SACRAMENTO, PIONEERS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL CHULA VISTA


Board Certified Specialty: No

 1032 BROADWAY

EL CAJON, CA 92021

 Phone: (619) 795-5991

 After Hours Phone: (619) 795-5991


 Website: www.lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

INTERNAL MEDICINE

JABRI, ZAIN

Provider ID: 418501

Provider Gender: Male

License Number: A160760

NPI: 1891159620

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: ST AGNES MEDICAL CENTER, CITY OF

HOPE NATIONAL MED CTR,
JOHN F KENNEDY MEMORIAL
HOSP, SUTTER MEDICAL
CENTER SACRAMENTO,
PIONEERS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
After Hours Phone: (619)
795-5991
Website: www.lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

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: Y

Min/Max Age: 0\150

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

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: Y

Min/Max Age: 0\150

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

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: Y





Min/Max Age: 0\150

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
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

MICHAEL, RAMI

Provider ID: 569910
 Provider Gender: Male
 License Number: A144513
 NPI: 1467871673
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

NADI, FAHIMA

Provider ID: 418340
 Provider Gender: Female
 License Number: A175325
 NPI: 1770072290
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Pushto
 Cultural Competency: N
 Board Certified Specialty: No

 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
 515-2498
 Website: www.fhcsd.org
 Email: janellek@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE





NADI, FAHIMA

Provider ID: 418340
 Provider Gender: Female
 License Number: A175325


NPI: 1770072290
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Pushto
 Cultural Competency: N
 Board Certified Specialty: No
 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
 515-2498
 Website: www.fhcsd.org
 Email: janellek@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

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
 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: Y
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM


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

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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



515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N




 Accessibility: CONTACT PROVIDER


INTERNAL MEDICINE

PETITT, JOHN

Provider ID: 478971
Provider Gender: Male
License Number: G52812
NPI: 1497992432

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

 133 W MAIN ST STE 100
EL CAJON, CA 92020
 Phone: (619) 401-0404
 After Hours Phone: (619) 401-0404

 Website: N/A
Email: iselaochoa@borregohealth.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

PETITT, JOHN

Provider ID: 478971
Provider Gender: Male
License Number: G52812

NPI: 1497992432


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 133 W MAIN ST STE 100
EL CAJON, CA 92020

 Phone: (619) 401-0404

 After Hours Phone: (619)
401-0404

 Website: N/A

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE


ROUEL, WADI


Provider ID: 418501

Provider Gender: Male

License Number: C55979

NPI: 1740254713

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish,
Syriac

Cultural Competency: N

Hospital Affiliation: SHARP


MEMORIAL HOSPITAL,


SCRIPPS MEMORIAL

HOSPITAL, GROSSMONT

HOSPITAL

Board Certified Specialty: No

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5983

 After Hours Phone: (619)

795-5983

 Website: www.lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

INTERNAL MEDICINE


ROUEL, WADI


Provider ID: 418501

Provider Gender: Male

License Number: C55979

NPI: 1740254713

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish,
Syriac

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,


SCRIPPS MEMORIAL


HOSPITAL, GROSSMONT

HOSPITAL

Board Certified Specialty: No

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5983

 After Hours Phone: (619)
795-5983

 Website: www.lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

INTERNAL MEDICINE

ROUEL, WADI


Provider ID: 185267

Provider Gender: Male

License Number: C55979

NPI: 1740254713

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish,
Syriac

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,


SCRIPPS MEMORIAL


HOSPITAL, GROSSMONT

HOSPITAL

Board Certified Specialty: No

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 269-1262

 After Hours Phone: (619)
269-1262

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

TH-F 8:00AM-5:00PM

INTERNAL MEDICINE



ROUEL, WADI

Provider ID: 185267

Provider Gender: Male

License Number: C55979

NPI: 1740254713

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

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,


SCRIPPS MEMORIAL


HOSPITAL, GROSSMONT

HOSPITAL

Board Certified Specialty: No

 165 S 1ST ST
 EL CAJON, CA 92019

 Phone: (619) 269-1262

 After Hours Phone: (619)
 269-1262

 Website: www.lamaestra.org

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

Hours: M-TU 8:00AM-5:00PM

TH-F 8:00AM-5:00PM

INTERNAL MEDICINE


ROUEL, LINDA

Provider ID: 308485

Provider Gender: Female

NPI: 1326128950

 Provider English Spoken: Y

 Provider Language(s)
 Spoken: Arabic, Mandarin,
 Syriac

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

 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: Y

Min/Max Age: 18\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Hours: M-F 8:00AM-7:00PM

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

INTERNAL MEDICINE

SIHOTA, GURPREET

Provider ID: 206354

Provider Gender: Female

License Number: 20A13700


NPI: 1659715852


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No


 1111 W CHASE AVE
 EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619)
 515-2499

 Website: www.fhcsd.org
 Email: jaquelininc@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150


American Sign Language (ASL): N




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


INTERNAL MEDICINE


SIHOTA, GURPREET

Provider ID: 206354
 Provider Gender: Female
 License Number: 20A13700
 NPI: 1659715852

 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

 1111 W CHASE AVE
 EL CAJON, CA 92020
 Phone: (619) 515-2499
 After Hours Phone: (619) 515-2499


 Website: www.fhcsd.org
 Email: jaquelininc@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N


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

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

 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: Y
 Min/Max Age: 0\150



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

 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: Y
 Min/Max Age: 0\150



American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


ZAYED, AHMAD

Provider ID: 478971
 Provider Gender: Male
 License Number: A169713
 NPI: 1720500929

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, Chinese, Mandarin, Persian, Tagalog
 Cultural Competency: N

Hospital Affiliation: RIVERSIDE COMMUNITY HOSP


Board Certified Specialty: No

 133 W MAIN ST STE 100
 EL CAJON, CA 92020
 Phone: (619) 401-0404
 After Hours Phone: (619) 401-0404

 Website: N/A

Email: iselaocha@borregohealth.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: SU-SA 8:00AM-8:00PM

INTERNAL MEDICINE

ZAYED, AHMAD

Provider ID: 478971
 Provider Gender: Male
 License Number: A169713
 NPI: 1720500929

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Arabic, Chinese, Mandarin, Persian, Tagalog
Cultural Competency: N
Hospital Affiliation: RIVERSIDE COMMUNITY HOSP

Board Certified Specialty: No

133 W MAIN ST STE 100
EL CAJON, CA 92020

Phone: (619) 401-0404

After Hours Phone: (619) 401-0404

Website: N/A

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

INTERVENTIONAL

CARDIOLOGY

KAFRI, HASSAN

Provider ID: 569910

Provider Gender: Male

License Number: A96002

NPI: 1730258401

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic, 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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

INTERVENTIONAL

CARDIOLOGY

KAFRI, HASSAN

Provider ID: 569910

Provider Gender: Male

License Number: A96002

NPI: 1730258401

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic, 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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

INTERVENTIONAL

CARDIOLOGY

MOUSSAVIAN, MEHRAN

Provider ID: 418340

Provider Gender: Male

License Number: 20A7241

NPI: 1689788234

Provider English Spoken: Y

Provider Language(s) Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, TRI

CITY MEDICAL CTR, SHARP

MEMORIAL HOSPITAL,

ALVARADO HOSPITAL LLC,

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

Adventist Health and Rideout

Board Certified Specialty: No

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619) 515-2498

Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

**INTERVENTIONAL
CARDIOLOGY**

MOUSSAVIAN, MEHRAN

Provider ID: 418340

Provider Gender: Male

License Number: 20A7241

NPI: 1689788234

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR, TRI
CITY MEDICAL CTR, SHARP
MEMORIAL HOSPITAL,
ALVARADO HOSPITAL LLC,
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

Adventist Health and Rideout

Board Certified Specialty: No

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Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 418340

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

525 E MAIN ST

EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 418340

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

525 E MAIN ST

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

525 E MAIN ST

EL CAJON, CA 92020


Phone: (619) 515-2498

After Hours Phone: (619)
515-2498



Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER






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




 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
 Email: janellek@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
BULLOCH, EDGAR

Provider ID: 478971

Provider Gender: Male
 License Number: A113241
 NPI: 1508046376
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: GROSSMONT HOSPITAL, Sharp Grossmont Hospital
 Board Certified Specialty: No
 133 W MAIN ST STE 100
 EL CAJON, CA 92020
 Phone: (619) 873-8940
 After Hours Phone: (619) 873-8940
 Website: N/A
 Email: iselaochoa@borregohealth.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
BULLOCH, EDGAR

Provider ID: 478971
 Provider Gender: Male
 License Number: A113241
 NPI: 1508046376
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: GROSSMONT HOSPITAL, Sharp Grossmont Hospital
 Board Certified Specialty: No
 133 W MAIN ST STE 100

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 Website: N/A
 Email: iselaochoa@borregohealth.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 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
 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
 Email: janellek@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

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

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

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 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA

Provider ID: 418340
Provider Gender: Female
License Number: A118095
NPI: 1073701041
 Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
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 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA

Provider ID: 418340
Provider Gender: Female
License Number: A118095
NPI: 1073701041
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No

525 E MAIN ST
EL CAJON, CA 92020
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 After Hours Phone: (619)
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 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Hours: M-F 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

525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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

525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

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

525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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

525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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

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

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

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

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY


HO, MYLIEN


Provider ID: 478971

Provider Gender: Female

License Number: A48215

NPI: 1851464606

 Provider English Spoken: Y

 Provider Language(s) Spoken: Vietnamese

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL

Board Certified Specialty: No

 133 W MAIN ST STE 100

EL CAJON, CA 92020

 Phone: (619) 873-8940

 After Hours Phone: (619) 873-8940

 Website: N/A

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


HO, MYLIEN


Provider ID: 478971

Provider Gender: Female

License Number: A48215

NPI: 1851464606

 Provider English Spoken: Y

 Provider Language(s) Spoken: Vietnamese

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL

Board Certified Specialty: No

 133 W MAIN ST STE 100

EL CAJON, CA 92020

 Phone: (619) 873-8940

 After Hours Phone: (619) 873-8940

 Website: N/A

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

KHAN, ALIYA

Provider ID: 418501
 Provider Gender: Female
 License Number: G50634
 NPI: 1285687350
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Hindi, Urdu
 Cultural Competency: N
 Board Certified Specialty: No

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

Website: www.lamaestra.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-6:00PM
 SA 8:00AM-2:00PM

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

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

Website: www.lamaestra.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-6:00PM
 SA 8:00AM-2:00PM

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

525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
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 515-2498

Website: www.fhcsd.org
 Email: janellek@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N

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

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

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

Website: www.fhcsd.org
 Email: janellek@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N

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

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 418340
 Provider Gender: Female
 License Number: A116680
 NPI: 1700073962

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

Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

525 E MAIN ST

EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 418340

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

525 E MAIN ST

EL CAJON, CA 92020



Phone: (619) 515-2498



After Hours Phone: (619)
515-2498



Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MELENDEZ BERRIOS, IARA

DEL

Provider ID: 418340

Provider Gender: Female

License Number: A114181

NPI: 1740514249

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No

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OBSTETRICS / GYNECOLOGY

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DEL

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GROSSMONT HOSPITAL

Board Certified Specialty: No

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PROVIDER

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

SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

Provider ID: 569910

Provider Gender: Male

License Number: A47906

NPI: 1437181922

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: MERCY GENERAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, SAN JOAQUIN COMM HOSP, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

Provider ID: 569910
 Provider Gender: Male
 License Number: A47906
 NPI: 1437181922
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N

Hospital Affiliation: MERCY GENERAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, SAN JOAQUIN COMM HOSP, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER
 Board Certified Specialty: No
 875 EL CAJON BLVD EL CAJON, CA 92020
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

PAPA, RHETT

Provider ID: 478971
 Provider Gender: Male
 License Number: 20A11733
 NPI: 1063642312
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: GROSSMONT HOSPITAL
 Board Certified Specialty: No
 133 W MAIN ST STE 100 EL CAJON, CA 92020
 Phone: (619) 873-8940

After Hours Phone: (619) 873-8940
 Website: N/A
 Email: iselaochoa@borregohealth.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

PAPA, RHETT

Provider ID: 478971
 Provider Gender: Male
 License Number: 20A11733
 NPI: 1063642312
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: GROSSMONT HOSPITAL
 Board Certified Specialty: No
 133 W MAIN ST STE 100 EL CAJON, CA 92020
 Phone: (619) 873-8940
 After Hours Phone: (619) 873-8940
 Website: N/A
 Email: iselaochoa@borregohealth.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 418340

Provider Gender: Male
 License Number: A154298
 NPI: 1710316450
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SHARP
 CORONADO HOSP AND
 HEALTHCARE CTR,
 GROSSMONT HOSPITAL
 Board Certified Specialty: No
 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
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 515-2498
 Website: www.fhcsd.org
 Email: janellek@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
RODRIGUEZ JEREZ, ROBERTO
 Provider ID: 418340
 Provider Gender: Male
 License Number: A154298
 NPI: 1710316450
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SHARP
 CORONADO HOSP AND

HEALTHCARE CTR,
 GROSSMONT HOSPITAL
 Board Certified Specialty: No
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
SAPRA, SONIA
 Provider ID: 418340
 Provider Gender: Female
 License Number: A164859
 NPI: 1952751711

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Hindi
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL
 Board Certified Specialty: No
 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
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 515-2498
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 Email: janellek@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N

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

OBSTETRICS / GYNECOLOGY
SAPRA, SONIA

Provider ID: 418340
 Provider Gender: Female
 License Number: A164859
 NPI: 1952751711
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Hindi
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL
 Board Certified Specialty: No

525 E MAIN ST
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 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
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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

525 E MAIN ST
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Min/Max Age: 0\150
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

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Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N

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

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 418340
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP

AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

525 E MAIN ST

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 418340

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

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

Board Certified Specialty: No

525 E MAIN ST

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

OPHTHALMOLOGY

ALBORZIAN, SHERVIN

Provider ID: 418340

Provider Gender: Male

License Number: A107093

NPI: 1588825129

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL

Board Certified Specialty: No

525 E MAIN ST

EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

SA 8:30AM-5:30PM

OPHTHALMOLOGY

ALBORZIAN, SHERVIN

Provider ID: 418340

Provider Gender: Male

License Number: A107093

NPI: 1588825129

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL

Board Certified Specialty: No

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Email: janellek@fhcsd.org

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American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

SA 8:30AM-5:30PM

OPHTHALMOLOGY

JARDON, JAVIER

Provider ID: 569910

Provider Gender: Male

License Number: A131365

NPI: 1609171982

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:
CALIFORNIA HOSP MED CTR
LOS ANGELES, EL CENTRO
REGIONAL MEDICAL CENTER

Board Certified Specialty: No

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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

JARDON, JAVIER

Provider ID: 569910
Provider Gender: Male
License Number: A131365
NPI: 1609171982
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
CALIFORNIA HOSP MED CTR
LOS ANGELES, EL CENTRO
REGIONAL MEDICAL CENTER
Board Certified Specialty: No

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Website: www.syhealth.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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

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American Sign Language (ASL):
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Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

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

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American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY

PAPASTERGIU, GEORGIOS

Provider ID: 569910
Provider Gender: Male
License Number: A127706
NPI: 1790054393
Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Farsi,
French, Greek, Italian,
Spanish
Cultural Competency: N
Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL






Board Certified Specialty: No

875 EL CAJON BLVD
EL CAJON, CA 92020
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 Website: www.syhealth.org
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OPHTHALMOLOGY

PAPASTERGIU, GEORGIOS

Provider ID: 569910
 Provider Gender: Male
 License Number: A127706
 NPI: 1790054393
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, Farsi, French, Greek, Italian, Spanish
 Cultural Competency: N
 Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
 Board Certified Specialty: No
 875 EL CAJON BLVD EL CAJON, CA 92020
 Phone: (619) 662-4100
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 Website: www.syhealth.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY

PONS, MAURICIO

Provider ID: 569910
 Provider Gender: Male
 License Number: A87650
 NPI: 1376723759
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

PONS, MAURICIO

Provider ID: 569910
 Provider Gender: Male
 License Number: A87650
 NPI: 1376723759
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N




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



Board Certified Specialty: No

 875 EL CAJON BLVD EL CAJON, CA 92020
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY



SKAF, AYHAM

Provider ID: 569910
 Provider Gender: Male
 License Number: A120584
 NPI: 1285888628
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, Spanish
 Cultural Competency: N
 Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
 Board Certified Specialty: No
 875 EL CAJON BLVD EL CAJON, CA 92020
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 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

OPHTHALMOLOGY

SKAF, AYHAM

Provider ID: 569910
 Provider Gender: Male
 License Number: A120584
 NPI: 1285888628
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, Spanish
 Cultural Competency: N
 Hospital Affiliation: EL CENTRO
 REGIONAL MEDICAL CENTER,
 SHARP MEMORIAL HOSPITAL,
 SCRIPPS MEMORIAL
 HOSPITAL

Board Certified Specialty: No






 875 EL CAJON BLVD
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PEDIATRICS

ADJAN, ROULA







Provider ID: 185267
 Provider Gender: Female


License Number: A81682
 NPI: 1992847263
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, Spanish
 Cultural Competency: N
 Board Certified Specialty: No

 165 S 1ST ST
 EL CAJON, CA 92019
 Phone: (619) 280-4213
 After Hours Phone: (619)
 280-4213
 Website: www.lamaestra.org
 Email:
aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PEDIATRICS



ADJAN, ROULA

Provider ID: 185267
 Provider Gender: Female
 License Number: A81682
 NPI: 1992847263
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 165 S 1ST ST
 EL CAJON, CA 92019
 Phone: (619) 280-4213
 After Hours Phone: (619)
 280-4213
 Website: www.lamaestra.org
 Email:






aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PEDIATRICS

CONE, STEPHANIE

Provider ID: 185267
 Provider Gender: Female
 License Number: A123929
 NPI: 1437444858
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, RADY CHILDRENS
 HOSPITAL SAN DIEGO

Board Certified Specialty: No

 165 S 1ST ST
 EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619)
 312-0347
 Website: www.lamaestra.org
 Email:
aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PEDIATRICS

CONE, STEPHANIE

Provider ID: 185267

Provider Gender: Female

License Number: A123929

NPI: 1437444858

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

165 S 1ST ST

EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

1032 BROADWAY

EL CAJON, CA 92021

Phone: (619) 795-5991

After Hours Phone: (619)
795-5991

Website: www.lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

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

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

1032 BROADWAY

EL CAJON, CA 92021

Phone: (619) 795-5991

After Hours Phone: (619)

795-5991

Website: www.lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

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

PEDIATRICS

FIGUEROA RODRIGUEZ, BRENDA

Provider ID: 478971

Provider Gender: Female

License Number: A114674

NPI: 1134205214

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

133 W MAIN ST STE 100

EL CAJON, CA 92020

Phone: (619) 873-8940

After Hours Phone: (619)
873-8940

Website: N/A

Email:
iselaocha@borregohealth.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

PEDIATRICS

FIGUEROA RODRIGUEZ, BRENDA

Provider ID: 478971

Provider Gender: Female

License Number: A114674
 NPI: 1134205214
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 133 W MAIN ST STE 100
 EL CAJON, CA 92020
 Phone: (619) 873-8940
 After Hours Phone: (619) 873-8940
 Website: N/A
 Email: iselaochoa@borregohealth.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

FLEMING, TARA

Provider ID: 418340
 Provider Gender: Female
 License Number: A152462
 NPI: 1972965242
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL
 Board Certified Specialty: No
 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
 Email: janellek@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 NPI: 1972965242
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL
 Board Certified Specialty: No
 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
 Email: janellek@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):

PEDIATRICS

HOANG, VY

Provider ID: 546310
 Provider Gender: Female
 NPI: 1649575135
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP

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

PEDIATRICS

HOANG, VY


Provider ID: 546310
 Provider Gender: Female
 NPI: 1649575135
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP

FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

PEDIATRICS

IMRIE, DRU



Provider ID: 588459
 Provider Gender: Male
 NPI: 1861853236
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: TRI CITY MEDICAL CTR
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PEDIATRICS


JACKSON, DANA

Provider ID: 418340
Provider Gender: Female
License Number: 20A14119
NPI: 1689060063

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

Cultural Competency: N
Hospital Affiliation: MARINHEALTH AND MARINHEALTH MEDICAL CENTER, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

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

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150



American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

JACKSON, DANA

Provider ID: 418340
Provider Gender: Female
License Number: 20A14119
NPI: 1689060063

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

Cultural Competency: N
Hospital Affiliation: MARINHEALTH AND MARINHEALTH MEDICAL CENTER, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

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


 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N




 *Accessibility: CONTACT PROVIDER*

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

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

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y


Min/Max Age: 0\150
American Sign Language (ASL): N

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


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

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

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150



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

1111 W CHASE AVE
EL CAJON, CA 92020
Phone: (619) 515-2499
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Email: jaquelin@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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

1111 W CHASE AVE
EL CAJON, CA 92020
Phone: (619) 515-2499
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Email: jaquelin@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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

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: Y
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

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
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: Y
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

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
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: Y
Min/Max Age: 0\19
American Sign Language (ASL):

N
 **Accessibility: CONTACT PROVIDER**
 Hours: M-F 8:00AM-5:00PM

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



 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):

N
 **Accessibility: CONTACT PROVIDER**
 Hours: M-F 8:00AM-5:00PM

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

 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N

 **Accessibility: CONTACT PROVIDER**
 Hours: M-F 8:00AM-5:00PM

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
 1032 BROADWAY
 EL CAJON, CA 92021
 Phone: (619) 795-5991
 After Hours Phone: (619)
 795-5991
 Website: www.lamaestra.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N


 **Accessibility: CONTACT PROVIDER**




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

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

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

 Website: www.lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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


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

 Website: www.lamaestra.org


Email:
 aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

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






 165 S 1ST ST
 EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619) 312-0347
 Website: www.lamaestra.org


g
 Email:
 aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

MERCER, KELLY



Provider ID: 418501
 Provider Gender: Female
 License Number: PA21625
 NPI: 1154609790
 Provider English Spoken: Y

 Provider Language(s)
 Spoken: Arabic
 Cultural Competency: N
 Board Certified Specialty: No
 1032 BROADWAY
 EL CAJON, CA 92021
 Phone: (619) 795-5991
 After Hours Phone: (619) 795-5991
 Website: www.lamaestra.org


g
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 418501
 Provider Gender: Female
 License Number: PA21625
 NPI: 1154609790
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic
 Cultural Competency: N
 Board Certified Specialty: No

 1032 BROADWAY
 EL CAJON, CA 92021
 Phone: (619) 795-5991
 After Hours Phone: (619) 795-5991
 Website: www.lamaestra.org


g
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT

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




PHYSICIANS ASSISTANT


ROSENBLATT, SHERI


Provider ID: 569910
 Provider Gender: Female
 License Number: PA22872
 NPI: 1114041621

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

ROSENBLATT, SHERI

Provider ID: 569910
 Provider Gender: Female
 License Number: PA22872
 NPI: 1114041621

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS



MEMORIAL HOSPITAL
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT


TURNER, SHEREENA

Provider ID: 418340
 Provider Gender: Female
 License Number: PA20396
 NPI: 1992934988
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
 Board Certified Specialty: No

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



 Website: www.fhcsd.org
 Email: janellek@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

TURNER, SHEREENA


Provider ID: 418340
 Provider Gender: Female

License Number: PA20396
 NPI: 1992934988
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
 Board Certified Specialty: No


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 Website: www.fhcsd.org
 Email: janellek@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150


American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM


PHYSICIANS ASSISTANT

ZAMBRANA, GEORGE

Provider ID: 478971
 Provider Gender: Male
 License Number: PA16673
 NPI: 1104836659
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

 133 W MAIN ST STE 100
 EL CAJON, CA 92020
 Phone: (619) 873-8940
 After Hours Phone: (619) 873-8940


 Website: N/A
 Email: iselaocha@borregohealth.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: SU-SA 8:00AM-8:00PM

PHYSICIANS ASSISTANT

ZAMBRANA, GEORGE


Provider ID: 478971
 Provider Gender: Male
 License Number: PA16673
 NPI: 1104836659

 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

 133 W MAIN ST STE 100
 EL CAJON, CA 92020
 Phone: (619) 873-8940
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 Website: N/A
 Email:



iselaocha@borregohealth.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N




 Accessibility: CONTACT PROVIDER
 Hours: SU-SA 8:00AM-8:00PM

PODIATRIST

CHARP, KENNETH



Provider ID: 478971
 Provider Gender: Male
 License Number: DPM1536
 NPI: 1841384203


 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No

 133 W MAIN ST STE 100
EL CAJON, CA 92020
 Phone: (619) 873-8940
 After Hours Phone: (619)
873-8940
 Website: N/A
Email:
iselaocha@borregohealth.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PODIATRIST

CHARP, KENNETH



Provider ID: 478971
Provider Gender: Male
License Number: DPM1536
NPI: 1841384203
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

 133 W MAIN ST STE 100
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873-8940
 Website: N/A
Email:
iselaocha@borregohealth.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PODIATRIST

JUAREZ, LETICIA

Provider ID: 418340
Provider Gender: Female
License Number: DPM5661
NPI: 1508393778



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2400
 After Hours Phone: (619)
515-2400
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM


PODIATRIST

JUAREZ, LETICIA

Provider ID: 418340
Provider Gender: Female
License Number: DPM5661
NPI: 1508393778

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2400
 After Hours Phone: (619)
515-2400
 Website: www.fhcsd.org





Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

PODIATRIST

LE, DIANA

Provider ID: 418340
Provider Gender: Female
License Number: DPM5734
NPI: 1184112864

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR
Board Certified Specialty: No

 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

PODIATRIST

LE, DIANA

Provider ID: 418340

Provider Gender: Female
 License Number: DPM5734
 NPI: 1184112864
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Vietnamese
 Cultural Competency: N
 Hospital Affiliation: ANAHEIM
 REGIONAL MEDICAL CTR
 Board Certified Specialty: No
 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
 515-2498
 Website: www.fhcsd.org
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 American Sign Language (ASL):
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 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:30AM-5:30PM
 SA 8:30AM-5:30PM

**REGISTERED PHYSICAL
 THERAPIST**

CUMMINGS, GEORGE
 Provider ID: 418340
 Provider Gender: Male
 License Number: PT295173
 NPI: 1497236384
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)

515-2498
 Website: www.fhcsd.org
 Email: janellek@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

**REGISTERED PHYSICAL
 THERAPIST**

CUMMINGS, GEORGE
 Provider ID: 418340
 Provider Gender: Male
 License Number: PT295173
 NPI: 1497236384
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 525 E MAIN ST
 EL CAJON, CA 92020
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 Website: www.fhcsd.org
 Email: janellek@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

**REGISTERED PHYSICAL
 THERAPIST**

DASCENZO, EMILY
 Provider ID: 569910
 Provider Gender: Female

License Number: PT40025
 NPI: 1952982761
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

**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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

**REGISTERED PHYSICAL
THERAPIST**

GUTIERREZ, JUSTINE

Provider ID: 418340

Provider Gender: Female

License Number: PT292482

NPI: 1851834873

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

**REGISTERED PHYSICAL
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Provider ID: 418340

Provider Gender: Female

License Number: PT292482

NPI: 1851834873

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

**REGISTERED PHYSICAL
THERAPIST**

KUIOKA, TROY

Provider ID: 569910

Provider Gender: Male

License Number: PT42665

NPI: 1912640053

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

**REGISTERED PHYSICAL
THERAPIST**

KUIOKA, TROY

Provider ID: 569910

Provider Gender: Male

License Number: PT42665

NPI: 1912640053

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

**REGISTERED PHYSICAL
THERAPIST**

MIGNEA, DAVID

Provider ID: 418340

Provider Gender: Male

License Number: PT293536

NPI: 1043736879

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

Provider ID: 418340

Provider Gender: Male

License Number: PT293536

NPI: 1043736879

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

525 E MAIN ST

EL CAJON, CA 92020

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

ENCINITAS

CERTIFIED NURSE

PRACTITIONER

MACIAS, ALISSA

Provider ID: 480243

Provider Gender: Female

License Number: NP21368

NPI: 1952658445

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

1130 2ND ST

ENCINITAS, CA 92024

Phone: (760) 736-6767

After Hours Phone: (760)

736-6767

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

MACIAS, ALISSA

Provider ID: 480243

Provider Gender: Female

License Number: NP21368

NPI: 1952658445

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

1130 2ND ST

ENCINITAS, CA 92024

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

CHIROPRACTOR

LOVERN, JENNIFER

Provider ID: 480243

Provider Gender: Female

License Number: DC29074

NPI: 1235469396

Provider English Spoken: Y

Provider Language(s)

Spoken: Italian, Spanish

Cultural Competency: N

Board Certified Specialty: No

1130 2ND ST

ENCINITAS, CA 92024

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM

F 8:30AM-5:30PM

CHIROPRACTOR

LOVERN, JENNIFER

Provider ID: 480243

Provider Gender: Female

License Number: DC29074

NPI: 1235469396

Provider English Spoken: Y

Provider Language(s) Spoken: Italian, Spanish

Cultural Competency: N

Board Certified Specialty: No

1130 2ND ST

ENCINITAS, CA 92024

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM

F 8:30AM-5:30PM

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 480243

Provider Gender: Male

License Number: C54157

NPI: 1275630618

Provider English Spoken: Y

Provider Language(s)
Spoken: Bengali

Cultural Competency: N

Board Certified Specialty: No

1130 2ND ST

ENCINITAS, CA 92024

Phone: (760) 753-7842

After Hours Phone: (760)
753-7842

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 480243

Provider Gender: Male

License Number: C54157

NPI: 1275630618

Provider English Spoken: Y

Provider Language(s)
Spoken: Bengali

Cultural Competency: N

Board Certified Specialty: No

1130 2ND ST

ENCINITAS, CA 92024

Phone: (760) 753-7842

After Hours Phone: (760)
753-7842

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SAFI, ROOZCHEHR

Provider ID: 480243

Provider Gender: Female

License Number: A116562

NPI: 1659563641

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No

1130 2ND ST

ENCINITAS, CA 92024

Phone: (760) 753-7842

After Hours Phone: (760)
753-7842

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SAFI, ROOZCHEHR

Provider ID: 480243

Provider Gender: Female

License Number: A116562

NPI: 1659563641

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No

1130 2ND ST

ENCINITAS, CA 92024

Phone: (760) 753-7842

After Hours Phone: (760)
753-7842

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

WILLIE, KADEN

Provider ID: 480243

Provider Gender: Male

License Number: 20A17306

NPI: 1790133767

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese

Cultural Competency: N

Board Certified Specialty: No

1130 2ND ST

ENCINITAS, CA 92024

Phone: (707) 736-6767

After Hours Phone: (707)
736-6767

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:00PM

F 8:30AM-5:30PM

FAMILY PRACTICE

WILLIE, KADEN

Provider ID: 480243
 Provider Gender: Male
 License Number: 20A17306
 NPI: 1790133767

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Portuguese
 Cultural Competency: N
 Board Certified Specialty: No
 1130 2ND ST
 ENCINITAS, CA 92024
 Phone: (707) 736-6767
 After Hours Phone: (707)
 736-6767
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8:00AM-5:00PM
 F 8:30AM-5:30PM

FQHC

TRUECARE,

Provider ID: 480243
 NPI: 1245246917
 Provider English Spoken: Y
 Cultural Competency: N
 1130 2ND ST
 ENCINITAS, CA 92024
 Phone: (760) 753-7842
 Fax: (760) 736-8740
 After Hours Phone: (760)
 753-7842
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT

PROVIDER
 Hours: M-TH 8:00AM-5:00PM
 F 8:30AM-5:30PM

FQHC

TRUECARE,

Provider ID: 480243
 NPI: 1245246917
 Provider English Spoken: Y
 Cultural Competency: N
 1130 2ND ST
 ENCINITAS, CA 92024
 Phone: (760) 753-7842
 Fax: (760) 736-8740
 After Hours Phone: (760)
 753-7842
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8:00AM-5:00PM
 F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

Provider ID: 480243
 Provider Gender: Female
 License Number: A97181
 NPI: 1154477628
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Spanish
 Cultural Competency: N
 Hospital Affiliation: TRI CITY
 MEDICAL CTR, PALOMAR
 MEDICAL CENTER
 Board Certified Specialty: No
 1130 2ND ST

ENCINITAS, CA 92024
 Phone: (760) 736-6767
 After Hours Phone: (760)
 736-6767
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8:00AM-5:00PM
 F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

Provider ID: 480243
 Provider Gender: Female
 License Number: A97181
 NPI: 1154477628
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Spanish
 Cultural Competency: N
 Hospital Affiliation: TRI CITY
 MEDICAL CTR, PALOMAR
 MEDICAL CENTER
 Board Certified Specialty: No
 1130 2ND ST
 ENCINITAS, CA 92024
 Phone: (760) 736-6767
 After Hours Phone: (760)
 736-6767
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8:00AM-5:00PM
 F 8:30AM-5:30PM

PEDIATRICS

BRION, SONJA

Provider ID: 386639

Provider Gender: Female

NPI: 1306817317

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS

HOSPITAL SAN DIEGO,

SCRIPPS MEMORIAL

HOSPITAL

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

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

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

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

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

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

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

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

PEDIATRICS

MURPHY, CARMEL

Provider ID: 480243

Provider Gender: Female

License Number: A103940

NPI: 1790824787

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO

Board Certified Specialty: No

1130 2ND ST

ENCINITAS, CA 92024

Phone: (760) 753-7842

After Hours Phone: (760)

753-7842

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

PEDIATRICS



MURPHY, CARMEL


Provider ID: 480243
 Provider Gender: Female
 License Number: A103940
 NPI: 1790824787


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

Cultural Competency: N
 Hospital Affiliation: TRI CITY
 MEDICAL CTR, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO

Board Certified Specialty: No

 1130 2ND ST
 ENCINITAS, CA 92024
 Phone: (760) 753-7842


 After Hours Phone: (760)
 753-7842

 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

PEDIATRICS

TERRY, AMANDA


Provider ID: 386739
 Provider Gender: Female
 NPI: 1861770885


Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS
 MEMORIAL HOSPITAL, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, SCRIPPS MEMORIAL
 HOSPITAL ENCINITAS, UCSF
 BENIOFF CHILDREN'S

HOSPITAL OAKLAND


Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

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

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

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

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

PHYSICIANS ASSISTANT


CHISWICK, GARY


Provider ID: 480243
 Provider Gender: Male
 License Number: PA22667
 NPI: 1174964001

Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:

GROSSMONT HOSPITAL
 Board Certified Specialty: No

 1130 2ND ST
 ENCINITAS, CA 92024

 Phone: (760) 736-6767

 After Hours Phone: (760)
 736-6767

 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480243
 Provider Gender: Male
 License Number: PA22667
 NPI: 1174964001

Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:

GROSSMONT HOSPITAL
 Board Certified Specialty: No

1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

FORSMAN, SHANA

Provider ID: 480243
Provider Gender: Female
License Number: PA19437
NPI: 1306026737

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

Cultural Competency: N
Board Certified Specialty: No

1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

FORSMAN, SHANA

Provider ID: 480243
Provider Gender: Female
License Number: PA19437

NPI: 1306026737
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ESCONDIDO

CERTIFIED NURSE

PRACTITIONER

CARNEY, AMY

Provider ID: 206271
Provider Gender: Female
License Number: NP8169
NPI: 1164445227
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM

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

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900

Website: N/A
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

HACINAS, REYNALDO

Provider ID: 419344
Provider Gender: Male
License Number: NP95003024

NPI: 1215304860

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

Phone: (760) 767-5051

After Hours Phone: (760)
767-5051

Website: N

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

HACINAS, REYNALDO

Provider ID: 419344

Provider Gender: Male

License Number: NP95003024

NPI: 1215304860

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

Phone: (760) 767-5051

After Hours Phone: (760)
767-5051

Website: N

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

KAHL, NICHOLAS

Provider ID: 588941

Provider Gender: Male

License Number: NP95006360

NPI: 1821306598

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

704 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\120

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

KAHL, NICHOLAS

Provider ID: 588941

Provider Gender: Male

License Number: NP95006360

NPI: 1821306598

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

704 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\120

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

MITCHELL, CATHY

Provider ID: 424775

Provider Gender: Female

License Number: NP4799

NPI: 1356365365

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

426 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 690-5900

After Hours Phone: (760)
690-5900

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\21

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE

PRACTITIONER

MITCHELL, CATHY

Provider ID: 424775

Provider Gender: Female

License Number: NP4799

NPI: 1356365365

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

426 N DATE ST
 ESCONDIDO, CA 92025
 Phone: (760) 690-5900
 After Hours Phone: (760) 690-5900
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\21
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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

704 E GRAND AVE
 ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\120
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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

704 E GRAND AVE
 ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\120
 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

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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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


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: Y
 Min/Max Age: 0\150
 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

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: Y



Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-0:00PM

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


 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: Y
 Min/Max Age: 0\150


American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-0:00PM




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


 704 E GRAND AVE
 ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100

 Website: N/A

Medi-Cal Open Panel: Y



Min/Max Age: 0\120

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER




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

 704 E GRAND AVE
 ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100

 Website: N/A

Medi-Cal Open Panel: Y


Min/Max Age: 0\120

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

 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: Y

Min/Max Age: 0\150


American Sign Language (ASL):
 N



 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-0:00PM

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

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

 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: Y

Min/Max Age: 0\150

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

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900

 After Hours Phone: (760) 737-6900

 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM

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

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900


 After Hours Phone: (760) 737-6900

 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-W 8:00AM-8:00PM

TH-F 8:00AM-5:00PM

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900

 After Hours Phone: (760) 737-6900







 Website: N/A

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-W 8:00AM-8:00PM
 TH-F 8:00AM-5:00PM

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
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
 737-6900
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-W 8:00AM-8:00PM
 TH-F 8:00AM-5:00PM

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
 704 E GRAND AVE
 ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\120
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

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
 704 E GRAND AVE
 ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\120
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


FERRAILOLO, NATALIE

Provider ID: 206270
 Provider Gender: Female
 License Number: A152372
 NPI: 1306290143

 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-0:00PM

FAMILY PRACTICE

FERRAILOLO, NATALIE

Provider ID: 206270
 Provider Gender: Female
 License Number: A152372
 NPI: 1306290143
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-0:00PM

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

128 N BROADWAY
ESCONDIDO, CA 92025

Phone: (760) 546-2858

After Hours Phone: (760)
546-2858

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

128 N BROADWAY
ESCONDIDO, CA 92025

Phone: (760) 546-2858

After Hours Phone: (760)
546-2858

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

KAUR, JATINDER

Provider ID: 206270

Provider Gender: Female

License Number: A120771

NPI: 1912141391

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Urdu

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

KAUR, JATINDER

Provider ID: 206270

Provider Gender: Female

License Number: A120771

NPI: 1912141391

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Urdu

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

LAI, AMARA

Provider ID: 206271

Provider Gender: Female

License Number: A120348

NPI: 1790912855

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Phone: (760) 737-6900

After Hours Phone: (760)
737-6900

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM

TH-F 8:00AM-5:00PM

FAMILY PRACTICE

LAI, AMARA

Provider ID: 206271
 Provider Gender: Female
 License Number: A120348
 NPI: 1790912855

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

Board Certified Specialty: No

728 E VALLEY PKWY
 ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760) 737-6900

Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TU 8:00AM-5:00PM
 W 9:00AM-5:00PM
 TH-F 8:00AM-5:00PM

FAMILY PRACTICE

MATSHE, ZENZIWE

Provider ID: 665448
 Provider Gender: Female
 NPI: 1285256073

Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

460 N ELM ST
 ESCONDIDO, CA 92025
 Phone: (833) 867-4642
 Fax: (360) 462-2745

After Hours Phone: (833) 867-4642

Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

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

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: Y
 Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-0:00PM

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

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: Y
 Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-0:00PM

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

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: Y
 Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT

PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

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

📍 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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

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

📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025
☎ Phone: (760) 737-6900
📞 After Hours Phone: (760)

737-6900
🌐 Website: N/A
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
PATEL, JITENBHAI

Provider ID: 206270
Provider Gender: Male
License Number: A94128
NPI: 1902921406

☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

📍 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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
PATEL, JITENBHAI

Provider ID: 206270
Provider Gender: Male
License Number: A94128
NPI: 1902921406

☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

📍 460 N ELM ST

ESCONDIDO, CA 92025
☎ Phone: (760) 520-8100
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Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
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FAMILY PRACTICE
PATEL, JITENBHAI

Provider ID: 206271
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Cultural Competency: N
Board Certified Specialty: No

📍 728 E VALLEY PKWY
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☎ Phone: (760) 737-6900
📞 After Hours Phone: (760) 737-6900
🌐 Website: N/A
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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

704 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\120

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

704 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\120

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

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: Y

Min/Max Age: 0\150

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SANDHU, BASANT

Provider ID: 206271

Provider Gender: Male

License Number: A140398

NPI: 1265795744

Provider English Spoken: Y

Provider Language(s)
Spoken: German, Hindi,
Punjabi, Spanish

Cultural Competency: N

Board Certified Specialty: No

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Phone: (760) 737-6900

After Hours Phone: (760)
737-6900

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-W 8:00AM-8:00PM

TH-F 8:00AM-5:00PM

FAMILY PRACTICE

SANDHU, BASANT

Provider ID: 206271
 Provider Gender: Male
 License Number: A140398
 NPI: 1265795744
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: German, Hindi,
 Punjabi, Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
 737-6900
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-W 8:00AM-8:00PM
 TH-F 8:00AM-5:00PM

FAMILY PRACTICE

SCHULTZ, JAMES

Provider ID: 206271
 Provider Gender: Male
 License Number: G61829
 NPI: 1356376164
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Greek,
 Spanish
 Cultural Competency: N
 Hospital Affiliation:
 SOUTHWEST HEALTHCARE
 INLAND VALLEY HOSPITAL,
 SOUTHWEST HEALTHCARE
 RANCHO SPRINGS HOSPITAL,

PALOMAR MEDICAL CENTER N
 Board Certified Specialty: No
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
 737-6900
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

SCHULTZ, JAMES

Provider ID: 206270
 Provider Gender: Male
 License Number: G61829
 NPI: 1356376164
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Greek,
 Spanish
 Cultural Competency: N
 Hospital Affiliation:
 SOUTHWEST HEALTHCARE
 INLAND VALLEY HOSPITAL,
 SOUTHWEST HEALTHCARE
 RANCHO SPRINGS HOSPITAL,
 PALOMAR MEDICAL CENTER
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE








SCHULTZ, JAMES

Provider ID: 206270
 Provider Gender: Male
 License Number: G61829
 NPI: 1356376164
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Greek,
 Spanish
 Cultural Competency: N
 Hospital Affiliation:
 SOUTHWEST HEALTHCARE
 INLAND VALLEY HOSPITAL,
 SOUTHWEST HEALTHCARE
 RANCHO SPRINGS HOSPITAL,
 PALOMAR MEDICAL CENTER
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE






SCHULTZ, JAMES


Provider ID: 206271
 Provider Gender: Male
 License Number: G61829
 NPI: 1356376164

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Greek, Spanish
 Cultural Competency: N
 Hospital Affiliation:
 SOUTHWEST HEALTHCARE
 INLAND VALLEY HOSPITAL,
 SOUTHWEST HEALTHCARE
 RANCHO SPRINGS HOSPITAL,
 PALOMAR MEDICAL CENTER
 Board Certified Specialty: No
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
 737-6900
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

TANTOD, KULIN


Provider ID: 206270
 Provider Gender: Male
 License Number: A109655
 NPI: 1902058928
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE



TANTOD, KULIN

Provider ID: 206270
 Provider Gender: Male
 License Number: A109655
 NPI: 1902058928
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-0:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

FQHC

CENTRO MEDICO ESCONDIDO,

Provider ID: 419344

NPI: 1023349883

☐ Provider English Spoken: Y
Cultural Competency: N

📍 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

☎ Phone: (760) 871-0606

Fax: (858) 634-6918

📞 After Hours Phone: (760)
871-0606

🌐 Website: N

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: SU 8:00AM-0:00PM

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

SA 8:00AM-0:00PM

FQHC

CENTRO MEDICO ESCONDIDO,

Provider ID: 419344

NPI: 1023349883

☐ Provider English Spoken: Y
Cultural Competency: N

📍 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

☎ Phone: (760) 871-0606

Fax: (858) 634-6918

📞 After Hours Phone: (760)
871-0606

🌐 Website: N

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: SU 8:00AM-0:00PM

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

SA 8:00AM-0:00PM

FQHC

**ESCONDIDO FAMILY HEALTH
CENTER,**

Provider ID: 652372

NPI: 1417640491

☐ Provider English Spoken: Y
Cultural Competency: N

📍 128 N BROADWAY
ESCONDIDO, CA 92025

☎ Phone: (619) 515-2474

📞 After Hours Phone: (619)
515-2474

🌐 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FQHC

**ESCONDIDO FAMILY HEALTH
CENTER,**

Provider ID: 652372

NPI: 1417640491

☐ Provider English Spoken: Y
Cultural Competency: N

📍 128 N BROADWAY
ESCONDIDO, CA 92025

☎ Phone: (619) 515-2474

📞 After Hours Phone: (619)
515-2474

🌐 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FQHC

NEIGHBORHOOD

HEALTHCARE ESCONDIDO,

Provider ID: 206270

NPI: 1598703647

☐ Provider English Spoken: Y
Cultural Competency: N

📍 460 N ELM ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100

Fax: (360) 466-2745

📞 After Hours Phone: (760)
520-8100

🌐 Website: www.ihpsocal.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

SA 8:00AM-0:00PM

FQHC

NEIGHBORHOOD

HEALTHCARE ESCONDIDO,

Provider ID: 206270







NPI: 1598703647

☐ Provider English Spoken: Y
Cultural Competency: N






📍 460 N ELM ST

ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 Fax: (360) 466-2745
 After Hours Phone: (760) 520-8100
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-0:00PM

FQHC
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL,

Provider ID: 424775
 NPI: 1437335353
 Provider English Spoken: Y
 Cultural Competency: N
 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: Y
 Min/Max Age: 0\21
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM







FQHC
NEIGHBORHOOD
HEALTHCARE PEDIATRICS

AND PRENATAL,
 Provider ID: 424775
 NPI: 1437335353
 Provider English Spoken: Y
 Cultural Competency: N
 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: Y
 Min/Max Age: 0\21
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

FQHC
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL,

Provider ID: 206266
 NPI: 1265618185
 Provider English Spoken: Y
 Cultural Competency: N
 425 N DATE ST
 ESCONDIDO, CA 92025
 Phone: (760) 520-8340
 Fax: (360) 462-2752
 After Hours Phone: (760) 520-8340
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\21
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

FQHC
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL,

Provider ID: 206266
 NPI: 1265618185
 Provider English Spoken: Y
 Cultural Competency: N
 425 N DATE ST
 ESCONDIDO, CA 92025
 Phone: (760) 520-8340
 Fax: (360) 462-2752
 After Hours Phone: (760) 520-8340
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\21
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

FQHC
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY,

Provider ID: 206271
 NPI: 1720264641
 Provider English Spoken: Y
 Cultural Competency: N
 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: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
N

☎ Accessibility: CONTACT PROVIDER

Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD

HEALTHCARE VALLEY PARKWAY,

Provider ID: 206271

NPI: 1720264641

☐ Provider English Spoken: Y
Cultural Competency: N

📍 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

☎ Accessibility: CONTACT PROVIDER

Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH

ESCONDIDO FAMILY MEDICINE,

Provider ID: 588941

NPI: 1801438239

☐ Provider English Spoken: Y
Cultural Competency: N

📍 704 E GRAND AVE
ESCONDIDO, CA 92025

☎ Phone: (619) 662-4100
Fax: (619) 662-7952

📞 After Hours Phone: (619) 662-4100

🌐 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\120

American Sign Language (ASL):
N

☎ Accessibility: CONTACT PROVIDER

FQHC

SAN YSIDRO HEALTH

ESCONDIDO FAMILY MEDICINE,

Provider ID: 588941

NPI: 1801438239

☐ Provider English Spoken: Y
Cultural Competency: N

📍 704 E GRAND AVE
ESCONDIDO, CA 92025

☎ Phone: (619) 662-4100
Fax: (619) 662-7952

📞 After Hours Phone: (619) 662-4100

🌐 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\120

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

📍 128 N BROADWAY
ESCONDIDO, CA 92025

☎ Phone: (760) 546-2858

📞 After Hours Phone: (760) 546-2858

🌐 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

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

📍 128 N BROADWAY
ESCONDIDO, CA 92025

☎ Phone: (760) 546-2858

📞 After Hours Phone: (760) 546-2858

🌐 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

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

704 E GRAND AVE

ESCONDIDO, CA 92025

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\120

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

704 E GRAND AVE

ESCONDIDO, CA 92025

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\120

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CHEN, MARGARET

Provider ID: 206270

Provider Gender: Female

License Number: A61751

NPI: 1659305084

Provider English Spoken: Y

Provider Language(s)
Spoken: Greek, Spanish

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

SA 8:00AM-0:00PM

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

SA 8:00AM-0:00PM

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

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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-0:00PM


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

 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: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-0:00PM


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
 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: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-0:00PM


PEDIATRICS

AGUILAR, EDITA

Provider ID: 206266
 Provider Gender: Female
 License Number: A56054
 NPI: 1467407411

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N



Board Certified Specialty: No
 425 N DATE ST
 ESCONDIDO, CA 92025
 Phone: (760) 520-8340
 After Hours Phone: (760) 520-8340
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\21


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

PEDIATRICS

AGUILAR, EDITA

Provider ID: 424775
 Provider Gender: Female
 License Number: A56054
 NPI: 1467407411
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No

 426 N DATE ST
 ESCONDIDO, CA 92025
 Phone: (760) 690-5900
 After Hours Phone: (760) 690-5900
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\21

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

PEDIATRICS

AGUILAR, EDITA

Provider ID: 206266
 Provider Gender: Female
 License Number: A56054
 NPI: 1467407411

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N

Board Certified Specialty: No
 425 N DATE ST
 ESCONDIDO, CA 92025
 Phone: (760) 520-8340
 After Hours Phone: (760) 520-8340
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\21

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*




PEDIATRICS


AGUILAR, EDITA

*Provider ID: 424775
 Provider Gender: Female
 License Number: A56054
 NPI: 1467407411*

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

*Cultural Competency: N
 Board Certified Specialty: No*

 426 N DATE ST
 ESCONDIDO, CA 92025
 *Phone: (760) 690-5900*
 *After Hours Phone: (760) 690-5900*

 *Website: N/A*
*Medi-Cal Open Panel: Y
 Min/Max Age: 0\21*

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

PEDIATRICS


ALDANA, NANCY


*Provider ID: 424775
 Provider Gender: Female
 License Number: A62467
 NPI: 1558371963*

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


*Cultural Competency: N
 Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN*

*DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
 Board Certified Specialty: No*

 426 N DATE ST
 ESCONDIDO, CA 92025
 *Phone: (760) 520-8340*
 *After Hours Phone: (760) 520-8340*

 *Website: N/A*
*Medi-Cal Open Panel: Y
 Min/Max Age: 0\21*

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM




PEDIATRICS


ALDANA, NANCY

*Provider ID: 424775
 Provider Gender: Female
 License Number: A62467
 NPI: 1558371963*


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

*Cultural Competency: N
 Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
 Board Certified Specialty: No*

 426 N DATE ST
 ESCONDIDO, CA 92025
 *Phone: (760) 520-8340*
 *After Hours Phone: (760) 520-8340*

 *Website: N/A*
*Medi-Cal Open Panel: Y
 Min/Max Age: 0\21*

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ALDANA, NANCY


*Provider ID: 473159
 Provider Gender: Female
 NPI: 1558371963*


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

*Cultural Competency: N
 Hospital Affiliation: TRI CITY MEDICAL CTR, RADY*

*CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
 Board Certified Specialty: No*

 426 N DATE ST
 ESCONDIDO, CA 92025
 *Phone: (760) 520-8340*
Fax: (360) 462-2752
 *After Hours Phone: (760) 520-8340*







 *Website: N/A*
*Medi-Cal Open Panel: Y
 Min/Max Age: 0\18
 American Sign Language (ASL):*

N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PEDIATRICS






CHOW, BYRON

*Provider ID: 206270
 Provider Gender: Male
 License Number: A78116
 NPI: 1619907607*

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

CHOW, BYRON



Provider ID: 206270
Provider Gender: Male
License Number: A78116
NPI: 1619907607
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\150



American Sign Language (ASL): N
NPI: 1750579108



 *Accessibility: CONTACT PROVIDER*


PEDIATRICS

COHEN, CARA

Provider ID: 661879
Provider Gender: Female
NPI: 1215021274
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Board Certified Specialty: No

 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: Y
Min/Max Age: 0\19
American Sign Language (ASL): N






 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

COULLAHAN, JESSICA




Provider ID: 661887
Provider Gender: Female





 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Board Certified Specialty: No

 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: Y
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM SA 8:30AM-0:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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
 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: Y
 Min/Max Age: 0\150
 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
 426 N DATE ST
 ESCONDIDO, CA 92025
 Phone: (833) 867-4642
 Fax: (360) 462-2752
 After Hours Phone: (833) 867-4642
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\18
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS








DOSHI, NEELIMA

Provider ID: 424775
 Provider Gender: Female
 License Number: A67626
 NPI: 1417921578
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hindi, Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Board Certified Specialty: No
 426 N DATE ST
 ESCONDIDO, CA 92025
 Phone: (760) 690-5900
 After Hours Phone: (760) 690-5900

 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\21
 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
 426 N DATE ST
 ESCONDIDO, CA 92025
 Phone: (760) 690-5900
 After Hours Phone: (760) 690-5900
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\21
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS



IBRAHIM, MAGED





Provider ID: 419344
 Provider Gender: Male
 License Number: C141296
 NPI: 1306852934

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic
 Cultural Competency: N
 Hospital Affiliation: POMONA
 VALLEY HOSP MED CTR, SAN
 ANTONIO COMM HOSP
 Board Certified Specialty: No
 1121 E WASHINGTON AVE
 ESCONDIDO, CA 92025
 Phone: (760) 871-0606
 After Hours Phone: (760)
 871-0606
 Website: N
 Email:
 iselaochoa@borregohealth.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: SU 8:00AM-0:00PM
 M-F 8:00AM-8:00PM
 SA 8:00AM-0:00PM

PEDIATRICS

IBRAHIM, MAGED


Provider ID: 419344
 Provider Gender: Male
 License Number: C141296
 NPI: 1306852934
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic
 Cultural Competency: N
 Hospital Affiliation: POMONA
 VALLEY HOSP MED CTR, SAN
 ANTONIO COMM HOSP
 Board Certified Specialty: No
 1121 E WASHINGTON AVE

ESCONDIDO, CA 92025
 Phone: (760) 871-0606
 After Hours Phone: (760)
 871-0606
 Website: N
 Email:
 iselaochoa@borregohealth.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: SU 8:00AM-0:00PM
 M-F 8:00AM-8:00PM
 SA 8:00AM-0:00PM

PEDIATRICS



MALEKSHAMRAN, KEYVAN

Provider ID: 419344
 Provider Gender: Male
 License Number: A94845
 NPI: 1952466112
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Persian,
 Spanish
 Cultural Competency: N
 Hospital Affiliation: PIONEERS
 MEMORIAL HOSPITAL,
 DESERT REGIONAL MED CTR
 Board Certified Specialty: No
 1121 E WASHINGTON AVE
 ESCONDIDO, CA 92025
 Phone: (760) 871-0606
 After Hours Phone: (760)
 871-0606
 Website: N
 Email:
 iselaochoa@borregohealth.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999


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

PEDIATRICS

MALEKSHAMRAN, KEYVAN


Provider ID: 419344
 Provider Gender: Male
 License Number: A94845
 NPI: 1952466112
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Persian,
 Spanish

Cultural Competency: N
 Hospital Affiliation: PIONEERS
 MEMORIAL HOSPITAL,
 DESERT REGIONAL MED CTR
 Board Certified Specialty: No
 1121 E WASHINGTON AVE
 ESCONDIDO, CA 92025
 Phone: (760) 871-0606
 After Hours Phone: (760)
 871-0606
 Website: N
 Email:

iselaochoa@borregohealth.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PEDIATRICS

RODRIGUEZ, REBECCA

Provider ID: 646488
 Provider Gender: Female
 NPI: 1801329990
 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

625 CITRACADO PKWY STE 200

ESCONDIDO, CA 92025

Phone: (760) 746-2641

Fax: (760) 740-2178

After Hours Phone: (760) 746-2641

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

SA 8:00AM-0:00PM

PEDIATRICS

RODRIGUEZ, REBECCA

Provider ID: 661919

Provider Gender: Female

NPI: 1801329990

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

PEDIATRICS

SONG, JOYCE

Provider ID: 661892

Provider Gender: Female

NPI: 1417510694

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

PEDIATRICS

STERNFELD, SHARON

Provider ID: 56437

Provider Gender: Female

NPI: 1184695108

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

HEALTH, RADY CHILDRENS

HOSPITAL SAN DIEGO,

PALOMAR MEDICAL CENTER

Board Certified Specialty: No

625 CITRACADO PKWY STE 200

ESCONDIDO, CA 92025

Phone: (760) 746-2641

Fax: (760) 740-2178

After Hours Phone: (760) 746-2641

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

SA 8:00AM-0:00PM

PEDIATRICS

STERNFELD, SHARON

Provider ID: 661929

Provider Gender: Female

NPI: 1184695108

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

HEALTH, RADY CHILDRENS

HOSPITAL SAN DIEGO,

PALOMAR MEDICAL CENTER

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT

PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

STRAZICICH, KARLA

Provider ID: 206270

Provider Gender: Female

License Number: A45413

NPI: 1134154958

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

PEDIATRICS

STRAZICICH, KARLA

Provider ID: 206270

Provider Gender: Female

License Number: A45413

NPI: 1134154958

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

PEDIATRICS

TELLECHEA-SANCHEZ,

SELMIRA

Provider ID: 424775

Provider Gender: Female

License Number: G83438

NPI: 1730288747

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

📍 426 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 690-5900

🕒 After Hours Phone: (760)
690-5900

🌐 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\21

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

PEDIATRICS

TELLECHEA-SANCHEZ,

SELMIRA

Provider ID: 424775

Provider Gender: Female

License Number: G83438

NPI: 1730288747

☐ Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

📍 426 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 690-5900

🕒 After Hours Phone: (760)
690-5900

🌐 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\21

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

PEDIATRICS

THIRUNAGARI, HARRSHA

Provider ID: 419344

Provider Gender: Female

License Number: A64928

NPI: 1447472212

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Hindi, Spanish,
Telugu

Cultural Competency: N

Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,

RIVERSIDE COMMUNITY

HOSP, Parkview Community

Hospital Medical Center

Board Certified Specialty: No

📍 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

☎ Phone: (760) 871-0606

🕒 After Hours Phone: (760)
871-0606

🌐 Website: N


Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Y








Min/Max Age: 0\999

American Sign Language (ASL): SA 8:00AM-0:00PM
N

 Accessibility: CONTACT PROVIDER
Hours: SU 8:00AM-0:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-0:00PM







PEDIATRICS

THIRUNAGARI, HARRSHA

Provider ID: 419344
Provider Gender: Female
License Number: A64928
NPI: 1447472212
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Spanish, Telugu
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, RIVERSIDE COMMUNITY HOSP, Parkview Community Hospital Medical Center
Board Certified Specialty: No
 1121 E WASHINGTON AVE ESCONDIDO, CA 92025
 Phone: (760) 871-0606
 After Hours Phone: (760) 871-0606
 Website: N
Email: iselaochoa@borregohealth.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: SU 8:00AM-0:00PM
M-F 8:00AM-8:00PM



PEDIATRICS

TYGART, MELISSA

Provider ID: 661907
Provider Gender: Female
NPI: 1336602507
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS





ZANDKARIMI, 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
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM



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
 704 E GRAND AVE ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: N/A
Medi-Cal Open Panel: Y
Min/Max Age: 0\120
American Sign Language (ASL): N
 Accessibility: CONTACT

PROVIDER

N

 Phone: (760) 737-6900
 After Hours Phone: (760) 737-6900

 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 728 E VALLEY PKWY ESCONDIDO, CA 92025

 Phone: (760) 737-6900

 After Hours Phone: (760) 737-6900


 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

 704 E GRAND AVE ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\120

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

 704 E GRAND AVE ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\120

American Sign Language (ASL):

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

 704 E GRAND AVE ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\120

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

 728 E VALLEY PKWY ESCONDIDO, CA 92025

FALLBROOK


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

 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: Y
 Min/Max Age: 0\999
 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

 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: Y
 Min/Max Age: 0\999
 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

 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: Y
 Min/Max Age: 0\999
 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

 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: Y
 Min/Max Age: 0\999
 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

 321 E ALVARADO ST
 FALLBROOK, CA 92028
 Phone: (760) 723-6200

☎ After Hours Phone: (760) 723-6200
 🌐 Website: www.vistacommu-nityclinic.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 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
 📍 321 E ALVARADO ST FALLBROOK, CA 92028
 ☎ Phone: (760) 723-6200
 ☎ After Hours Phone: (760) 723-6200
 🌐 Website: www.vistacommu-nityclinic.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 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
 Cultural Competency: N
 Board Certified Specialty: No
 📍 321 E ALVARADO ST FALLBROOK, CA 92028
 ☎ Phone: (760) 723-6200
 ☎ After Hours Phone: (760) 723-6200

🌐 Website: www.vistacommu-nityclinic.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 Hours: M 8:00AM-4:00PM
 TU 8:00AM-0:30PM
 W-TH 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

RACKHAM, KELLY

Provider ID: 624122
 Provider Gender: Male
 License Number: NP95015717
 NPI: 1801497284
 ☐ Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 📍 321 E ALVARADO ST FALLBROOK, CA 92028
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PRACTITIONER

RACKHAM, KELLY

Provider ID: 624122
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 Cultural Competency: N
 Board Certified Specialty: No
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 Provider Gender: Male


License Number: NP95015717


NPI: 1801497284

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 321 E ALVARADO ST
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Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
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Hours: M 8:00AM-4:00PM

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W-TH 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

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Provider ID: 624122

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Cultural Competency: N

Board Certified Specialty: No

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TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

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PRACTITIONER

RACKHAM, KELLY

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Board Certified Specialty: No

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Min/Max Age: 0\999

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 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

FAMILY PRACTICE


ZAMPELLO, LISA

Provider ID: 624122

Provider Gender: Female


License Number: A145924


NPI: 1477933026


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommu
nityclinic.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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ZAMPELLO, LISA

Provider ID: 624122

Provider Gender: Female


License Number: A145924


NPI: 1477933026


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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nityclinic.org

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Min/Max Age: 0\999

American Sign Language (ASL):

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PROVIDER

FAMILY PRACTICE

ZAMPELLO, LISA

Provider ID: 624122

Provider Gender: Female

License Number: A145924

NPI: 1477933026

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

📍 321 E ALVARADO ST
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♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

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Provider Gender: Female

License Number: A145924

NPI: 1477933026

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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FAMILY PRACTICE

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Provider Gender: Female

License Number: A145924

NPI: 1477933026

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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PROVIDER

FAMILY PRACTICE

ZAMPELLO, LISA

Provider ID: 624122

Provider Gender: Female

License Number: A145924

NPI: 1477933026

☐ Provider English Spoken: Y
Cultural Competency: N

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🕒 After Hours Phone: (760)
723-6200

🌐 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FQHC

**FALLBROOK FAMILY HLTH
CTR,**

Provider ID: 183910

NPI: 1982756086

☐ Provider English Spoken: Y
Cultural Competency: N

📍 1328 S MISSION RD
FALLBROOK, CA 92028

☎ Phone: (760) 451-4720

Fax: (760) 451-4700

🕒 After Hours Phone: (760)
451-4720

🌐 Website: N/A

Email: a.escobeclo@chsica.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

SA 8:00AM-5:00PM

FQHC

**FALLBROOK FAMILY HLTH
CTR,**

Provider ID: 183910

NPI: 1982756086

☐ Provider English Spoken: Y
Cultural Competency: N

📍 1328 S MISSION RD
FALLBROOK, CA 92028

☎ Phone: (760) 451-4720

Fax: (760) 451-4700

🕒 After Hours Phone: (760)

451-4720
 Website: N/A
 Email: a.escobedo@chsica.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-5:00PM


FQHC


VISTA COMMUNITY CLINIC,


Provider ID: 624122

NPI: 1316501562

 Provider English Spoken: Y
 Cultural Competency: N

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

FQHC


VISTA COMMUNITY CLINIC,


Provider ID: 624122

NPI: 1649662719

 Provider English Spoken: Y
 Cultural Competency: N

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM


FQHC


VISTA COMMUNITY CLINIC,


Provider ID: 624122

NPI: 1316501562

 Provider English Spoken: Y
 Cultural Competency: N

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM


FQHC


VISTA COMMUNITY CLINIC,


Provider ID: 624122

NPI: 1851300123

 Provider English Spoken: Y
 Cultural Competency: N

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM


FQHC


VISTA COMMUNITY CLINIC,


Provider ID: 624122

NPI: 1851300123

 Provider English Spoken: Y
 Cultural Competency: N

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 624122

NPI: 1649662719

☐ Provider English Spoken: Y
Cultural Competency: N

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

PEDIATRICS

DEL RE, AMANDA

Provider ID: 238960

Provider Gender: Female

NPI: 1548499957

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

PEDIATRICS

PAIK, JULIANA

Provider ID: 504522

Provider Gender: Female

NPI: 1528167087

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

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

📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-4:00PM

PEDIATRICS

VU, WENDY

Provider ID: 183910

Provider Gender: Female

License Number: A169529

NPI: 1508148370

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

📍 1328 S MISSION RD
FALLBROOK, CA 92028

☎ Phone: (760) 451-4770

📞 After Hours Phone: (760)
451-4770

🌐 Website: N/A

Email: a.escobeclo@chsica.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER
Hours: M-F 8:00AM-7:30PM
SA 8:00AM-5:00PM

PEDIATRICS

VU, WENDY

Provider ID: 183910
Provider Gender: Female
License Number: A169529
NPI: 1508148370
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 1328 S MISSION RD
FALLBROOK, CA 92028
☎ Phone: (760) 451-4770
🕒 After Hours Phone: (760) 451-4770
🌐 Website: N/A
Email: a.escobedo@chsica.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-7:30PM
SA 8:00AM-5:00PM

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
📍 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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-9:00PM
F 8:30AM-5:00PM
SA 8:30AM-2:00PM

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
📍 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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-9:00PM
F 8:30AM-5:00PM
SA 8:30AM-2:00PM

FQHC

IMPERIAL BEACH HEALTH CENTER,

Provider ID: 179678
NPI: 1790718351
☐ Provider English Spoken: Y
Cultural Competency: N
📍 949 PALM AVE
IMPERIAL BEACH, CA 91932
☎ Phone: (619) 429-3733
Fax: (619) 628-5550
🕒 After Hours Phone: (619) 429-3733
🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

IMPERIAL BEACH HEALTH CENTER,

Provider ID: 179678
NPI: 1790718351
☐ Provider English Spoken: Y
Cultural Competency: N
📍 949 PALM AVE

IMPERIAL BEACH, CA 91932 NPI: 1780609990
 Phone: (619) 429-3733
 Fax: (619) 628-5550
 After Hours Phone: (619) 429-3733
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 949 PALM AVE
 IMPERIAL BEACH, CA 91932
 Phone: (619) 429-3733
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 Website: www.ihpsocal.org
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 License Number: A66830

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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

DOKICH, SRETENKA

Provider ID: 179678
 Provider Gender: Female
 License Number: A51447
 NPI: 1154409035
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Board Certified Specialty: No
 949 PALM AVE
 IMPERIAL BEACH, CA 91932
 Phone: (619) 429-3733
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 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

LA JOLLA

PEDIATRICS


GAINOR, GRETCHEN

Provider ID: 537752
 Provider Gender: Female
 NPI: 1174504757
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-0:00PM

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
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N


 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM


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
 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: Y
 Min/Max Age: 0\19



American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM


PEDIATRICS

PASTORE, SIMONE


Provider ID: 600881
 Provider Gender: Female
 NPI: 1528588134


 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 📍 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

PEDIATRICS

SHAH, MEERA

Provider ID: 145167
 Provider Gender: Female
 NPI: 1720300239
 □ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, SCRIPPS MEMORIAL
 HOSPITAL, SCRIPPS MERCY
 HOSPITAL CHULA VISTA,
 SHARP CHULA VISTA MED CTR
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

PEDIATRICS

TUNG, VIVIAN

Provider ID: 11291
 Provider Gender: Female
 NPI: 1285665133
 □ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, SCRIPPS MEMORIAL
 HOSPITAL
 Board Certified Specialty: No

📍 7300 GIRARD AVE STE 106
 LA JOLLA, CA 92037
 📞 Phone: (858) 459-4351
 Fax: (858) 459-4399
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 🌐 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

LA MESA

**CERTIFIED NURSE
 PRACTITIONER**




WARD, KATHERINE

Provider ID: 480827
 Provider Gender: Female
 License Number: NP95017921
 NPI: 1477223576
 □ Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 📍 8881 FLETCHER PKWY STE
 200
 LA MESA, CA 91942
 📞 Phone: (616) 464-6434
 ⌚ After Hours Phone: (616)
 464-6434
 🌐 Website: N/A
 Email:
 iselaochoa@borregohealth.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\21
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER

**CERTIFIED NURSE
 PRACTITIONER**

WARD, KATHERINE

Provider ID: 480827
 Provider Gender: Female
 License Number: NP95017921
 NPI: 1477223576
 □ Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 📍 8881 FLETCHER PKWY STE
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 iselaochoa@borregohealth.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\21
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

FQHC

LA MESA PEDIATRICS,


Provider ID: 480827

NPI: 1033759311

 Provider English Spoken: Y
 Cultural Competency: N

 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

Email:


iselaochoa@borregohealth.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\21

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FQHC

LA MESA PEDIATRICS,


Provider ID: 480827

NPI: 1033759311

 Provider English Spoken: Y
 Cultural Competency: N

 8881 FLETCHER PKWY STE 200

LA MESA, CA 91942

 Phone: (619) 464-6434

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 After Hours Phone: (619) 464-6434

 Website: N/A

Email:

iselaochoa@borregohealth.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\21

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


BULLOCH, EDGAR

Provider ID: 480827

Provider Gender: Male

License Number: A113241

NPI: 1508046376

 Provider English Spoken: Y

 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL,


Sharp Grossmont Hospital

Board Certified Specialty: No

 8881 FLETCHER PKWY STE 200

LA MESA, CA 91942

 Phone: (619) 464-6434

 After Hours Phone: (619) 464-6434

 Website: N/A

Email:

iselaochoa@borregohealth.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\21

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BULLOCH, EDGAR

Provider ID: 480827

Provider Gender: Male

License Number: A113241

NPI: 1508046376

 Provider English Spoken: Y

 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL,


Sharp Grossmont Hospital

Board Certified Specialty: No

 8881 FLETCHER PKWY STE 200

LA MESA, CA 91942

 Phone: (619) 464-6434

 After Hours Phone: (619) 464-6434

 Website: N/A

Email:


iselaochoa@borregohealth.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\21

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY






PAPA, RHETT

Provider ID: 480827

Provider Gender: Male

License Number: 20A11733


NPI: 1063642312

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
 8881 FLETCHER PKWY STE
 200
 LA MESA, CA 91942
 *Phone: (619) 464-6434*
 *After Hours Phone: (619)*
 464-6434
 *Website: N/A*
Email:
iselaocha@borregohealth.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\21
American Sign Language (ASL):
 N
 *Accessibility: CONTACT*
 PROVIDER

OBSTETRICS / GYNECOLOGY





PAPA, RHETT




Provider ID: 480827
Provider Gender: Male
License Number: 20A11733
NPI: 1063642312
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
 8881 FLETCHER PKWY STE
 200
 LA MESA, CA 91942
 *Phone: (619) 464-6434*
 *After Hours Phone: (619)*
 464-6434
 *Website: N/A*
Email:
iselaocha@borregohealth.org
Medi-Cal Open Panel: Y

Min/Max Age: 0\21
American Sign Language (ASL):
 N
 *Accessibility: CONTACT*
 PROVIDER

PEDIATRICS



ALSHEIKH, HUDA






Provider ID: 451191
Provider Gender: Female
NPI: 1487746855
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
 N
 *Accessibility: CONTACT*
 PROVIDER
Hours: M-TU 7:30AM-6:00PM
W-F 7:30AM-6:30PM
SA 8:30AM-5:00PM

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: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
 N
 *Accessibility: CONTACT*
 PROVIDER
Hours: M-TU 7:30AM-6:00PM
W-F 7:30AM-6:30PM
SA 8:30AM-5:00PM

PEDIATRICS

ALSHEIKH, HUDA





Provider ID: 480827
Provider Gender: Female
License Number: C133872
NPI: 1487746855
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
 8881 FLETCHER PKWY STE
 200
 LA MESA, CA 91942
 *Phone: (619) 464-6434*
 *After Hours Phone: (619)*
 464-6434
 *Website: N/A*
Email:
iselaocha@borregohealth.org
Medi-Cal Open Panel: Y


Min/Max Age: 0\21
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

ALSHEIKH, HUDA

Provider ID: 480827
 Provider Gender: Female
 License Number: C133872
 NPI: 1487746855
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic
 Cultural Competency: N
 Board Certified Specialty: No

 8881 FLETCHER PKWY STE 200
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 Phone: (619) 464-6434
 After Hours Phone: (619) 464-6434
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Email:
 iselaochoa@borregohealth.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\21
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER





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


 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: Y
 Min/Max Age: 0\19


American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-6:00PM
 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





 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):


N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-6:00PM
 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

 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: Y
 Min/Max Age: 0\19

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-6:00PM
 SA 11:30AM-3:30PM

PEDIATRICS

GIANFORTUNE, RACHEL

Provider ID: 433091
 Provider Gender: Female
 NPI: 1912193301
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

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

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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

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

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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

MOFFATT, KYRRA

Provider ID: 275099

Provider Gender: Female

NPI: 1194922419

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

PEDIATRICS

MOLINOS, NICOLE

Provider ID: 538098

Provider Gender: Female





NPI: 1538685524

Provider English Spoken: Y Cultural Competency: N

Board Certified Specialty: No

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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM

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
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):



N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM


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

 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-6:00PM
 SA 11:30AM-3:30PM


PEDIATRICS


WARD, KATHERINE


Provider ID: 613881


Provider Gender: Female
 NPI: 1477223576
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-6:00PM
 SA 11:30AM-3:30PM

PEDIATRICS


WARD, KATHERINE


Provider ID: 613887
 Provider Gender: Female
 NPI: 1477223576
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N


 **Accessibility:** CONTACT PROVIDER
Hours: M-F 8:00AM-6:00PM
 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

 10039 VINE ST
 LAKESIDE, CA 92040

 **Phone:** (858) 218-3000
 **After Hours Phone:** (858) 218-3000

 **Website:** www.ihpsocal.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150


American Sign Language (ASL): N

 **Accessibility:** CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM




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

 10039 VINE ST
 LAKESIDE, CA 92040

 **Phone:** (858) 218-3000
 **After Hours Phone:** (858) 218-3000
 **Website:** www.ihpsocal.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150


American Sign Language (ASL): N

 **Accessibility:** CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM



FAMILY PRACTICE


FERRAILOLO, NATALIE

Provider ID: 353843
Provider Gender: Female
License Number: A152372
NPI: 1306290143


 **Provider English Spoken:** Y
Cultural Competency: N
Board Certified Specialty: No

 10039 VINE ST
 LAKESIDE, CA 92040

 **Phone:** (858) 218-3000
 **After Hours Phone:** (858) 218-3000

 **Website:** www.ihpsocal.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150


American Sign Language (ASL): N

 **Accessibility:** CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM



FAMILY PRACTICE


FERRAILOLO, NATALIE

Provider ID: 353843
Provider Gender: Female
License Number: A152372
NPI: 1306290143


 **Provider English Spoken:** Y
Cultural Competency: N
Board Certified Specialty: No

 10039 VINE ST
 LAKESIDE, CA 92040

 **Phone:** (858) 218-3000
 **After Hours Phone:** (858) 218-3000

 **Website:** www.ihpsocal.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL): N

 **Accessibility:** CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC


NEIGHBORHOOD

HEALTHCARE LAKESIDE,


Provider ID: 353843
NPI: 1932384120

 **Provider English Spoken:** Y
Cultural Competency: N


 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: Y
Min/Max Age: 0\150

American Sign Language (ASL): N

 **Accessibility:** CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC


NEIGHBORHOOD


HEALTHCARE LAKESIDE,

Provider ID: 353843

NPI: 1932384120

 Provider English Spoken: Y
Cultural Competency: N

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

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

 10039 VINE ST
LAKESIDE, CA 92040

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

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

 10039 VINE ST
LAKESIDE, CA 92040

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

PREVENTATIVE MEDICINE

GENERAL


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

 10039 VINE ST
LAKESIDE, CA 92040

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

PREVENTATIVE MEDICINE

GENERAL

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

 10039 VINE ST
LAKESIDE, CA 92040

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

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

7592 BROADWAY
 LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
 515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

Hours: M-F 9:00AM-5:00PM

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

7592 BROADWAY
 LEMON GROVE, CA 91945

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After Hours Phone: (619)
 515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Hours: M-F 9:00AM-5:00PM

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

7592 BROADWAY
 LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
 515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

Hours: M-F 9:00AM-5:00PM

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

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After Hours Phone: (619)
 515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

Hours: M-F 9:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

SMITH, SHARON

Provider ID: 419139
 Provider Gender: Female
 License Number: RN428876
 NPI: 1780603597

Provider English Spoken: Y

Provider Language(s)
 Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

7592 BROADWAY
 LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
 515-2550


Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER



CERTIFIED NURSE


PRACTITIONER

SMITH, SHARON

Provider ID: 419139
 Provider Gender: Female
 License Number: NP15444
 NPI: 1780603597
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N

Board Certified Specialty: No

 7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550

 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER




CERTIFIED NURSE


PRACTITIONER

SMITH, SHARON

Provider ID: 419139
 Provider Gender: Female
 License Number: NP15444
 NPI: 1780603597
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N

Board Certified Specialty: No

 7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550

 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER



CERTIFIED NURSE


PRACTITIONER

SMITH, SHARON


Provider ID: 419139
 Provider Gender: Female
 License Number: RN428876
 NPI: 1780603597
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N

Board Certified Specialty: No

 7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550

 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

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

 7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550

 Website: N/A
 Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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


 7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550

 Website: N/A
 Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550


 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550


 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


DORN, TIA

Provider ID: 419139

Provider Gender: Female

License Number: C172318


NPI: 1285074740


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550


 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

FAMILY PRACTICE

DORN, TIA

Provider ID: 419139

Provider Gender: Female


License Number: C172318


NPI: 1285074740


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

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

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

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

7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A

Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

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

7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 Fax: (619) 825-9577

After Hours Phone: (619) 515-2550

Website: N/A
 Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

FQHC

LEMON GROVE FAMILY

HEALTH CENTER,

Provider ID: 419139

NPI: 1427282466

Provider English Spoken: Y
 Cultural Competency: N

7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 Fax: (619) 825-9577

After Hours Phone: (619) 515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

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

7592 BROADWAY
 LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619) 515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER

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

7592 BROADWAY
 LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619) 515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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
 7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM

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
 7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM
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
 7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 7592 BROADWAY

Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL
 Board Certified Specialty: No
 7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 7592 BROADWAY

LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

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
 7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM
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
 7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


CERVANTES, SANDRA

Provider ID: 419139
 Provider Gender: Female
 License Number: A118095
 NPI: 1073701041
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SHARP
 CORONADO HOSP AND
 HEALTHCARE CTR,
 GROSSMONT HOSPITAL
 Board Certified Specialty: No
 7592 BROADWAY
 LEMON GROVE, CA 91945

 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER






OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA

Provider ID: 419139
 Provider Gender: Female
 License Number: A118095
 NPI: 1073701041
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL
 Board Certified Specialty: No
 7592 BROADWAY LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY






CHAKRABARTI, PRIYA

Provider ID: 419139
 Provider Gender: Female
 License Number: A163464
 NPI: 1326531401
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
 Board Certified Specialty: No
 7592 BROADWAY LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY






CHAKRABARTI, PRIYA

Provider ID: 419139
 Provider Gender: Female
 License Number: A163464
 NPI: 1326531401
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp

Grossmont Hospital
 Board Certified Specialty: No
 7592 BROADWAY LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM

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
 7592 BROADWAY LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

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
 7592 BROADWAY
 LEMON GROVE, CA 91945
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 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A
 Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

FOLCH TORRES-AGUIAR, BEATRIZ
 Provider ID: 419139
 Provider Gender: Female
 License Number: A148014

NPI: 1457794752
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Yue Chinese
 Cultural Competency: N
 Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA
 Board Certified Specialty: No
 7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

FOLCH TORRES-AGUIAR, BEATRIZ
 Provider ID: 419139
 Provider Gender: Female
 License Number: A148014
 NPI: 1457794752
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Yue Chinese
 Cultural Competency: N
 Hospital Affiliation: GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 419139

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 419139

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

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

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

7592 BROADWAY

LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 7592 BROADWAY LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 7592 BROADWAY LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY





MELENDEZ BERRIOS, IARA DEL

Provider ID: 419139
 Provider Gender: Female
 License Number: A114181
 NPI: 1740514249
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
 Board Certified Specialty: No
 7592 BROADWAY LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

MELENDEZ BERRIOS, IARA DEL

Provider ID: 419139
 Provider Gender: Female
 License Number: A114181
 NPI: 1740514249
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
 Board Certified Specialty: No
 7592 BROADWAY LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 419139
 Provider Gender: Male
 License Number: A154298
 NPI: 1710316450

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

Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL

Board Certified Specialty: No

7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500

Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL): N

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

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 419139
 Provider Gender: Male

License Number: A154298
 NPI: 1710316450
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL

Board Certified Specialty: No

7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500

Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL): N

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

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

7592 BROADWAY

LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

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

7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550

Website: N/A
 Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

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

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550


 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

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

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)

515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

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

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

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

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 419139

Provider Gender: Male


License Number: G78814


NPI: 1699790634

Provider English Spoken: Y

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

Board Certified Specialty: No

 7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2500
 After Hours Phone: (619)
 515-2500

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

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

OBSTETRICS / GYNECOLOGY


ZIEG, ALAN

Provider ID: 419139

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 Provider English Spoken: Y


Cultural Competency: N


Hospital Affiliation:


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

Board Certified Specialty: No

 7592 BROADWAY
 LEMON GROVE, CA 91945

 Phone: (619) 515-2500

 After Hours Phone: (619)
 515-2500

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

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

PEDIATRICS


JACKSON, DANA


Provider ID: 419139

Provider Gender: Female

License Number: 20A14119

NPI: 1689060063

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Portuguese,
 Spanish


Cultural Competency: N


Hospital Affiliation:


MARINHEALTH AND
 MARINHEALTH MEDICAL
 CENTER, SCRIPPS MERCY
 HOSPITAL

Board Certified Specialty: No

 7592 BROADWAY
 LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
 515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

PEDIATRICS


JACKSON, DANA

Provider ID: 419139

Provider Gender: Female

License Number: 20A14119

NPI: 1689060063

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Portuguese,
 Spanish


Cultural Competency: N


Hospital Affiliation:

MARINHEALTH AND
 MARINHEALTH MEDICAL
 CENTER, SCRIPPS MERCY
 HOSPITAL

Board Certified Specialty: No

 7592 BROADWAY
 LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
 515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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
 7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619)
 515-2550
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619)
 515-2550
 Website: N/A

Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619)
 515-2550
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 7592 BROADWAY

LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619)
 515-2550
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PHYSICIANS ASSISTANT

GODDARD, SHANNON

Provider ID: 419139
 Provider Gender: Female
 License Number: PA56072
 NPI: 1780961417
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619)
 515-2550
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PHYSICIANS ASSISTANT

GODDARD, SHANNON

Provider ID: 419139
 Provider Gender: Female
 License Number: PA56072

NPI: 1780961417
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 7592 BROADWAY
 LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A
 Email: valeriade@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-6:00PM
 F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER AQUINO, FELINO

Provider ID: 418302
 Provider Gender: Male
 License Number: NP22974
 NPI: 1356684781
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog
 Cultural Competency: N
 Board Certified Specialty: No

2101 GRANGER AVE
 NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM


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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-6:00PM
 F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER AQUINO, FELINO


Provider ID: 418302
 Provider Gender: Male
 License Number: NP22974
 NPI: 1356684781
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog
 Cultural Competency: N
 Board Certified Specialty: No
 2101 GRANGER AVE
 NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

DHARKAR SURBER, SAPNA

Provider ID: 185270
Provider Gender: Female
License Number: NP95013257
NPI: 1538707765

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
 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*

Email: aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


CERTIFIED NURSE PRACTITIONER

DHARKAR SURBER, SAPNA

Provider ID: 185270


Provider Gender: Female

License Number: NP95013257
NPI: 1538707765

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

 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*

Email: aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 2101 GRANGER AVE
 NATIONAL CITY, CA 91950

 *Phone: (844) 200-2426*

 *After Hours Phone: (844) 200-2426*

 *Website: www.operationsa mahan.org*

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

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

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-6:00PM

F 8:00AM-5:00PM

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

📍 2101 GRANGER AVE
 NATIONAL CITY, CA 91950
 📞 Phone: (844) 200-2426
 🕒 After Hours Phone: (844)
 200-2426

🌐 Website: www.operationsa
 mahan.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

**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

📍 2743 HIGHLAND AVE
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 🕒 After Hours Phone: (844)
 200-2426

🌐 Website: www.operationsa
 mahan.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8:00AM-6:00PM
 F 8:00AM-5:00PM

**CERTIFIED NURSE
 PRACTITIONER**

LUM, YUIN-WAH

Provider ID: 418930
 Provider Gender: Female
 License Number: NP95010663
 NPI: 1942764477

☐ Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

📍 1000 EUCLID AVE
 NATIONAL CITY, CA 91950
 📞 Phone: (619) 515-2399
 🕒 After Hours Phone: (619)
 515-2399

🌐 Website: www.fhcsd.org
 Email: lucinaj@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
 N

♿ Accessibility: CONTACT
 PROVIDER

**CERTIFIED NURSE
 PRACTITIONER**

LUM, YUIN-WAH

Provider ID: 418930
 Provider Gender: Female
 License Number: NP95010663

NPI: 1942764477

☐ Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

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 Email: lucinaj@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

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
 📍 217 HIGHLAND AVE
 NATIONAL CITY, CA 91950
 📞 Phone: (619) 564-8765
 🕒 After Hours Phone: (619)
 564-8765

🌐 Website: www.lamaestra.or
 g
 Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 564-8765

 After Hours Phone: (619)
564-8765

 Website: www.lamaestra.org


Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

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

 2400 E 8TH ST STE A
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662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

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

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399


 After Hours Phone: (619)
515-2399

 Website: www.fhcsd.org
Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

📍 1000 EUCLID AVE
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🕒 After Hours Phone: (619) 515-2399

🌐 Website: www.fhcsd.org
Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

📍 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

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

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🌐 Website: www.operationsa-mahan.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

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

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

FAMILY PRACTICE

CAMPBELL, BRIANNA

Provider ID: 227418

Provider Gender: Female

License Number: A157488

NPI: 1316479892

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: CHULA

VISTA COMM HOSP

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CAMPBELL, BRIANNA

Provider ID: 227418

Provider Gender: Female

License Number: A157488

NPI: 1316479892

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: CHULA

VISTA COMM HOSP

Board Certified Specialty: No

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🕒 After Hours Phone: (619) 662-4100

🌐 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-6:00PM

F 8:00AM-5:00PM

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

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

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

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

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

1136 D AVE
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100
 Fax: (619) 474-3722


 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 1136 D AVE
 NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 Fax: (619) 474-3722

 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE


DILLON, MAYRA

Provider ID: 227412

Provider Gender: Female

License Number: A112571

NPI: 1629232715

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA VISTA


Board Certified Specialty: No

 1136 D AVE
 NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 Fax: (619) 336-2323

 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE


DILLON, MAYRA

Provider ID: 227412

Provider Gender: Female

License Number: A112571

NPI: 1629232715

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA VISTA


Board Certified Specialty: No

 1136 D AVE
 NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 Fax: (619) 336-2323

 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE


HERNANDEZ, JOANNA

Provider ID: 227412

Provider Gender: Female

License Number: A138919

NPI: 1154749315


 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

HERNANDEZ, JOANNA

Provider ID: 227412
 Provider Gender: Female
 License Number: A138919
 NPI: 1154749315
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 1136 D AVE
 NATIONAL CITY, CA 91950
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 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 1000 EUCLID AVE
 NATIONAL CITY, CA 91950
 Phone: (619) 515-2399
 After Hours Phone: (619) 515-2399
 Website: www.fhcsd.org
 Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:30AM-3:30PM
 TU 10:30AM-5:30PM
 W 8:30AM-3:30PM
 TH 10:30AM-5:30PM
 F 8:30AM-3:30PM

FAMILY PRACTICE

LANUZA, MARK

Provider ID: 418930
 Provider Gender: Male
 License Number: 20A18460
 NPI: 1992230593
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 1000 EUCLID AVE
 NATIONAL CITY, CA 91950
 Phone: (619) 515-2399
 After Hours Phone: (619) 515-2399
 Website: www.fhcsd.org
 Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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

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- cli
nic

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

2400 E 8TH ST STE A
NATIONAL CITY, CA 91950



Phone: (619) 662-4100



After Hours Phone: (619)
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Website: syhealth.org/clinic
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nic

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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- cli
nic

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

330 E 8TH ST
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org
Email:

dinah.pierce@syhealth.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org

Email:

dinah.pierce@syhealth.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MOHAMEDI, NADIA

Provider ID: 227418

Provider Gender: Female

License Number: A146819

NPI: 1477947364

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

MOHAMEDI, NADIA

Provider ID: 227418

Provider Gender: Female

License Number: A146819

NPI: 1477947364

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

NAVARRO, VANESSA

Provider ID: 227418

Provider Gender: Female

License Number: A113624

NPI: 1952563421

Provider English Spoken: Y

Provider Language(s)

Spoken: Filipino, Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA
MED CTR

Board Certified Specialty: No

2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619) 662-4100

Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NAVARRO, VANESSA

Provider ID: 227418

Provider Gender: Female

License Number: A113624

NPI: 1952563421

Provider English Spoken: Y

Provider Language(s)

Spoken: Filipino, Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR

Board Certified Specialty: No


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

*s/paradise- hills- family- cli
nic*
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NIKZAD, JASON


Provider ID: 361428
Provider Gender: Male
License Number: 20A12653
NPI: 1508121674
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No






 330 E 8TH ST
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Email:
dinah.pierce@syhealth.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NIKZAD, JASON


Provider ID: 361428
Provider Gender: Male





License Number: 20A12653
NPI: 1508121674
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No


 330 E 8TH ST
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Email:
dinah.pierce@syhealth.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

OCEGUEDA, JOSHUA


Provider ID: 227412
Provider Gender: Male
License Number: A165184
NPI: 1336643345
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No



 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


ic- 1
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

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

 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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

RICHARDSON, DANIELLE

Provider ID: 227418
Provider Gender: Female
License Number: A127555

NPI: 1609142892
 □ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RICHARDSON, DANIELLE

Provider ID: 227418
 Provider Gender: Female
 License Number: A127555
 NPI: 1609142892
 □ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ROBERTS, POMAI

Provider ID: 227412
 Provider Gender: Female
 License Number: A103218
 NPI: 1023278314
 □ Provider English Spoken: Y
 □ Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

ROBERTS, POMAI

Provider ID: 227412
 Provider Gender: Female
 License Number: A103218

NPI: 1023278314
 □ Provider English Spoken: Y
 □ Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 📍 217 HIGHLAND AVE
 NATIONAL CITY, CA 91950
 📞 Phone: (619) 434-7308
 🕒 After Hours Phone: (619)
 434-7308
 🌐 Website: www.lamaestra.org

Email:
 aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER

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

📍 217 HIGHLAND AVE
 NATIONAL CITY, CA 91950
 📞 Phone: (619) 434-7308
 📞 After Hours Phone: (619)
 434-7308
 🌐 Website: www.lamaestra.org

Email:
 aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 📍 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/clinic
 s/paradise-hills-family-clinic
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

📍 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/clinic
 s/paradise-hills-family-clinic
 Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

STONES, RACHEL

Provider ID: 185270
 Provider Gender: Female
 License Number: A167184
 NPI: 1720583040
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

📍 217 HIGHLAND AVE
 NATIONAL CITY, CA 91950
 📞 Phone: (619) 280-4213
 After Hours Phone: (619)
 280-4213
 🌐 Website: www.lamaestra.org

g
 Email:
 aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Hours: TH 8:00AM-2:00PM

FAMILY PRACTICE

STONES, RACHEL

Provider ID: 185270
 Provider Gender: Female
 License Number: A167184
 NPI: 1720583040
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Website: www.lamaestra.org

Email: aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: TH 8:00AM-2:00PM

FAMILY PRACTICE

VELASQUEZ, SHARON

Provider ID: 227418

Provider Gender: Female

License Number: A71304

NPI: 1972732584

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619) 662-4100

Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

VELASQUEZ, SHARON

Provider ID: 227418

Provider Gender: Female

License Number: A71304

NPI: 1972732584

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619) 662-4100

Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FQHC

FAMILY HEALTH CTR SD

NATIONAL CITY,

Provider ID: 418930

NPI: 1417409228

Provider English Spoken: Y

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

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-3:30PM

TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

FQHC

FAMILY HEALTH CTR SD

NATIONAL CITY,

Provider ID: 418930

NPI: 1417409228

Provider English Spoken: Y

Cultural Competency: N

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

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

📍 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

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: TH 8:00AM-2:00PM

FQHC

LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185270

NPI: 1336353721

☐ Provider English Spoken: Y
 Cultural Competency: N

📍 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

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: TH 8:00AM-2:00PM

FQHC

OPERATION SAMAHAN - NATIONAL C,

Provider ID: 417102

NPI: 1801907449

☐ Provider English Spoken: Y
 Cultural Competency: N

📍 2743 HIGHLAND AVE
 NATIONAL CITY, CA 91950

☎ Phone: (844) 200-2426
 Fax: (619) 474-3919

🕒 After Hours Phone: (844) 200-2426

🌐 Website: www.operationsamahan.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-6:00PM

F 8:00AM-5:00PM

FQHC

OPERATION SAMAHAN -

NATIONAL C,

Provider ID: 417102

NPI: 1801907449

☐ Provider English Spoken: Y
 Cultural Competency: N

📍 2743 HIGHLAND AVE
 NATIONAL CITY, CA 91950

☎ Phone: (844) 200-2426
 Fax: (619) 474-3919

🕒 After Hours Phone: (844) 200-2426

🌐 Website: www.operationsamahan.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-6:00PM

F 8:00AM-5:00PM

FQHC

OPERATION SAMAHAN GRANGER SCHOOL BASED,

Provider ID: 418302

NPI: 1205134517

☐ Provider English Spoken: Y
 Cultural Competency: N

📍 2101 GRANGER AVE
 NATIONAL CITY, CA 91950

☎ Phone: (844) 200-2426
 Fax: (619) 434-8999

🕒 After Hours Phone: (844) 200-2426

🌐 Website: www.operationsamahan.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

**OPERATION SAMAHAN
GRANGER SCHOOL BASED,**
Provider ID: 418302
NPI: 1205134517

☐ Provider English Spoken: Y
Cultural Competency: N

📍 2101 GRANGER AVE
NATIONAL CITY, CA 91950

☎ Phone: (844) 200-2426
Fax: (619) 434-8999

📞 After Hours Phone: (844)
200-2426

🌐 Website: www.operationsamahan.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

FQHC

**SAN YSIDRO HEALTH
NATIONAL CITY,**

Provider ID: 227412

NPI: 1003869363

☐ Provider English Spoken: Y
Cultural Competency: N

📍 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

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

FQHC

**SAN YSIDRO HEALTH
NATIONAL CITY,**

Provider ID: 227412

NPI: 1003869363

☐ Provider English Spoken: Y
Cultural Competency: N

📍 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

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

FQHC

**SAN YSIDRO HEALTH
PARADISE HILLS,**

Provider ID: 227418

NPI: 1598907487

☐ Provider English Spoken: Y
Cultural Competency: N

📍 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

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

FQHC

**SAN YSIDRO HEALTH
PARADISE HILLS,**

Provider ID: 227418

NPI: 1598907487

☐ Provider English Spoken: Y
Cultural Competency: N

📍 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

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

FQHC

**SAN YSIDRO HEALTH SOUTH
BAY,**

Provider ID: 361428
 NPI: 1851757215
 Provider English Spoken: Y
 Cultural Competency: N
 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
 Email:
 dinah.pierce@syhealth.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH SOUTH BAY,

Provider ID: 361428
 NPI: 1851757215
 Provider English Spoken: Y
 Cultural Competency: N
 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
 Email:
 dinah.pierce@syhealth.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

HEPATOLOGY

GISH, ROBERT

Provider ID: 185270
 Provider Gender: Male
 License Number: G45632
 NPI: 1548281322
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Dutch, French,
 Spanish, Vietnamese
 Cultural Competency: N
 Hospital Affiliation: LOMA
 LINDA UNIVERSITY COMM
 MED CTR
 Board Certified Specialty: No

217 HIGHLAND AVE
 NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 After Hours Phone: (619)
 434-7308
 Website: www.lamaestra.org
 Email:
 aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:30PM

HEPATOLOGY

GISH, ROBERT

Provider ID: 185270
 Provider Gender: Male
 License Number: G45632

NPI: 1548281322
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Dutch, French,
 Spanish, Vietnamese
 Cultural Competency: N
 Hospital Affiliation: LOMA
 LINDA UNIVERSITY COMM
 MED CTR
 Board Certified Specialty: No
 217 HIGHLAND AVE
 NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 After Hours Phone: (619)
 434-7308
 Website: www.lamaestra.org
 Email:
 aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:30PM

INTERNAL MEDICINE

BRAVERMAN, IRA

Provider ID: 10635
 Provider Gender: Male
 NPI: 1124039755
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish, Tagalog
 Cultural Competency: N
 Hospital Affiliation: PARADISE
 VALLEY HOSPITAL
 Board Certified Specialty: Yes
 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

Email: SIEAB@AOL.COM

Medi-Cal Open Panel: Y

Min/Max Age: 18\150

American Sign Language (ASL): Board Certified Specialty: No

N

♿ Accessibility: CONTACT PROVIDER

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

INTERNAL MEDICINE

HEKMAT, RAZI

Provider ID: 78388

Provider Gender: Male

NPI: 1871501205

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PARADISE VALLEY HOSPITAL

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 18\999

American Sign Language (ASL): Board Certified Specialty: No

N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

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

📍 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: Y

Min/Max Age: 0\150

American Sign Language (ASL): Board Certified Specialty: No

N

♿ Accessibility: CONTACT PROVIDER

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

📍 330 E 8TH ST
NATIONAL CITY, CA 91950

☎ Phone: (619) 662-4100

☎ After Hours Phone: (619) 662-4100

🌐 Website: www.syhealth.org
Email:

dinah.pierce@syhealth.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

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

📍 330 E 8TH ST
NATIONAL CITY, CA 91950

☎ Phone: (619) 662-4100

☎ After Hours Phone: (619) 662-4100

🌐 Website: www.syhealth.org
Email:

dinah.pierce@syhealth.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 227412

Provider Gender: Female

License Number: G71855

NPI: 1124176102

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 1136 D AVE
 NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinic/national-city-family-clinic-1

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

ROUEL, WADI

Provider ID: 185270
 Provider Gender: Male
 License Number: C55979
 NPI: 1740254713
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, Spanish, Syriac
 Cultural Competency: N
 Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL

Board Certified Specialty: No
 217 HIGHLAND AVE
 NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 After Hours Phone: (619) 434-7308
 Website: www.lamaestra.org

Email: aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:30PM

INTERNAL MEDICINE

ROUEL, WADI

Provider ID: 185270
 Provider Gender: Male
 License Number: C55979
 NPI: 1740254713
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, Spanish, Syriac
 Cultural Competency: N
 Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL

Board Certified Specialty: No
 217 HIGHLAND AVE
 NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 After Hours Phone: (619) 434-7308
 Website: www.lamaestra.org
 Email: aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PROVIDER
 Hours: M-F 8:00AM-5:30PM

NEUROLOGY

CANTU-REYNA, GUILLERMO
 Provider ID: 185270
 Provider Gender: Male
 License Number: A41375
 NPI: 1447389101





Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP CHULA VISTA MED CTR
 Board Certified Specialty: No
 217 HIGHLAND AVE
 NATIONAL CITY, CA 91950
 Phone: (619) 798-3977
 After Hours Phone: (619) 798-3977

Website: www.lamaestra.org
 Email: aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

NEUROLOGY

CANTU-REYNA, GUILLERMO
 Provider ID: 185270
 Provider Gender: Male
 License Number: A41375
 NPI: 1447389101

Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP CHULA VISTA MED CTR
 Board Certified Specialty: No

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 798-3977
 After Hours Phone: (619)
798-3977
 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


ASLIAN, AZITA


Provider ID: 227418

Provider Gender: Female

License Number: A118227

NPI: 1851667661

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Fataleka

Cultural Competency: N

Hospital Affiliation: Hemet


Global Medical Center, Menifee


Global Medical Center,


SCRIPPS MERCY HOSPITAL


CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

 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

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


ASLIAN, AZITA


Provider ID: 227418

Provider Gender: Female

License Number: A118227

NPI: 1851667661

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Fataleka

Cultural Competency: N

Hospital Affiliation: Hemet


Global Medical Center, Menifee


Global Medical Center,


SCRIPPS MERCY HOSPITAL


CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

 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

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

BAILONY, MOHAMMED

Provider ID: 30132

Provider Gender: Male

NPI: 1376625913

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,
PARADISE VALLEY HOSPITAL,

SHARP CHULA VISTA MED


CTR, RADY CHILDRENS


HOSPITAL SAN DIEGO,

SCRIPPS MERCY HOSPITAL


CHULA VISTA


Board Certified Specialty: Yes

 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

Email:

BAILONY@YAHOO.COM

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

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: No

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

Email:

BAILONYPEDIATRICS@GMAIL.COM

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

BARBADILLO, TERESITA

Provider ID: 84258

Provider Gender: Female

NPI: 1952416695

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

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

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- clin
ic- 1

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

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- clin
ic- 1

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

CONE, STEPHANIE

Provider ID: 185270

Provider Gender: Female

License Number: A123929

NPI: 1437444858

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish
Cultural Competency: N

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

Board Certified Specialty: No

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

PEDIATRICS

CONE, STEPHANIE

Provider ID: 185270

Provider Gender: Female

License Number: A123929

NPI: 1437444858

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

After Hours Phone: (619) 434-7308

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

1000 EUCLID AVE
NATIONAL CITY, CA 91950

Phone: (619) 515-2399

After Hours Phone: (619) 515-2399

Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-3:30PM

TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

PEDIATRICS

DAY, CHRISTOPHER

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

1000 EUCLID AVE
NATIONAL CITY, CA 91950

Phone: (619) 515-2399

After Hours Phone: (619) 515-2399

Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 Hours: SU-SA 8:00AM-5:00PM

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
 📍 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 📍 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

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

📍 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

UY, CARMELITA

Provider ID: 424443
 Provider Gender: Female
 NPI: 1154431484
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Tagalog
 Cultural Competency: N
 Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No

📍 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

VALENCIA, MARILES

Provider ID: 104060

Provider Gender: Female

NPI: 1275541625

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, PARADISE VALLEY

HOSPITAL, SHARP CHULA

VISTA MED CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

📍 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

Email:

PEDIATRICSINPARADISE@YAHOO.COM

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

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

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

📍 1000 EUCLID AVE
NATIONAL CITY, CA 91950

☎ Phone: (619) 515-2399

📞 After Hours Phone: (619)
515-2399

🌐 Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

📍 1000 EUCLID AVE
NATIONAL CITY, CA 91950

☎ Phone: (619) 515-2399

📞 After Hours Phone: (619)
515-2399

🌐 Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

OCEANSIDE

CERTIFIED NURSE

PRACTITIONER

BAEK, KILHYO

Provider ID: 206341

Provider Gender: Female

License Number: NP95003571

NPI: 1053776914

☐ Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BAEK, KILHYO

Provider ID: 206341

Provider Gender: Female

License Number: NP95003571





NPI: 1053776914

☐ Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


📍 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER


BAEK, KILHYO




Provider ID: 206341
 Provider Gender: Female
 License Number: NP95003571
 NPI: 1053776914
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No


 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BAEK, KILHYO
 Provider ID: 206341
 Provider Gender: Female
 License Number: NP95003571
 NPI: 1053776914
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No


 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N





 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BAEK, KILHYO

Provider ID: 206341
 Provider Gender: Female
 License Number: NP95003571
 NPI: 1053776914
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No


 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: Y





Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 9:00AM-4:00PM


CERTIFIED NURSE

PRACTITIONER

BAEK, KILHYO

Provider ID: 206341
 Provider Gender: Female
 License Number: NP95003571
 NPI: 1053776914
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 9:00AM-4:00PM

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

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org


Email: credentialing@vcc.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

SA 9:00AM-4:00PM

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

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SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER


HALGEDAHL, YI


Provider ID: 402436

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Board Certified Specialty: No

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American Sign Language (ASL):



N





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CERTIFIED NURSE PRACTITIONER


HALGEDAHL, YI

Provider ID: 402436
Provider Gender: Female
License Number: NP95006826
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Cultural Competency: N
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CERTIFIED NURSE PRACTITIONER


HALGEDAHL, YI

Provider ID: 402434
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Mandarin*
Cultural Competency: N
Board Certified Specialty: No

 818 PIER VIEW WAY
 OCEANSIDE, CA 92054
 *Phone: (760) 631-5000*
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CERTIFIED NURSE

PRACTITIONER



HALGEDAHL, YI

Provider ID: 206341

Provider Gender: Female



License Number: NP95006826

NPI: 1619246907

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N
Board Certified Specialty: No

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (844) 308-5003
 After Hours Phone: (844)
308-5003

 Website: www.vistacommunityclinic.org

nityclinic.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

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CERTIFIED NURSE

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HALGEDAHL, YI

Provider ID: 206341

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 SA 9:00AM-4:00PM

FAMILY PRACTICE

DONNELL, MARTI

Provider ID: 206341
 Provider Gender: Female
 License Number: C50708
 NPI: 1235151366
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
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 Hours: M-F 8:00AM-5:00PM
 SA 9:00AM-4:00PM

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DONNELL, MARTI

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 Provider Gender: Female
 License Number: C50708
 NPI: 1235151366
 Provider English Spoken: Y
 Provider Language(s)
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 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS

Board Certified Specialty: No
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 American Sign Language (ASL):
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FAMILY PRACTICE

DONNELL, MARTI

Provider ID: 206341
 Provider Gender: Female
 License Number: C50708
 NPI: 1235151366
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 SA 9:00AM-4:00PM

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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 OCEANSIDE, CA 92057
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FAMILY PRACTICE




FATLAND, SARAH

Provider ID: 206341
 Provider Gender: Female

License Number: 20A18374
 NPI: 1831354026
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Hours: M-F 8:00AM-5:00PM
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FAMILY PRACTICE

PANICKER, CIBU

Provider ID: 206341

Provider Gender: Male

License Number: A149340

NPI: 1235492760

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No

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OCEANSIDE, CA 92057

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FAMILY PRACTICE

PANICKER, CIBU

Provider ID: 206341

Provider Gender: Male

License Number: A149340

NPI: 1235492760

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

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FAMILY PRACTICE


PANICKER, CIBU






Provider ID: 206341
 Provider Gender: Male
 License Number: A149340
 NPI: 1235492760
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: TRI CITY MEDICAL CTR
 Board Certified Specialty: No

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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

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 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
 Email: credentialing@vcc.org
 Medi-Cal Open Panel: Y

Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 9:00AM-4:00PM

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
 517 N HORNE ST
 OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
 Email: credentialing@vcc.org
 Medi-Cal Open Panel: Y
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 SA 9:00AM-4:00PM

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PONSFORD, DIANA

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 Provider Gender: Female
 License Number: 20A17371
 NPI: 1407204969
 Provider English Spoken: Y
 Cultural Competency: N
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 Board Certified Specialty: No
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Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 9:00AM-4:00PM

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
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 9:00AM-4:00PM

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
 4700 N RIVER RD
 OCEANSIDE, CA 92057
 Phone: (760) 631-5000
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 SA 9:00AM-4:00PM

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
 4700 N RIVER RD
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 Phone: (760) 631-5000
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VIDAL, MONICA

Provider ID: 206341
 Provider Gender: Female
 License Number: 20A8949
 NPI: 1871791749
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 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No

4700 N RIVER RD
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Provider ID: 206341
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VIDAL, MONICA

Provider ID: 206341
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 Board Certified Specialty: No
 4700 N RIVER RD
 OCEANSIDE, CA 92057
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 Website: www.vistacommunityclinic.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 206341
NPI: 1649662719

 *Provider English Spoken: Y*
Cultural Competency: N

 4700 N RIVER RD
 OCEANSIDE, CA 92057


 *Phone: (760) 631-5000*
Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 206341
NPI: 1316501562

 *Provider English Spoken: Y*
Cultural Competency: N

 4700 N RIVER RD
 OCEANSIDE, CA 92057

 *Phone: (760) 631-5000*
Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 206341
NPI: 1851300123

 *Provider English Spoken: Y*
Cultural Competency: N

 4700 N RIVER RD
 OCEANSIDE, CA 92057

 *Phone: (760) 631-5000*
Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 206341
NPI: 1851300123


 *Provider English Spoken: Y*
Cultural Competency: N

 4700 N RIVER RD
 OCEANSIDE, CA 92057

 *Phone: (760) 631-5000*

Fax: (760) 414-3892

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Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Hours: M-F 8:00AM-5:00PM
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FQHC


VISTA COMMUNITY CLINIC,
Provider ID: 206341
NPI: 1649662719

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Cultural Competency: N

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Min/Max Age: 0\999

American Sign Language (ASL): N

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Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC

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Provider ID: 206341
NPI: 1316501562

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Cultural Competency: N

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American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC


VISTA COMMUNITY CLINIC HORNE STREET,

Provider ID: 402436

NPI: 1609094036

 Provider English Spoken: Y
Cultural Competency: N

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

SA 9:00AM-4:00PM

FQHC


VISTA COMMUNITY CLINIC HORNE STREET,

Provider ID: 402436

NPI: 1609094036

 Provider English Spoken: Y
Cultural Competency: N

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Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
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FQHC


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Provider ID: 402436

NPI: 1609094036

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Cultural Competency: N

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

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC PIER VIEW WAY,

Provider ID: 402434








NPI: 1629357355

 Provider English Spoken: Y



Cultural Competency: N
 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
 Email: credentialing@vcc.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TU 8:00AM-5:00PM
 W 8:00AM-7:00PM
 TH-F 8:00AM-5:00PM
 SA 9:00AM-4:00PM

FQHC
VISTA COMMUNITY CLINIC
PIER VIEW WAY,
 Provider ID: 402434
 NPI: 1629357355
 Provider English Spoken: Y
Cultural Competency: N
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054
 Phone: (760) 631-5000
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 631-5000
 Website: www.vistacommunityclinic.org
 Email: credentialing@vcc.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT







PROVIDER
 Hours: M-TU 8:00AM-5:00PM
 W 8:00AM-7:00PM
 TH-F 8:00AM-5:00PM
 SA 9:00AM-4:00PM

FQHC
VISTA COMMUNITY CLINIC
PIER VIEW WAY,
 Provider ID: 402434
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 SA 9:00AM-4:00PM

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PIER VIEW WAY,
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 818 PIER VIEW WAY

FQHC
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 818 PIER VIEW WAY

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 PROVIDER
 Hours: M-TU 8:00AM-5:00PM
 W 8:00AM-7:00PM
 TH-F 8:00AM-5:00PM
 SA 9:00AM-4:00PM

GENERAL PRACTICE
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
 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: Y

Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

GENERAL PRACTICE

RONAN, KEVIN

Provider ID: 206341
 Provider Gender: Male
 License Number: G77176
 NPI: 1225017353
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 Provider Language(s)
 Spoken: Spanish, Tagalog
 Cultural Competency: N
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 MEDICAL CTR, SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS
 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
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 American Sign Language (ASL):
 N
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GENERAL PRACTICE

RONAN, KEVIN

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 Hospital Affiliation: TRI CITY
 MEDICAL CTR, SCRIPPS
 MEMORIAL HOSPITAL
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 MEMORIAL HOSPITAL
 ENCINITAS
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 631-5000
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PEDIATRICS

CHEN, MING

Provider ID: 614195
 Provider Gender: Female
 NPI: 1851525505
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Mandarin,
 Portuguese, Spanish,
 Taiwanese
 Cultural Competency: N
 Hospital Affiliation: DELANO
 REGIONAL MED CTR
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-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
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-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

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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

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

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
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760)
631-5000
Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org
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Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

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
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PEDIATRICS

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Provider Language(s)
Spoken: Hindi, Marathi,
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Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760)
631-5000
Website: www.vistacommunityclinic.org


Email: credentialing@vcc.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

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

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM


PEDIATRICS

MACINTYRE, ELIZABETH

Provider ID: 543354

Provider Gender: Female

NPI: 1336520766


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

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

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3731

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

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

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3731

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

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

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3731

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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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

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3731


 After Hours Phone: (760)
631-5000

 Website: www.vistacommu
nityclinic.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

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

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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

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3731

 After Hours Phone: (760)
631-5000

 Website: www.vistacommu
nityclinic.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

MILLER, DONALD

Provider ID: 433589

Provider Gender: Male

NPI: 1154356582

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS

HOSPITAL SAN DIEGO,

PALOMAR MEDICAL CENTER,

UCSF BENIOFF CHILDREN'S


HOSPITAL OAKLAND, SCRIPPS


MEMORIAL HOSPITAL

Board Certified Specialty: No

 3605 VISTA WAY BLDG B
STE 130

OCEANSIDE, CA 92056

 Phone: (760) 547-1010


 After Hours Phone: (760)
547-1010

 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

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

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

SA 8:00AM-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

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

PAUMA VALLEY

FQHC

NEIGHBORHOOD

HEALTHCARE PAUMA

VALLEY,

Provider ID: 206267

NPI: 1407031693

Provider English Spoken: Y
 Cultural Competency: N

16650 HIGHWAY 76
 PAUMA VALLEY, CA 92061

Phone: (760) 742-9919

Fax: (858) 633-4696

After Hours Phone: (760) 742-9919

Website: www.ihpsocal.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-4:30PM

FQHC

NEIGHBORHOOD

HEALTHCARE PAUMA

VALLEY,

Provider ID: 206267

NPI: 1407031693

Provider English Spoken: Y
 Cultural Competency: N

16650 HIGHWAY 76
 PAUMA VALLEY, CA 92061

Phone: (760) 742-9919

Fax: (858) 633-4696

After Hours Phone: (760) 742-9919

Website: www.ihpsocal.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-4:30PM

POWAY

FAMILY PRACTICE

KAUR, JATINDER

Provider ID: 481187

Provider Gender: Female

License Number: A120771

NPI: 1912141391

Provider English Spoken: Y

Provider Language(s)

Spoken: Hindi, Urdu

Cultural Competency: N

Board Certified Specialty: No

13010 POWAY RD
 POWAY, CA 92064

Phone: (858) 218-3000


After Hours Phone: (858) 218-3000

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\150



American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM




FAMILY PRACTICE


KAUR, JATINDER


Provider ID: 481187
Provider Gender: Female
License Number: A120771
NPI: 1912141391

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Hindi, Urdu*
Cultural Competency: N

Board Certified Specialty: No

 13010 POWAY RD
 POWAY, CA 92064
 *Phone: (858) 218-3000*
 *After Hours Phone: (858) 218-3000*

 *Website: N/A*
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

FQHC



NEIGHBORHOOD



HEALTHCARE GOLD FAMILY


HEALTH CENTER,

Provider ID: 481187
NPI: 1023518768

 *Provider English Spoken: Y*
Cultural Competency: N

 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: Y
Min/Max Age: 0\150
American Sign Language (ASL):


N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM



FQHC


NEIGHBORHOOD


HEALTHCARE GOLD FAMILY

HEALTH CENTER,

Provider ID: 481187
NPI: 1023518768
 *Provider English Spoken: Y*
Cultural Competency: N

 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: Y
Min/Max Age: 0\150
American Sign Language (ASL):


N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

 *Accessibility: CONTACT PROVIDER*

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



INTERNAL MEDICINE

CAPARSO, AMANDA

Provider ID: 602426
Provider Gender: Female
NPI: 1003046004
 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: PALOMAR MEDICAL CENTER, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No

 13010 POWAY RD
 POWAY, CA 92064
 *Phone: (760) 737-6935*
Fax: (760) 741-2782

 *After Hours Phone: (760) 737-6935*

 *Website: N/A*
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE



WINE, DAVID

Provider ID: 612886
Provider Gender: Male
NPI: 1811985542

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER

Board Certified Specialty: No

 15611 POMERADO RD STE 400
 POWAY, CA 92064
 *Phone: (858) 675-3100*
Fax: (858) 487-4736

 *After Hours Phone: (858) 675-3100*






 *Website: N/A*

Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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



 13010 POWAY RD
 POWAY, CA 92064
 Phone: (858) 218-3000
 After Hours Phone: (858) 218-3000
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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



 13010 POWAY RD
 POWAY, CA 92064
 Phone: (858) 218-3000
 After Hours Phone: (858) 218-3000
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

PEDIATRICS

LINDBACK, SARAH

Provider ID: 161834
 Provider Gender: Female
 NPI: 1427345487
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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

 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MOREIRA, LUCILA

Provider ID: 523761
 Provider Gender: Female
 NPI: 1104846567
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS, RADY CHILDRENS
 HOSPITAL SAN DIEGO
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: SU-SA 8:00AM-5:00PM

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
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

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

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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:30AM-5:00PM
 SA 9:00AM-5:00PM

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

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

SA 8:30AM-0:00PM

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

13010 POWAY RD
POWAY, CA 92064

Phone: (858) 218-3000

After Hours Phone: (858)
218-3000

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

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

13010 POWAY RD
POWAY, CA 92064

Phone: (858) 218-3000

After Hours Phone: (858)
218-3000

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

SAN DIEGO

CARDIOVASCULAR DISEASE

GARIBYAN, VARTAN

Provider ID: 417937

Provider Gender: Male

License Number: 20A12504

NPI: 1790084143

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS GREEN

HOSPITAL

Board Certified Specialty: No

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

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

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org


Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):


N

 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER


ALVAREZ, LISA

Provider ID: 206363
Provider Gender: Female
License Number: NP19911
NPI: 1417262718

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR


Board Certified Specialty: No

 4725 MARKET ST
 SAN DIEGO, CA 92102
 *Phone: (619) 515-2560*
 *After Hours Phone: (619) 515-2560*

 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

ALVAREZ, LISA

Provider ID: 206363
Provider Gender: Female
License Number: NP19911
NPI: 1417262718


 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

 4725 MARKET ST
 SAN DIEGO, CA 92102
 *Phone: (619) 515-2560*
 *After Hours Phone: (619) 515-2560*

 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):



N

 *Accessibility: CONTACT PROVIDER*

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

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

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

 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: Y

Min/Max Age: 0\999

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



 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU 8:30AM-5:30PM
 W 10:00AM-7:00PM
 TH-F 8:30AM-5:30PM


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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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


W 10:00AM-7:00PM
 TH-F 8:30AM-5:30PM

CERTIFIED NURSE


PRACTITIONER


ARTS, SERENA

Provider ID: 403583
 Provider Gender: Female
 License Number: NP10769
 NPI: 1801881552

 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101

 Phone: (619) 233-8500


 After Hours Phone: (619) 233-8500

 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE


PRACTITIONER


ARTS, SERENA


Provider ID: 403583
 Provider Gender: Female
 License Number: NP10769
 NPI: 1801881552

 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619) 233-8500


 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE


PRACTITIONER


BELEN, NEZER


Provider ID: 206363
 Provider Gender: Male
 License Number: NP95009292
 NPI: 1386120723

 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

 4725 MARKET ST
 SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

BELEN, NEZER

Provider ID: 206363
 Provider Gender: Male
 License Number: NP95009292
 NPI: 1386120723

 Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

BELTRON, KIMBERLY

Provider ID: 403583

Provider Gender: Female

License Number: NP95020497

NPI: 1871295493

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500

After Hours Phone: (619) 233-8500

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

BELTRON, KIMBERLY

Provider ID: 403583

Provider Gender: Female

License Number: NP95020497

NPI: 1871295493

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500

After Hours Phone: (619) 233-8500

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

BURNS, DELLA

Provider ID: 233597

Provider Gender: Female

License Number: NP7413

NPI: 1871577023

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

BURNS, DELLA

Provider ID: 233597

Provider Gender: Female

License Number: NP7413

NPI: 1871577023

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

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

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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-4:00PM

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

 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM





SA 8:00AM-4:00PM

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

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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

 1809 NATIONAL AVE

SAN DIEGO, CA 92113


 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300






 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

DHARKAR SURBER, SAPNA

Provider ID: 185268
 Provider Gender: Female
 License Number: NP95013257
 NPI: 1538707765

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
 Board Certified Specialty: No

 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619) 255-9155
 Website: www.lamaestra.org
 Email: aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT

PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER

DHARKAR SURBER, SAPNA

Provider ID: 185268
Provider Gender: Female
License Number: NP95013257
NPI: 1538707765
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER

DO, ELAINE

Provider ID: 233532

Provider Gender: Female

License Number: NP95019446
NPI: 1215696307

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No

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: Y

Min/Max Age: 0\22

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER

DO, ELAINE

Provider ID: 233532

Provider Gender: Female

License Number: NP95019446
NPI: 1215696307

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No

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: Y

Min/Max Age: 0\22

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

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

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560
After Hours Phone: (619) 515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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: Y

Min/Max Age: 0\150

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

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: Y

Min/Max Age: 0\150

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

 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: Y

Min/Max Age: 0\150

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

CERTIFIED NURSE

PRACTITIONER

HETTIG, JUDITH

Provider ID: 402851

Provider Gender: Female

License Number: NP3439


NPI: 1396815866


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

Cultural Competency: N

Board Certified Specialty: No

 3705 MISSION BLVD
 SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
 515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

CERTIFIED NURSE

PRACTITIONER

HETTIG, JUDITH

Provider ID: 402851

Provider Gender: Female

License Number: NP3439

NPI: 1396815866


Provider English Spoken: Y


Provider Language(s)
 Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 3705 MISSION BLVD
 SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
 515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER


HILL, GENIELYN

Provider ID: 417101

Provider Gender: Female

License Number: NP95020046

NPI: 1710632435

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

HOGAN, ROSELYNN JOY

Provider ID: 206360

Provider Gender: Female

License Number: NP17852

NPI: 1205019510


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

HOGAN, ROSELYNN JOY

Provider ID: 206360

Provider Gender: Female

License Number: NP17852

NPI: 1205019510

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE


SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


HORNEY, KRISTAN

Provider ID: 403583
 Provider Gender: Female
 License Number: NP95007712
 NPI: 1720590904

 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619) 233-8500

 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:30PM


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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-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

 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: Y
 Min/Max Age: 0\22
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-2:00PM

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
 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: Y
 Min/Max Age: 0\22
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-2:00PM

**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

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: Y

Min/Max Age: 0\150

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

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: Y

Min/Max Age: 0\150

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

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500

After Hours Phone: (619)
233-8500

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

**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

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500

After Hours Phone: (619)
233-8500

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER
Hours: M-F 8:30AM-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

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: Y
Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 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

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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

CERTIFIED NURSE PRACTITIONER

KI, TRISH

Provider ID: 206046
Provider Gender: Female
License Number: NP23847
NPI: 1376840199

Provider English Spoken: Y
 Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No

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: Y
Min/Max Age: 0\150
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

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: Y
Min/Max Age: 0\150
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

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

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 Website: www.sdfamilycare.org
 Medi-Cal Open Panel: Y
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 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
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 7011 LINDA VISTA RD
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 Website: www.sdfamilycare.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
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 Hours: M-F 8:30AM-5:30PM





CERTIFIED NURSE PRACTITIONER


KI, TRISH

Provider ID: 206046
 Provider Gender: Female
 License Number: NP23847
 NPI: 1376840199
 Provider English Spoken: Y
 Provider Language(s) Spoken: Vietnamese
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM
 SA 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

KLOBERDANZ, KELSEY

Provider ID: 417937
 Provider Gender: Female
 License Number: NP95005293
 NPI: 1235672502
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org

Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

KLOBERDANZ, KELSEY

Provider ID: 417937
 Provider Gender: Female
 License Number: NP95005293
 NPI: 1235672502
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

LIEBER, CAROL

Provider ID: 517403
 Provider Gender: Female
 License Number: NP20849
 NPI: 1487889846
 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 316 25TH ST
 SAN DIEGO, CA 92102
 Phone: (619) 238-5551
 After Hours Phone: (619) 238-5551
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\120
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

LIEBER, CAROL

Provider ID: 517403
 Provider Gender: Female
 License Number: NP20849
 NPI: 1487889846
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 316 25TH ST
 SAN DIEGO, CA 92102
 Phone: (619) 238-5551
 After Hours Phone: (619) 238-5551
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\120
 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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU 8:30AM-5:30PM
 W 10:00AM-7:00PM
 TH-F 8:30AM-5:30PM

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

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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU 8:30AM-5:30PM
 W 10:00AM-7:00PM
 TH-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

LOVE, VICKI

Provider ID: 206363
 Provider Gender: Female
 License Number: NP17362
 NPI: 1699759134
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

**CERTIFIED NURSE
PRACTITIONER**

LOVE, VICKI

Provider ID: 206363

Provider Gender: Female

License Number: NP17362

NPI: 1699759134

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

4725 MARKET ST

SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-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

1809 NATIONAL AVE

SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

**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

1809 NATIONAL AVE

SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

4725 MARKET ST

SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

4725 MARKET ST

SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

1016 OUTER RD
 SAN DIEGO, CA 92154
 Phone: (619) 429-3733
 After Hours Phone: (619) 429-3733

 Website: www.ibclinic.org
 Email: avaldez@ibclinic.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M 8:30AM-5:00PM
 TU-TH 8:30AM-8:00PM
 F 8:30AM-5:00PM




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

1016 OUTER RD
 SAN DIEGO, CA 92154

 Phone: (619) 429-3733
 After Hours Phone: (619) 429-3733
 Website: www.ibclinic.org
 Email: avaldez@ibclinic.org
 Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M 8:30AM-5:00PM
 TU-TH 8:30AM-8:00PM
 F 8:30AM-5:00PM

CERTIFIED NURSE PRACTITIONER

MELTZER, VIRGINIA


Provider ID: 233532
 Provider Gender: Female
 License Number: NP95015948
 NPI: 1821684390

Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\22
 American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER

MELTZER, VIRGINIA


Provider ID: 233532
 Provider Gender: Female
 License Number: NP95015948
 NPI: 1821684390

Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\22
 American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-2:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

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
 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: Y
 Min/Max Age: 0\150

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

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

4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Phone: (619) 564-8765
 After Hours Phone: (619)
 564-8765
 Website: www.lamaestra.or
 g
 Email:

aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Hours: M-F 8:00AM-6:00PM
 SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

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

4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Phone: (619) 564-8765
 After Hours Phone: (619)
 564-8765
 Website: www.lamaestra.or
 g

Email:
 aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER

Hours: M-F 8:00AM-6:00PM
 SA 8:00AM-2:00PM

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
 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: Y
 Min/Max Age: 0\22
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-2:00PM

**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
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 SAN DIEGO, CA 92105
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After Hours Phone: (619)
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 .org
 Medi-Cal Open Panel: Y
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 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-2:00PM

**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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

**CERTIFIED NURSE
 PRACTITIONER**



OCAMPO, ELAINE
 Provider ID: 206046
 Provider Gender: Female
 License Number: NP95003427
 NPI: 1063856805
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Mandarin, Yue
 Chinese
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

**CERTIFIED NURSE
 PRACTITIONER**

OCAMPO, ELAINE
 Provider ID: 206046
 Provider Gender: Female
 License Number: NP95003427
 NPI: 1063856805
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Mandarin, Yue
 Chinese
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER



OCAMPO, ELAINE
 Provider ID: 206046
 Provider Gender: Female
 License Number: NP95003427
 NPI: 1063856805
 Provider English Spoken: Y
 Provider Language(s) Spoken: Mandarin, Yue Chinese

Cultural Competency: N
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\150
 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

 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER



CERTIFIED NURSE PRACTITIONER


ODA, THAGHAR
 Provider ID: 206363
 Provider Gender: Female
 License Number: NP95000205
 NPI: 1063835692
 Provider English Spoken: Y
 Provider Language(s) Spoken: Amharic, Arabic
 Cultural Competency: N
 Board Certified Specialty: No

 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150



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

 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR
 Provider ID: 206360
 Provider Gender: Female
 License Number: NP95000205
 NPI: 1063835692
 Provider English Spoken: Y
 Provider Language(s) Spoken: Amharic, Arabic

Cultural Competency: N
Board Certified Specialty: No
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

ODA, THAGHAR

Provider ID: 206360
 Provider Gender: Female
 License Number: RN810863
 NPI: 1063835692
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Amharic, Arabic
 Cultural Competency: N
Board Certified Specialty: No
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER






ODA, THAGHAR



Provider ID: 206360
 Provider Gender: Female
 License Number: NP95000205
 NPI: 1063835692
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Amharic, Arabic
 Cultural Competency: N
Board Certified Specialty: No
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

ODA, THAGHAR






Provider ID: 206360
 Provider Gender: Female
 License Number: RN810863
 NPI: 1063835692
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Amharic, Arabic
 Cultural Competency: N
Board Certified Specialty: No
 1809 NATIONAL AVE
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 Phone: (619) 515-2300
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

ODA, THAGHAR

Provider ID: 206363
 Provider Gender: Female
 License Number: NP95000205
 NPI: 1063835692
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Amharic, Arabic
 Cultural Competency: N
Board Certified Specialty: No
 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

ORPILLA, IMELDA

Provider ID: 418535

Provider Gender: Female

License Number: NP95003211

NPI: 1790785988

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

9995 CARMEL MOUNTAIN
RD STE B10 AND B11

SAN DIEGO, CA 92129

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After Hours Phone: (844)
200-2426

Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

OWEN, MICHAEL

Provider ID: 206363

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

4725 MARKET ST

SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

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515-2560


 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

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

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-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

 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: Y

Min/Max Age: 0\150

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

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925



 Website: www.sdfamilycare.org

.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

 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: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:30AM-5:30PM

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



 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

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

 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: Y
 Min/Max Age: 0\150
 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

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: Y

Min/Max Age: 0\22

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

SA 8:00AM-2:00PM

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

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: Y

Min/Max Age: 0\22

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

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

SA 8:00AM-2:00PM

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

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: Y

Min/Max Age: 0\150

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

SABIN, NANCY

Provider ID: 206046

Provider Gender: Female

License Number: NP4668

NPI: 1285732586

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:00AM-5:00PM
 TU 8:00AM-8:00PM
 W-F 8:00AM-5:00PM
 SA 9:00AM-1:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:00AM-5:00PM
 TU 8:00AM-8:00PM
 W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM





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
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 279-0925
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 Website: www.sdfamilycare.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:00AM-5:00PM
 TU 8:00AM-8:00PM
 W-F 8:00AM-5:00PM
 SA 9:00AM-1:00PM

CERTIFIED NURSE PRACTITIONER


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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:00AM-5:00PM
 TU 8:00AM-8:00PM
 W-F 8:00AM-5:00PM
 SA 9:00AM-1:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N

 *Accessibility: CONTACT PROVIDER*

*Hours: M 8:00AM-5:00PM
TU 8:00AM-8:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-1:00PM*

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

 *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: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

*Hours: M 8:00AM-5:00PM
TU 8:00AM-8:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-1:00PM*

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

 *6973 LINDA VISTA RD
SAN DIEGO, CA 92111*

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Medi-Cal Open Panel: Y

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American Sign Language (ASL): N

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TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

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

 *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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

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

TU 8:00AM-8:00PM


W-F 8:00AM-5:00PM


SA 9:00AM-1:00PM

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

 *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: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

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

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

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

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

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 PROVIDER

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

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

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

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM
 SA 9:00AM-1:00PM

CERTIFIED NURSE

PRACTITIONER

SAVILLE, EDITH

Provider ID: 417937

Provider Gender: Female

License Number: NP7374


NPI: 1730567678


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
 SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
 515-2545

 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

SAVILLE, EDITH

Provider ID: 417937

Provider Gender: Female

License Number: NP7374





NPI: 1730567678

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
 SAN DIEGO, CA 92103

 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM






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
 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

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
 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300


 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


SOTO, ROBIN

Provider ID: 206360

Provider Gender: Female

License Number: NP11778

NPI: 1487688099


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


SOTO, ROBIN

Provider ID: 206360

Provider Gender: Female

License Number: NP11778

NPI: 1487688099


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 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: Y

Min/Max Age: 0\150

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

 3544 30TH ST
SAN DIEGO, CA 92104








 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

515-2424
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER








CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA
 Provider ID: 517998
 Provider Gender: Female
 License Number: NP95005999
 NPI: 1316478092

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\120
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA
 Provider ID: 517998
 Provider Gender: Female
 License Number: NP95005999
 NPI: 1316478092

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\120
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TRAN, KELLY
 Provider ID: 206360
 Provider Gender: Female
 License Number: NP95003689
 NPI: 1255799276



 Provider English Spoken: Y
 Provider Language(s) Spoken: Vietnamese
 Cultural Competency: N
 Board Certified Specialty: No
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PROVIDER

CERTIFIED NURSE PRACTITIONER


TRAN, KELLY
 Provider ID: 206360
 Provider Gender: Female
 License Number: NP95003689
 NPI: 1255799276

 Provider English Spoken: Y
 Provider Language(s) Spoken: Vietnamese
 Cultural Competency: N
 Board Certified Specialty: No
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TUEROS, VICTORIA
 Provider ID: 206360
 Provider Gender: Female
 License Number: NP2286
 NPI: 1598989261

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 1809 NATIONAL AVE

SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

TUEROS, VICTORIA

Provider ID: 206360
 Provider Gender: Female
 License Number: NP2286
 NPI: 1598989261
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

VEGA, TERESA

Provider ID: 206360
 Provider Gender: Female
 License Number: NP95001705
 NPI: 1912304569
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE


PRACTITIONER

VEGA, TERESA

Provider ID: 206360
 Provider Gender: Female
 License Number: NP95001705
 NPI: 1912304569
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

VELASQUEZ, FERNANDO

Provider ID: 206360
 Provider Gender: Male
 License Number: NP95011254
 NPI: 1386195535
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER



VELASQUEZ, FERNANDO

Provider ID: 206360
 Provider Gender: Male
 License Number: NP95011254
 NPI: 1386195535
 Provider English Spoken: Y





 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619)
515-2300*
 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*

**CERTIFIED NURSE
PRACTITIONER**

VELASQUEZ, FERNANDO

Provider ID: 419529
Provider Gender: Male
License Number: NP95011254
NPI: 1386195535
 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N



Board Certified Specialty: No

 2325 COMMERCIAL ST STE
1400
SAN DIEGO, CA 92113
 *Phone: (619) 515-2422*
 *After Hours Phone: (619)
515-2422*
 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
*American Sign Language (ASL):
N*






 *Accessibility: CONTACT
PROVIDER*

**CERTIFIED NURSE
PRACTITIONER**

VELASQUEZ, FERNANDO



Provider ID: 356145
Provider Gender: Male
License Number: NP95011254
NPI: 1386195535
 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N

Board Certified Specialty: No

 2391 ISLAND AVE
SAN DIEGO, CA 92102
 *Phone: (619) 515-2435*
 *After Hours Phone: (619)
515-2435*
 *Website: N/A*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*

**CERTIFIED NURSE
PRACTITIONER**



VELASQUEZ, FERNANDO






Provider ID: 419529
Provider Gender: Male
License Number: NP95011254
NPI: 1386195535
 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No

 2325 COMMERCIAL ST STE
1400
SAN DIEGO, CA 92113
 *Phone: (619) 515-2422*
 *After Hours Phone: (619)
515-2422*
 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*

**CERTIFIED NURSE
PRACTITIONER**

VELASQUEZ, FERNANDO

Provider ID: 356145
Provider Gender: Male
License Number: NP95011254
NPI: 1386195535
 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No

 2391 ISLAND AVE
SAN DIEGO, CA 92102
 *Phone: (619) 515-2435*
 *After Hours Phone: (619)
515-2435*
 *Website: N/A*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*

CERTIFIED NURSE

PRACTITIONER

VILLALOBOS, REBECA

Provider ID: 206360
 Provider Gender: Female
 License Number: NP95015780
 NPI: 1184224396

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

Cultural Competency: N
 Board Certified Specialty: No

1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

CERTIFIED NURSE

PRACTITIONER

VILLALOBOS, REBECA

Provider ID: 206360
 Provider Gender: Female
 License Number: NP95015780
 NPI: 1184224396

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

Cultural Competency: N
 Board Certified Specialty: No

1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300

Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

1550 BROADWAY STE 2
 SAN DIEGO, CA 92101
 Phone: (619) 515-2525
 After Hours Phone: (619)
 515-2525
 Website: www.fhcsd.org
 Email: janeta@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:30AM-5:30PM

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
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101
 Phone: (619) 515-2525
 After Hours Phone: (619)
 515-2525

Website: www.fhcsd.org
 Email: janeta@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:30AM-5:30PM

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

3514 30TH ST
 SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
 515-2424

Website: www.fhcsd.org
 Email: jenanm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\18
 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

3514 30TH ST
 SAN DIEGO, CA 92104

Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

Website: www.fhcsd.org
 Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

3705 MISSION BLVD

SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
 Email: sabay@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

3705 MISSION BLVD
 SAN DIEGO, CA 92109

Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444

Website: www.fhcsd.org
 Email: sabay@fhcsd.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

4094 4TH AVE
 SAN DIEGO, CA 92103

Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
 Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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


4094 4TH AVE
 SAN DIEGO, CA 92103

Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
 Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

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

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED


NURSE MIDWIFE

GEPSHTEIN, YANA

Provider ID: 402851
 Provider Gender: Female
 License Number: NM1662
 NPI: 1396956512
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hebrew
 Cultural Competency: N

Board Certified Specialty: No

 3705 MISSION BLVD
 SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
 Email: sabay@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

GEPSHTEIN, YANA





Provider ID: 402851
 Provider Gender: Female
 License Number: NM1662
 NPI: 1396956512
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hebrew
 Cultural Competency: N
 Board Certified Specialty: No

 3705 MISSION BLVD
 SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
 Email: sabay@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 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

📍 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: Y
 Min/Max Age: 0\150
 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
 📍 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-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
 📍 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT PROVIDER

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

W 10:00AM-7:00PM
 TH-F 8:30AM-5:30PM

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
 📍 9995 CARMEL MOUNTAIN RD STE B10 AND B11
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 N

♿ Accessibility: CONTACT PROVIDER



Hours: M-TU 8:30AM-5:30PM
 W 10:00AM-7:00PM
 TH-F 8:30AM-5:30PM

CHIROPRACTOR
CABALLERO, JAMES

Provider ID: 417101
 Provider Gender: Male
 License Number: DC27726
 NPI: 1093991549






Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No
 📍 10737 CAMINO RUIZ STE 235

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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-4:30PM


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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-4:30PM


CHIROPRACTOR





GILIBERTO, JOSEPH

Provider ID: 418535
 Provider Gender: Male
 License Number: DC15775
 NPI: 1821463159
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 9995 CARMEL MOUNTAIN RD STE B10 AND B11
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 Medi-Cal Open Panel: Y
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 TH-F 8:30AM-5:30PM

CHIROPRACTOR






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Provider ID: 418535
 Provider Gender: Male
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Provider ID: 417101
 Provider Gender: Male
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 NPI: 1821463159
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
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 Website: www.operationsamahan.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-4:30PM

CHIROPRACTOR

ILCHENA, ALESANDRA

Provider ID: 185268

Provider Gender: Female

License Number: DC32800

NPI: 1871046664

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 798-3947

After Hours Phone: (619)
798-3947

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

CHIROPRACTOR

ILCHENA, ALESANDRA

Provider ID: 185268

Provider Gender: Female

License Number: DC32800

NPI: 1871046664

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 798-3947

After Hours Phone: (619)
798-3947

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

CHIROPRACTOR

KAZEM, AHMAD

Provider ID: 227409

Provider Gender: Male

License Number: DC33300

NPI: 1003296096

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

CHIROPRACTOR

KAZEM, AHMAD

Provider ID: 227409

Provider Gender: Male

License Number: DC33300

NPI: 1003296096

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

LOVERN, JENNIFER

Provider ID: 207382

Provider Gender: Female

License Number: DC29074

NPI: 1235469396

Provider English Spoken: Y

Provider Language(s)
Spoken: Italian, Spanish



Cultural Competency: N

Board Certified Specialty: No

2630 1ST AVE
SAN DIEGO, CA 92103






Phone: (619) 234-2158



After Hours Phone: (619)

234-2158
 Website: WWW.SDAIHC.ORG
 G
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

LOVERN, JENNIFER






Provider ID: 207382
 Provider Gender: Female
 License Number: DC29074
 NPI: 1235469396
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Italian, Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 2630 1ST AVE
 SAN DIEGO, CA 92103
 Phone: (619) 234-2158
 After Hours Phone: (619) 234-2158



 Website: WWW.SDAIHC.ORG
 G
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

LOVERN, JENNIFER







Provider ID: 418535
 Provider Gender: Female
 License Number: DC29074


NPI: 1235469396
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Italian, Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU 8:30AM-5:30PM
 W 10:00AM-7:00PM
 TH-F 8:30AM-5:30PM

CHIROPRACTOR






LOVERN, JENNIFER


Provider ID: 418535
 Provider Gender: Female
 License Number: DC29074
 NPI: 1235469396
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Italian, Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 9995 CARMEL MOUNTAIN RD STE B10 AND B11
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mahan.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU 8:30AM-5:30PM
 W 10:00AM-7:00PM
 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
 3705 MISSION BLVD
 SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444

 Website: www.fhcsd.org
 Email: sabay@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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
 3705 MISSION BLVD
 SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
 515-2444
 Website: www.fhcsd.org
 Email: sabay@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
 515-2545
 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM





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
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
 515-2545
 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

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
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)

515-2545
 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 9:00AM-5:00PM

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
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
 515-2545
 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 9:00AM-5:00PM

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

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

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

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
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 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

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

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

SU, VENNES

Provider ID: 417101

Provider Gender: Female

License Number: DC34907


NPI: 1053919928


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

CHIROPRACTOR

SU, VENNES

Provider ID: 417101

Provider Gender: Female

License Number: DC34907

NPI: 1053919928

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

10737 CAMINO RUIZ STE
235
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N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-4:30PM

**CLINIC OUTPATIENT
OPERATION SAMAHAN
RANCHO PENASQUITOS,**

Provider ID: 418535
NPI: 1699216622
Provider English Spoken: Y
Cultural Competency: N
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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-TU 8:30AM-5:30PM
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TH-F 8:30AM-5:30PM

**CLINIC OUTPATIENT
OPERATION SAMAHAN
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Provider ID: 418535
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Provider English Spoken: Y
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9995 CARMEL MOUNTAIN
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200-2426
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Min/Max Age: 0\150
American Sign Language (ASL):
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Accessibility: CONTACT
PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

**DERMATOLOGY
BURROWS, WILLIAM**

Provider ID: 417937
Provider Gender: Male
License Number: G16236
NPI: 1639199292
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545

After Hours Phone: (619)
515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
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Accessibility: CONTACT
PROVIDER

**DERMATOLOGY
BURROWS, WILLIAM**

Provider ID: 417937
Provider Gender: Male
License Number: G16236
NPI: 1639199292
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
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515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

**DERMATOLOGY
CARTER, NATASHA**

Provider ID: 206363
Provider Gender: Female

License Number: A140912

NPI: 1033539184

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

DERMATOLOGY

CARTER, NATASHA

Provider ID: 206363

Provider Gender: Female

License Number: A140912

NPI: 1033539184

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Board Certified Specialty: No

4725 MARKET ST

SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

AHMAD, AAKIF

Provider ID: 206360

Provider Gender: Male

License Number: 20A12732

NPI: 1720308331

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS GREEN HOSPITAL

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

AHMAD, AAKIF

Provider ID: 206360

Provider Gender: Male

License Number: 20A12732

NPI: 1720308331

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS GREEN HOSPITAL

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

☎ After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

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

Board Certified Specialty: No

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

☎ After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-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

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

☎ After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

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

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

☎ After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

📍 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
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 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
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300



 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N




 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 206360
 Provider Gender: Female
 License Number: A146838
 NPI: 1720474141
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 206360
 Provider Gender: Female
 License Number: A146838
 NPI: 1720474141
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 1809 NATIONAL AVE
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 Phone: (619) 515-2300
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 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

RODRIGUEZ MARTINEZ, RENIL

Provider ID: 206360
 Provider Gender: Female
 License Number: A142703
 NPI: 1477817757
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

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

ENDOCRINOLOGY

METABOLISM DIABETES

RODRIGUEZ MARTINEZ, RENIL

Provider ID: 206360
 Provider Gender: Female
 License Number: A142703
 NPI: 1477817757
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ABDALLAH, ALI

Provider ID: 206363
 Provider Gender: Male
 License Number: 20A15471
 NPI: 1649699968
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic
 Cultural Competency: N

4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ABDALLAH, ALI

Provider ID: 206363
 Provider Gender: Male
 License Number: 20A15471
 NPI: 1649699968
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic
 Cultural Competency: N
 Board Certified Specialty: No
 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 227409
 Provider Gender: Male
 License Number: A157505
 NPI: 1588197826
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, SCRIPPS MERCY
 HOSPITAL, PARADISE VALLEY
 HOSPITAL
 Board Certified Specialty: No
 3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: [https://www.syhe
 alth.org/locations](https://www.syhealth.org/locations)
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 227409
 Provider Gender: Male
 License Number: A157505
 NPI: 1588197826
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY
 HOSPITAL, PARADISE VALLEY
 HOSPITAL
 Board Certified Specialty: No
 3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: [https://www.syhe
 alth.org/locations](https://www.syhealth.org/locations)
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

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

4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
 515-2545
 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

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
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
 515-2545

Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

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
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101
 Phone: (619) 515-2525
 After Hours Phone: (619)
 515-2525




 Website: www.fhcsd.org
 Email: janeta@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:30AM-5:30PM


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

 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101
 Phone: (619) 515-2525
 After Hours Phone: (619)
 515-2525

 Website: www.fhcsd.org
 Email: janeta@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150


American Sign Language (ASL):
 N


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

FAMILY PRACTICE


BAHRAMZI, MARIA

Provider ID: 417987
 Provider Gender: Female
 License Number: A173486
 NPI: 1588141865

 Provider English Spoken: Y

 Provider Language(s)
 Spoken: Pushto
 Cultural Competency: N
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\150



American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


FAMILY PRACTICE

BAHRAMZI, MARIA

Provider ID: 417987
 Provider Gender: Female
 License Number: A173486
 NPI: 1588141865

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Pushto
 Cultural Competency: N
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\150



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: Pushto
 Cultural Competency: N
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\150



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: Pushto
 Cultural Competency: N
 Board Certified Specialty: No






 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: Y
 Min/Max Age: 0\150

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
 316 25TH ST
 SAN DIEGO, CA 92102
 Phone: (619) 238-5551
 After Hours Phone: (619)
 238-5551
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\120
 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
 316 25TH ST
 SAN DIEGO, CA 92102
 Phone: (619) 238-5551
 After Hours Phone: (619)
 238-5551
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\120
 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
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 645-6405
 After Hours Phone: (619)
 645-6405
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:30PM

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
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 645-6405
 After Hours Phone: (619)
 645-6405
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE

BODIFORD, SAMANTHA

Provider ID: 214492
 Provider Gender: Female
 License Number: A165398
 NPI: 1730684200
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
After Hours Phone: (619) 429-3733
Website: www.ibclinic.org
Email: avaldez@ibclinic.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:00PM
TU-TH 8:30AM-8:00PM
F 8:30AM-5:00PM

FAMILY PRACTICE

BODIFORD, SAMANTHA

Provider ID: 214492
Provider Gender: Female
License Number: A165398
NPI: 1730684200
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
After Hours Phone: (619) 429-3733
Website: www.ibclinic.org
Email: avaldez@ibclinic.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:00PM
TU-TH 8:30AM-8:00PM
F 8:30AM-5:00PM

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

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

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

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BRADY, PATRICIA

Provider ID: 403583
Provider Gender: Female
License Number: C53121
NPI: 1952390437
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A

Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:00PM
TH 8:30AM-9:00PM
F 8:30AM-5:00PM

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
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
 233-8500
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-W 8:30AM-5:00PM
 TH 8:30AM-9:00PM
 F 8:30AM-5:00PM

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
 3705 MISSION BLVD
 SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
 515-2444
 Website: www.fhcsd.org
 Email: sabay@fhcsd.org
 Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-W 8:30AM-5:30PM
 TH 9:00AM-6:00PM
 F 8:30AM-5:30PM

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

3705 MISSION BLVD
 SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
 515-2444
 Website: www.fhcsd.org
 Email: sabay@fhcsd.org
 Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Hours: M-W 8:30AM-5:30PM
 TH 9:00AM-6:00PM
 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
 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: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 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

Cultural Competency: N

Hospital Affiliation: CHULA

VISTA COMM HOSP

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CAMPBELL, BRIANNA

Provider ID: 451167

Provider Gender: Female

License Number: A157488

NPI: 1316479892

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: CHULA

VISTA COMM HOSP

Board Certified Specialty: No

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After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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: Y

Min/Max Age: 0\150

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CARSON, COREY

Provider ID: 206360

Provider Gender: Female

License Number: A136616

NPI: 1245599778

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150


American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



CARSON, COREY

Provider ID: 206360
 Provider Gender: Female
 License Number: A136616
 NPI: 1245599778

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR

Board Certified Specialty: No

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113

 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150


American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER


FAMILY PRACTICE

CARSON, COREY


Provider ID: 417937
 Provider Gender: Female
 License Number: A136616
 NPI: 1245599778

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR

Board Certified Specialty: No

 4094 4TH AVE

SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150


American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



CARSON, COREY


Provider ID: 417937
 Provider Gender: Female
 License Number: A136616
 NPI: 1245599778

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR

Board Certified Specialty: No

 4094 4TH AVE
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 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

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

 4094 4TH AVE
 SAN DIEGO, CA 92103

 Phone: (619) 515-2545
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 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

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 Min/Max Age: 0\150

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

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: Y

Min/Max Age: 0\150

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

3544 30TH ST
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Website: www.fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

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515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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: Y

Min/Max Age: 0\150

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
 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: Y
 Min/Max Age: 0\150
 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
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
 515-2545
 Website: www.fhcsd.org

Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: SU-SA 8:00AM-9:00PM

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

4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
 515-2545
 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: SU-SA 8:00AM-9:00PM

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
 3705 MISSION BLVD
 SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
 515-2444
 Website: www.fhcsd.org
 Email: sabay@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

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
 3705 MISSION BLVD
 SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
 515-2444
 Website: www.fhcsd.org
 Email: sabay@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

 *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: Y

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

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

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

 *3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113*

 *Phone: (619) 662-4100*

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

 *Website: <https://www.syhealth.org/locations>*

alth.org/locations
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

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

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

 *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: Y

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM*

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

 *950 S EUCLID AVE
SAN DIEGO, CA 92114*

 *Phone: (619) 662-4100*

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662-4100*

 *Website: www.syhealth.org/clinics/king-chavez-health-center*

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM*

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

 *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*


h- center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

FAMBRO, CYNTHIA

Provider ID: 451167
 Provider Gender: Female
 License Number: A153223
 NPI: 1710331707
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish






Cultural Competency: N
 Board Certified Specialty: No
 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

h- center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

FLORES, JOE

Provider ID: 417937
 Provider Gender: Male
 License Number: A171135
 NPI: 1033647409
 Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
 515-2545
 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER


Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM


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

 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
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 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

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

Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

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

 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

GLEASON ROHRER, GWEN

Provider ID: 233532
 Provider Gender: Female
 License Number: A112176
 NPI: 1710140462

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR

Board Certified Specialty: No



 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: Y
 Min/Max Age: 0\22
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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

 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

GLEASON ROHRER, GWEN




Provider ID: 233532
 Provider Gender: Female
 License Number: A112176
 NPI: 1710140462
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR
 Board Certified Specialty: No


 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: Y
 Min/Max Age: 0\22
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

GRIFFITHS, KENNETH

Provider ID: 417937
 Provider Gender: Male
 License Number: C52451
 NPI: 1760563068
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR
 Board Certified Specialty: No




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 SAN DIEGO, CA 92103
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 Medi-Cal Open Panel: Y
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 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

FAMILY PRACTICE

GRIFFITHS, KENNETH

Provider ID: 417937
 Provider Gender: Male
 License Number: C52451
 NPI: 1760563068
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR
 Board Certified Specialty: No

 4094 4TH AVE
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 Phone: (619) 515-2545
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 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

FAMILY PRACTICE

GUTIERREZ, TANIA

Provider ID: 417987
 Provider Gender: Female
 License Number: 20A19345
 NPI: 1285196311
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

GUTIERREZ, TANIA

Provider ID: 417987
 Provider Gender: Female
 License Number: 20A19345
 NPI: 1285196311
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

HACHOLSKI, MARK

Provider ID: 206362
 Provider Gender: Male
 License Number: A169591
 NPI: 1568995694
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

HACHOLSKI, MARK

Provider ID: 206362
 Provider Gender: Male
 License Number: A169591
 NPI: 1568995694
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No

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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

HAMILTON, LISA MARIE

Provider ID: 418142
 Provider Gender: Female
 License Number: 20A14772
 NPI: 1235576059
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 5160 FEDERAL BLVD
 SAN DIEGO, CA 92105
 Phone: (619) 515-2454
 After Hours Phone: (619)
 515-2454
 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

HAMILTON, LISA MARIE


Provider ID: 418142
 Provider Gender: Female
 License Number: 20A14772


NPI: 1235576059

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

 Phone: (619) 515-2454

 After Hours Phone: (619)
515-2454

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

HAMILTON, LISA MARIE

Provider ID: 206363

Provider Gender: Female


License Number: 20A14772


NPI: 1235576059

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

HAMILTON, LISA MARIE

Provider ID: 206363

Provider Gender: Female


License Number: 20A14772


NPI: 1235576059

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE



HEINRICI, ALEKA

Provider ID: 451167

Provider Gender: Female

License Number: A125329

NPI: 1780979120

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


Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL

Board Certified Specialty: No

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
/clinics/king- chavez- healt
h- center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

FAMILY PRACTICE


HEINRICI, ALEKA

Provider ID: 451167

Provider Gender: Female

License Number: A125329

NPI: 1780979120

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL

Board Certified Specialty: No

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
/clinics/king- chavez- healt
h- center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

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

SA 8:00AM-4:00PM

FAMILY PRACTICE

KAUFHOLD, ANNE

Provider ID: 227409

Provider Gender: Female

License Number: A88893

NPI: 1164508073

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

Fax: (619) 858-1003

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

KAUFHOLD, ANNE

Provider ID: 227409

Provider Gender: Female

License Number: A88893

NPI: 1164508073

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

Fax: (619) 858-1003

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

KAUFMAN, JENNIFER CHILYN

Provider ID: 417987

Provider Gender: Female

License Number: G149974

NPI: 1407818768

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

KAUFMAN, JENNIFER CHILYN

Provider ID: 417987

Provider Gender: Female

License Number: G149974

NPI: 1407818768

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

FAMILY PRACTICE

KEFLEZIGHI, BAHGHI

Provider ID: 206363

Provider Gender: Female

License Number: A100391

NPI: 1124210844

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

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

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KEFLEZIGHI, BAHGHI

Provider ID: 206363

Provider Gender: Female

License Number: A100391

NPI: 1124210844

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

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After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KIDDER, BRENDAN

Provider ID: 227409

Provider Gender: Male

License Number: A112379

NPI: 1275793929

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KIDDER, BRENDAN

Provider ID: 227409

Provider Gender: Male

License Number: A112379

NPI: 1275793929

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LACH, REBECCA

Provider ID: 206362

Provider Gender: Female

License Number: A177922

NPI: 1679137780

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LACH, REBECCA

Provider ID: 206362

Provider Gender: Female

License Number: A177922

NPI: 1679137780

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LACH, REBECCA

Provider ID: 417937

Provider Gender: Female

License Number: A177922

NPI: 1679137780

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

FAMILY PRACTICE

LACH, REBECCA

Provider ID: 417937

Provider Gender: Female

License Number: A177922

NPI: 1679137780

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

FAMILY PRACTICE

LEE, SANDRINE

Provider ID: 206362

Provider Gender: Female

License Number: 20A15068

NPI: 1073909651

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LEE, SANDRINE

Provider ID: 206362

Provider Gender: Female

License Number: 20A15068

NPI: 1073909651

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER






FAMILY PRACTICE

LINDEMAN, KURTIS

Provider ID: 403583

Provider Gender: Male
 License Number: A104052
 NPI: 1124155791
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR

Board Certified Specialty: No






 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
 233-8500
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

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

FAMILY PRACTICE

LINDEMAN, KURTIS

Provider ID: 403583
 Provider Gender: Male
 License Number: A104052
 NPI: 1124155791
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Board Certified Specialty: No

 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
 233-8500
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LISH, JONATHAN

Provider ID: 206360
 Provider Gender: Male
 License Number: A177373
 NPI: 1811459456






Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE





LISH, JONATHAN

Provider ID: 206360
 Provider Gender: Male
 License Number: A177373

NPI: 1811459456
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

LIU, JIE

Provider ID: 206362
 Provider Gender: Female
 License Number: A147758
 NPI: 1780066472
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Chinese, Mandarin,
 Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

LIU, JIE

Provider ID: 206362

Provider Gender: Female

License Number: A147758

NPI: 1780066472

Provider English Spoken: Y

Provider Language(s) Spoken: Chinese, Mandarin, Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

 *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: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

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

 *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: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

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

 *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: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

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

 *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: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

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

 *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: Y
 Min/Max Age: 0\150
 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






 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: Y
 Min/Max Age: 0\150
 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

 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MATICH, BRANKO

Provider ID: 482070
 Provider Gender: Male
 License Number: C174985
 NPI: 1023437704
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150
 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 9:00AM-4:00PM

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

 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: Y
 Min/Max Age: 0\150
 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
 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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
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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
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 SAN DIEGO, CA 92111
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 279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
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Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE


MATICH, BRANKO

Provider ID: 482070
Provider Gender: Male
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NPI: 1023437704
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Cultural Competency: N
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 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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 9:00AM-4:00PM

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
 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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

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
 3705 MISSION BLVD
 SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
 515-2444
 Website: www.fhcsd.org
 Email: sabay@fhcsd.org

Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM

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
 3705 MISSION BLVD
 SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
 515-2444
 Website: www.fhcsd.org
 Email: sabay@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-W 8:30AM-5:30PM
 TH 9:00AM-6:00PM
 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
 3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: <https://www.syhe.alth.org/locations>
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):






N
 Accessibility: CONTACT
 PROVIDER

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
 3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: <https://www.syhe.alth.org/locations>
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

 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: Y
 Min/Max Age: 0\120
 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
 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: Y
 Min/Max Age: 0\120
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

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
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

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
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 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
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
 233-8500
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 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
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
 233-8500
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:30AM-5:00PM
 SA 8:30AM-5:00PM

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

 9855 ERMA RD STE 105

SAN DIEGO, CA 92131

 Phone: (844) 200-2426

 After Hours Phone: (844) 200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

SA 8:30AM-5:00PM

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

 316 25TH ST

SAN DIEGO, CA 92102

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\120

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

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

 316 25TH ST

SAN DIEGO, CA 92102

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\120

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

PALOMINO, VERONICA


Provider ID: 419529

Provider Gender: Female

License Number: A121451

NPI: 1255569083

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

 After Hours Phone: (619) 515-2422

 Website: www.fhcsd.org


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PALOMINO, VERONICA

Provider ID: 419529

Provider Gender: Female

License Number: A121451

NPI: 1255569083

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

 After Hours Phone: (619) 515-2422

515-2422

 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


PALOMINO, VERONICA

Provider ID: 206360

Provider Gender: Female

License Number: A121451

NPI: 1255569083


 Provider English Spoken: Y


 Provider Language(s)
 Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619)
 515-2300

 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


PALOMINO, VERONICA

Provider ID: 206360

Provider Gender: Female

License Number: A121451

NPI: 1255569083


 Provider English Spoken: Y


 Provider Language(s)
 Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619)
 515-2300

 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

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

 4725 MARKET ST
 SAN DIEGO, CA 92102

 Phone: (619) 515-2560


 After Hours Phone: (619)
 515-2560

 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

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

 4725 MARKET ST
 SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
 515-2560

 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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


 1809 NATIONAL AVE
 SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
 515-2300

 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

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

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
 515-2300

 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
 233-8500

 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

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

 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
 233-8500

 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

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

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

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

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

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
 515-2300

 Website: www.fhcsd.org





Email: dalvarado@fhcsd.org


Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:00AM-7:00PM
 TU-TH 8:00AM-6:00PM
 F 8:00AM-5:30PM
 SA 8:00AM-5:00PM

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


 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

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

Hours: M 8:00AM-7:00PM
 TU-TH 8:00AM-6:00PM
 F 8:00AM-5:30PM
 SA 8:00AM-5:00PM


FAMILY PRACTICE
RITTER, STEVEN

Provider ID: 451167
 Provider Gender: Male
 License Number: 20A7435
 NPI: 1356556021
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150

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

FAMILY PRACTICE
RITTER, STEVEN

Provider ID: 451167
 Provider Gender: Male
 License Number: 20A7435
 NPI: 1356556021
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: [https://www.syhe
 alth.org/locations](https://www.syhealth.org/locations)
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

ROSADO, IVAN

Provider ID: 517403
 Provider Gender: Male
 License Number: A169434
 NPI: 1316479603
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 316 25TH ST
 SAN DIEGO, CA 92102
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\120
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

ROSADO, IVAN

Provider ID: 517403
 Provider Gender: Male
 License Number: A169434
 NPI: 1316479603
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 316 25TH ST
 SAN DIEGO, CA 92102
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\120
 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
 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

Email:
aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-6:00PM
 SA 8:00AM-2:00PM

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
 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
 Email:
aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-6:00PM
 SA 8:00AM-2:00PM

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

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

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: Y

Min/Max Age: 0\22

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

SA 8:00AM-2:00PM

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
 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: Y
 Min/Max Age: 0\22
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-2:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-2:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-2:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE


SHUMILAK, KAILI


Provider ID: 418142

Provider Gender: Female

License Number: 20A12796

NPI: 1831489855


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

 Phone: (619) 515-2454

 After Hours Phone: (619)
515-2454

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


SHUMILAK, KAILI


Provider ID: 418142

Provider Gender: Female

License Number: 20A12796

NPI: 1831489855


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

 Phone: (619) 515-2454

 After Hours Phone: (619)
515-2454

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


SMOOT, CHARLES

Provider ID: 206360

Provider Gender: Male

License Number: A97036

NPI: 1245490358


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

FAMILY PRACTICE


SMOOT, CHARLES

Provider ID: 206360

Provider Gender: Male

License Number: A97036

NPI: 1245490358


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

FAMILY PRACTICE


SMOOT, CHARLES


Provider ID: 356145

Provider Gender: Male

License Number: A97036

NPI: 1245490358


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 2391 ISLAND AVE
SAN DIEGO, CA 92102

 Phone: (619) 515-2435

 After Hours Phone: (619)
515-2435

 Website: N/A


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

SMOOT, CHARLES


Provider ID: 356145

Provider Gender: Male

License Number: A97036

NPI: 1245490358


 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Board Certified Specialty: No

 2391 ISLAND AVE
SAN DIEGO, CA 92102

 *Phone: (619) 515-2435*

 *After Hours Phone: (619) 515-2435*

 *Website: N/A*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


SNYDER, CHRISTOPHER

Provider ID: 517998

Provider Gender: Male

License Number: 20A7502

NPI: 1922041235

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: PIH


Hospital - Downey, JOHN F


KENNEDY MEMORIAL HOSP,

CEDARS SINAI MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, EISENHOWER MEDICAL CTR, GROSSMONT HOSPITAL

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\120

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

SNYDER, CHRISTOPHER

Provider ID: 517998

Provider Gender: Male

License Number: 20A7502

NPI: 1922041235

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: PIH


Hospital - Downey, JOHN F

KENNEDY MEMORIAL HOSP,


CEDARS SINAI MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, EISENHOWER MEDICAL CTR, GROSSMONT HOSPITAL

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\120

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


SOPHY, ELIZABETH

Provider ID: 403583

Provider Gender: Female

License Number: A157547

NPI: 1013441203

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 *Phone: (619) 233-8500*

 *After Hours Phone: (619) 233-8500*

 *Website: N/A*

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE

SOPHY, ELIZABETH

Provider ID: 403583

Provider Gender: Female
 License Number: A157547
 NPI: 1013441203
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA
 Board Certified Specialty: No
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
 233-8500
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-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
 1016 OUTER RD

SAN DIEGO, CA 92154
 Phone: (619) 429-3733
 After Hours Phone: (619)
 429-3733
 Website: www.ibclinic.org
 Email: avaldez@ibclinic.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

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
 1016 OUTER RD
 SAN DIEGO, CA 92154
 Phone: (619) 429-3733
 After Hours Phone: (619)
 429-3733
 Website: www.ibclinic.org
 Email: avaldez@ibclinic.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
 233-8500
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

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

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619)
233-8500
Website: N/A
Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

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

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619)
515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

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

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619)
515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

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

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

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

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


TOWNSEND, LAURIE

Provider ID: 206363

Provider Gender: Female

License Number: C174538

NPI: 1053754333


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


TOWNSEND, LAURIE

Provider ID: 206363

Provider Gender: Female

License Number: C174538

NPI: 1053754333


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TRAN, TONNIA


Provider ID: 233597

Provider Gender: Female

License Number: 20A7662

NPI: 1982746657


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TRAN, TONNIA

Provider ID: 233597

Provider Gender: Female

License Number: 20A7662

NPI: 1982746657

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Vietnamese
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

TRUONG, NHA

Provider ID: 417937
 Provider Gender: Female
 License Number: 20A17836
 NPI: 1760975833
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Vietnamese
 Cultural Competency: N
 Board Certified Specialty: No
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2400
 After Hours Phone: (619)
 515-2400
 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT

PROVIDER






FAMILY PRACTICE

TRUONG, NHA

Provider ID: 417937
 Provider Gender: Female
 License Number: 20A17836
 NPI: 1760975833
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Vietnamese
 Cultural Competency: N
 Board Certified Specialty: No
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2400
 After Hours Phone: (619)
 515-2400
 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

TSUCHIYA, KIMIKO

Provider ID: 417782
 Provider Gender: Female
 License Number: 20A19610
 NPI: 1629637285
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101
 Phone: (619) 515-2430
 After Hours Phone: (619)
 515-2430
 Website: www.fhcsd.org

Email: jinah@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM



FAMILY PRACTICE

TSUCHIYA, KIMIKO

Provider ID: 417782
 Provider Gender: Female
 License Number: 20A19610
 NPI: 1629637285
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101
 Phone: (619) 515-2430
 After Hours Phone: (619)
 515-2430
 Website: www.fhcsd.org
 Email: jinah@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

VALENZUELA, TRICIA

Provider ID: 206363
 Provider Gender: Female
 License Number: A161373
 NPI: 1346776358
 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

VALENZUELA, TRICIA

Provider ID: 206363
 Provider Gender: Female
 License Number: A161373
 NPI: 1346776358
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

WANG, REGINA

Provider ID: 403583
 Provider Gender: Female
 License Number: A109828
 NPI: 1154554871
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: LONG BEACH MEMORIAL MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
 Board Certified Specialty: No
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619) 233-8500
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE

WANG, REGINA

Provider ID: 403583
 Provider Gender: Female
 License Number: A109828
 NPI: 1154554871
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: LONG BEACH MEMORIAL MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY

THORNTON

Board Certified Specialty: No
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619) 233-8500
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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

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: Y

Min/Max Age: 0\150

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

1501 IMPERIAL AVE

SAN DIEGO, CA 92101

Phone: (619) 233-8500

After Hours Phone: (619) 233-8500

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

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

1501 IMPERIAL AVE

SAN DIEGO, CA 92101

Phone: (619) 233-8500

After Hours Phone: (619) 233-8500

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

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

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

4094 4TH AVE

SAN DIEGO, CA 92103





Phone: (619) 515-2545

After Hours Phone: (619)

515-2545
 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

FQHC




DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC,

Provider ID: 206363
 NPI: 1982747671
 Provider English Spoken: Y
 Cultural Competency: N
 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
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

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

FQHC


DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC,

Provider ID: 206363
 NPI: 1982747671
 Provider English Spoken: Y
 Cultural Competency: N
 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
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER







FQHC

DOWNTOWN FAMILY CTR AT CONNECTIONS,

Provider ID: 417782
 NPI: 1588901045
 Provider English Spoken: Y
 Cultural Competency: N
 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
 Email: jinah@fhcsd.org




Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

FQHC
DOWNTOWN FAMILY CTR AT CONNECTIONS,

Provider ID: 417782
 NPI: 1588901045
 Provider English Spoken: Y
 Cultural Competency: N
 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
 Email: jinah@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

FQHC
FAMILY HEALTH CTR IBARRA,

Provider ID: 417987
 NPI: 1477953933
 Provider English Spoken: Y
 Cultural Competency: N
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

FQHC
FAMILY HEALTH CTR IBARRA,







Provider ID: 417987
 NPI: 1477953933
 Provider English Spoken: Y
 Cultural Competency: N
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

FQHC
FAMILY HEALTH CTR OF SD-ELM ST,

Provider ID: 419167
 NPI: 1316419070
 Provider English Spoken: Y
 Cultural Competency: N
 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
 Email: jinah@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

FQHC
FAMILY HEALTH CTR OF SD-ELM ST,

Provider ID: 419167
 NPI: 1316419070
 Provider English Spoken: Y
 Cultural Competency: N
 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
 Email: jinah@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

FQHC
FAMILY HEALTH CTR SAN DIEGO-OAK PARK,

Provider ID: 664747
 NPI: 1336525906






 Provider English Spoken: Y
Cultural Competency: N
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC

**FAMILY HEALTH CTR SAN
DIEGO-OAK PARK,**

Provider ID: 418142

NPI: 1336525906



 Provider English Spoken: Y
Cultural Competency: N
 5160 FEDERAL BLVD
SAN DIEGO, CA 92105
 Phone: (619) 515-2454
Fax: (619) 794-2696
 After Hours Phone: (619)
515-2454
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC

**FAMILY HEALTH CTR SAN
DIEGO-OAK PARK,**

Provider ID: 418142

NPI: 1336525906







 Provider English Spoken: Y
Cultural Competency: N
 5160 FEDERAL BLVD
SAN DIEGO, CA 92105
 Phone: (619) 515-2454
Fax: (619) 794-2696
 After Hours Phone: (619)
515-2454
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC

**FAMILY HEALTH CTR SAN
DIEGO-OAK PARK,**

Provider ID: 664747

NPI: 1336525906

 Provider English Spoken: Y
Cultural Competency: N
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC

**FAMILY HLTH CTR OF SD SAN
DIEGO COMMERCIAL,**

Provider ID: 419529

NPI: 1235521782

 Provider English Spoken: Y
Cultural Competency: N
 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
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM


FQHC

**FAMILY HLTH CTR OF SD SAN
DIEGO COMMERCIAL,**

Provider ID: 419529


NPI: 1235521782

 Provider English Spoken: Y
Cultural Competency: N
 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
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):


N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

FQHC
FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE,
Provider ID: 417429


NPI: 1952729303
 *Provider English Spoken: Y*
Cultural Competency: N
 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*
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):

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





FQHC
FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE,
Provider ID: 417429

NPI: 1952729303
 *Provider English Spoken: Y*
Cultural Competency: N
 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*


Email: janeta@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):

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


FQHC
FAMILY HLTH CTR SAN DIEGO-BEACH AREA,
Provider ID: 402851

NPI: 1386689701
 *Provider English Spoken: Y*
Cultural Competency: N
 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*
Email: sabay@fhcsd.org


Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM

FQHC
FAMILY HLTH CTR SAN DIEGO-BEACH AREA,
Provider ID: 402851


NPI: 1386689701
 *Provider English Spoken: Y*
Cultural Competency: N

 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*
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM

FQHC
FAMILY HLTH CTR SD HILLCREST,
Provider ID: 417937

NPI: 1629456900
 *Provider English Spoken: Y*
Cultural Competency: N
 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*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FQHC

FAMILY HLTH CTR SD

HILLCREST,

Provider ID: 417937

NPI: 1629456900

☐ Provider English Spoken: Y
Cultural Competency: N

📍 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

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

FQHC

KING CHAVEZ HEALTH

CENTER,

Provider ID: 451167

NPI: 1538262092

☐ Provider English Spoken: Y
Cultural Competency: N

📍 950 S EUCLID AVE
SAN DIEGO, CA 92114

☎ Phone: (619) 662-4100

Fax: (619) 205-1952

🕒 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org
/clinics/king- chavez- healt
h- center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

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

SA 8:00AM-4:00PM

FQHC

KING CHAVEZ HEALTH

CENTER,

Provider ID: 451167

NPI: 1538262092

☐ Provider English Spoken: Y
Cultural Competency: N

📍 950 S EUCLID AVE
SAN DIEGO, CA 92114

☎ Phone: (619) 662-4100

Fax: (619) 205-1952

🕒 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org
/clinics/king- chavez- healt
h- center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

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

SA 8:00AM-4:00PM

FQHC

LA MAESTRA FAMILY CLINIC

INC,

Provider ID: 185268

NPI: 1336353721

☐ Provider English Spoken: Y
Cultural Competency: N

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

☎ Phone: (619) 280-4213

Fax: (619) 795-9849

🕒 After Hours Phone: (619)
280-4213

🌐 Website: www.lamaestra.or
g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

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

FQHC

LA MAESTRA FAMILY CLINIC

INC,

Provider ID: 185268

NPI: 1336353721

☐ Provider English Spoken: Y
Cultural Competency: N

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

☎ Phone: (619) 280-4213

Fax: (619) 795-9849

🕒 After Hours Phone: (619)
280-4213

🌐 Website: www.lamaestra.or
g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

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

FQHC

**LINDA VISTA HEALTH CARE
CTR,**

Provider ID: 206046

NPI: 1780665877

☐ Provider English Spoken: Y
Cultural Competency: N

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

🕒 After Hours Phone: (858)
279-0925

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

FQHC

**LINDA VISTA HEALTH CARE
CTR,**

Provider ID: 206046

NPI: 1609905215

☐ Provider English Spoken: Y
Cultural Competency: N

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

🕒 After Hours Phone: (858)
279-0925

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER

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

FQHC

**LINDA VISTA HEALTH CARE
CTR,**

Provider ID: 206046

NPI: 1780665877

☐ Provider English Spoken: Y
Cultural Competency: N

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

🕒 After Hours Phone: (858)
279-0925

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

FQHC

**LINDA VISTA HEALTH CARE
CTR,**

Provider ID: 206046

NPI: 1609905215

☐ Provider English Spoken: Y
Cultural Competency: N

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

🕒 After Hours Phone: (858)
279-0925

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

FQHC

**LOGAN HEIGHTS FAMILY
HEALTH CENTER,**

Provider ID: 624977

NPI: 1447281936

☐ Provider English Spoken: Y
Cultural Competency: N

📍 2204 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2355

Fax: (619) 232-7011

🕒 After Hours Phone: (619)
515-2355

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FQHC

**LOGAN HEIGHTS FAMILY
HEALTH CENTER,**

Provider ID: 624977

NPI: 1447281936

☐ Provider English Spoken: Y
Cultural Competency: N


📍 2204 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2355

Fax: (619) 232-7011

🕒 After Hours Phone: (619)
515-2355





🌐 Website: www.fhcsd.org



Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

FQHC
LOGAN HEIGHTS FAMILY HEALTH CENTER,



Provider ID: 206360
 NPI: 1447281936
 Provider English Spoken: Y
 Cultural Competency: N
 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
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

FQHC
LOGAN HEIGHTS FAMILY HEALTH CENTER,



Provider ID: 206360
 NPI: 1447281936
 Provider English Spoken: Y
 Cultural Competency: N
 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
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

FQHC
MID-CITY COMMUNITY CLINIC,







Provider ID: 233532
 NPI: 1962483040
 Provider English Spoken: Y
 Cultural Competency: N
 4305 UNIVERSITY AVE STE 150
 SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 Fax: (858) 633-4682
 After Hours Phone: (619) 280-2058
 Website: www.sdfamilycare.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\22
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-2:00PM

FQHC
MID-CITY COMMUNITY CLINIC,

Provider ID: 233597
 NPI: 1962483040
 Provider English Spoken: Y
 Cultural Competency: N
 4290 POLK AVE
 SAN DIEGO, CA 92105

 Phone: (619) 563-0250
 Fax: (858) 633-4681
 After Hours Phone: (619) 563-0250
 Website: www.sdfamilycare.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-2:00PM

FQHC
MID-CITY COMMUNITY CLINIC,

Provider ID: 233532
 NPI: 1962483040
 Provider English Spoken: Y
 Cultural Competency: N
 4305 UNIVERSITY AVE STE 150
 SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 Fax: (858) 633-4682
 After Hours Phone: (619) 280-2058
 Website: www.sdfamilycare.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\22
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-2:00PM

FQHC
MID-CITY COMMUNITY CLINIC,

Provider ID: 233597

NPI: 1962483040

☐ Provider English Spoken: Y
Cultural Competency: N

📍 4290 POLK AVE
SAN DIEGO, CA 92105

☎ Phone: (619) 563-0250

Fax: (858) 633-4681

🕒 After Hours Phone: (619)
563-0250

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

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

SA 8:00AM-2:00PM

FQHC

NESTOR COMMUNITY HEALTH CENTER,

Provider ID: 214492

NPI: 1215246996

☐ Provider English Spoken: Y
Cultural Competency: N

📍 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
Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:00PM

TU-TH 8:30AM-8:00PM

F 8:30AM-5:00PM

FQHC

NESTOR COMMUNITY HEALTH CENTER,

Provider ID: 214492

NPI: 1215246996

☐ Provider English Spoken: Y
Cultural Competency: N

📍 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
Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:00PM

TU-TH 8:30AM-8:00PM

F 8:30AM-5:00PM

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 416831

NPI: 1700821303

☐ Provider English Spoken: Y
Cultural Competency: N

📍 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

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:00PM

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 206362

NPI: 1700821303

☐ Provider English Spoken: Y
Cultural Competency: N

📍 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 206362

NPI: 1700821303

☐ Provider English Spoken: Y
Cultural Competency: N

📍 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: Y

Min/Max Age: 0\150

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

📍 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

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM

FQHC

OPERATION SAMAHAN - MIRA MESA,

Provider ID: 417101

NPI: 1871680397

☑ Provider English Spoken: Y
Cultural Competency: N

📍 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-4:30PM

FQHC

OPERATION SAMAHAN - MIRA MESA,

Provider ID: 432308

NPI: 1861933897

☑ Provider English Spoken: Y
Cultural Competency: N

📍 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: Y

Min/Max Age: 0\999

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

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

FQHC

OPERATION SAMAHAN - MIRA MESA,

Provider ID: 417101

NPI: 1871680397

☑ Provider English Spoken: Y
Cultural Competency: N

📍 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-4:30PM

FQHC

**OPERATION SAMAHAN
RANCHO PENASQUITOS,**

Provider ID: 418535

NPI: 1699216622

☐ Provider English Spoken: Y
Cultural Competency: N

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

☎ Phone: (844) 200-2426

Fax: (858) 695-9074

🕒 After Hours Phone: (844)
200-2426

🌐 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

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

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

FQHC

**OPERATION SAMAHAN
RANCHO PENASQUITOS,**

Provider ID: 418535

NPI: 1699216622

☐ Provider English Spoken: Y
Cultural Competency: N

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

☎ Phone: (844) 200-2426

Fax: (858) 695-9074

🕒 After Hours Phone: (844)
200-2426

🌐 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

mahan.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

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

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

FQHC

**SAN DIEGO AMERICAN INDIAN
HEALTH CENTER,**

Provider ID: 207382

NPI: 1003902917

☐ Provider English Spoken: Y
Cultural Competency: N

📍 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

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

FQHC

**SAN DIEGO AMERICAN INDIAN
HEALTH CENTER,**

Provider ID: 207382

NPI: 1003902917

☐ Provider English Spoken: Y
Cultural Competency: N

📍 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

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

FQHC

SAN DIEGO FAMILY CARE,

Provider ID: 482070

NPI: 1457724858

☐ Provider English Spoken: Y
Cultural Competency: N

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700

Fax: (858) 633-4680

🕒 After Hours Phone: (858)
810-8700

🌐 Website: [www.sdfamilycare
.org](http://www.sdfamilycare
.org)

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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 9:00AM-4:00PM

FQHC

SAN DIEGO FAMILY CARE,

Provider ID: 482070

NPI: 1457724858

☐ Provider English Spoken: Y
Cultural Competency: N

📍 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: Y

Min/Max Age: 0\150

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 9:00AM-4:00PM

FQHC

**SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE,**

Provider ID: 517403

NPI: 1598308926

☐ Provider English Spoken: Y
Cultural Competency: N

📍 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: Y

Min/Max Age: 0\120

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

FQHC

**SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE,**

Provider ID: 517403

NPI: 1598308926

☐ Provider English Spoken: Y
Cultural Competency: N

📍 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: Y

Min/Max Age: 0\120

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

FQHC

**SAN YSIDRO HEALTH CHC -
OCEAN VIEW,**

Provider ID: 227409

NPI: 1326225632

☐ Provider English Spoken: Y
Cultural Competency: N

📍 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

FQHC

**SAN YSIDRO HEALTH CHC -
OCEAN VIEW,**

Provider ID: 227409

NPI: 1326225632

☐ Provider English Spoken: Y
Cultural Competency: N

📍 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

FQHC

**SAN YSIDRO HEALTH
COMMUNITY HEIGHTS FAMILY
MED,**

Provider ID: 517998

NPI: 1205477841







☐ Provider English Spoken: Y
Cultural Competency: N

📍 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: Y
 Min/Max Age: 0\120
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

FQHC
SAN YSIDRO HEALTH
COMMUNITY HEIGHTS FAMILY
MED,





Provider ID: 517998
 NPI: 1205477841
 Provider English Spoken: Y
 Cultural Competency: N
 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: Y
 Min/Max Age: 0\120
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

FQHC
SHERMAN HEIGHTS FAMILY
HLTH CTRS INC,







Provider ID: 356145
 NPI: 1174549232
 Provider English Spoken: Y

Cultural Competency: N
 2391 ISLAND AVE
 SAN DIEGO, CA 92102
 Phone: (619) 515-2435
 Fax: (619) 515-2435
 After Hours Phone: (619) 515-2435
 Website: N/A
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER







FQHC
SHERMAN HEIGHTS FAMILY
HLTH CTRS INC,

Provider ID: 356145
 NPI: 1174549232
 Provider English Spoken: Y
 Cultural Competency: N
 2391 ISLAND AVE
 SAN DIEGO, CA 92102
 Phone: (619) 515-2435
 Fax: (619) 515-2435
 After Hours Phone: (619) 515-2435
 Website: N/A
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FQHC
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER,
 Provider ID: 403583

NPI: 1598122871
 Provider English Spoken: Y
 Cultural Competency: N
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:30PM

FQHC
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER,


Provider ID: 403583
 NPI: 1598122871
 Provider English Spoken: Y
 Cultural Competency: N
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-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

 4094 4TH AVE
 SAN DIEGO, CA 92103

 Phone: (619) 515-2545


 After Hours Phone: (619)
 515-2545

 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

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

 4094 4TH AVE
 SAN DIEGO, CA 92103

 Phone: (619) 515-2545


 After Hours Phone: (619)
 515-2545

 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

GASTROENTEROLOGY

HAI, FAIZI

Provider ID: 417937

Provider Gender: Male


License Number: A159324


NPI: 1639523228


Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
 SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
 515-2545

 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT

PROVIDER

Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

GASTROENTEROLOGY

HAI, FAIZI

Provider ID: 417937

Provider Gender: Male


License Number: A159324


NPI: 1639523228


Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
 SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
 515-2545

 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

GENERAL PRACTICE

BORRERO, MARCOS

Provider ID: 100677

Provider Gender: Male

NPI: 1952312621

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

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

3490 PALM AVE
SAN DIEGO, CA 92154

Phone: (619) 423-5616

Fax: (619) 423-5684

After Hours Phone: (619)
423-5616

Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 2\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

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

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: Y

Min/Max Age: 0\22

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

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: Y

Min/Max Age: 0\22
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

HEPATOLOGY

GISH, ROBERT

Provider ID: 185268
 Provider Gender: Male
 License Number: G45632
 NPI: 1548281322

Provider English Spoken: Y
 Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese

Cultural Competency: N
 Hospital Affiliation: LOMA LINDA UNIVERSITY COMM MED CTR

Board Certified Specialty: No
 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619) 255-9155

Website: www.lamaestra.org

Email: aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

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

HEPATOLOGY

GISH, ROBERT

Provider ID: 185268
 Provider Gender: Male

License Number: G45632
 NPI: 1548281322
 Provider English Spoken: Y
 Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
 Cultural Competency: N
 Hospital Affiliation: LOMA LINDA UNIVERSITY COMM MED CTR

Board Certified Specialty: No

4060 FAIRMOUNT AVE SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619) 255-9155

Website: www.lamaestra.org

Email: aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

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
 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113
 Phone: (619) 515-2422

After Hours Phone: (619) 515-2422

Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

1809 NATIONAL AVE SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 2325 COMMERCIAL ST STE
 1400
 SAN DIEGO, CA 92113
 Phone: (619) 515-2422
 After Hours Phone: (619)
 515-2422
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
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 SAN DIEGO, CA 92113
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 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER

INTERNAL MEDICINE



ALDOUS, JEANNETTE

Provider ID: 451167
 Provider Gender: Female
 License Number: A101017
 NPI: 1073650339
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR
 Board Certified Specialty: No

 950 S EUCLID AVE
 SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: www.syhealth.org
 /clinics/king- chavez- healt
 h- center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

INTERNAL MEDICINE








ALDOUS, JEANNETTE

Provider ID: 451167
 Provider Gender: Female
 License Number: A101017
 NPI: 1073650339
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N

Hospital Affiliation: UCSD
 MEDICAL CTR
 Board Certified Specialty: No
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 /clinics/king- chavez- healt
 h- center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

INTERNAL MEDICINE

ANDREWS, JOHN

Provider ID: 403583
 Provider Gender: Male
 License Number: G71080
 NPI: 1003164302
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
 233-8500
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

ANDREWS, JOHN

Provider ID: 403583

Provider Gender: Male

License Number: G71080

NPI: 1003164302


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

INTERNAL MEDICINE

BOHR, CHRISTINA

Provider ID: 417937

Provider Gender: Female

License Number: 20A17702


NPI: 1841794344


Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

BOHR, CHRISTINA

Provider ID: 417937

Provider Gender: Female

License Number: 20A17702


NPI: 1841794344


Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

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Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

BRIONES COLMAN, FELICIA

Provider ID: 417937

Provider Gender: Female

License Number: A80153


NPI: 1962517367

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org


Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

BRIONES COLMAN, FELICIA

Provider ID: 417937

Provider Gender: Female

License Number: A80153

NPI: 1962517367


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

CHAN, ANDY

Provider ID: 417937

Provider Gender: Male

License Number: 20A20352


NPI: 1104480912

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545


 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

CHAN, ANDY

Provider ID: 417937

Provider Gender: Male

License Number: 20A20352


NPI: 1104480912

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Provider Language(s)
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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

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

 950 S EUCLID AVE

SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
/clinics/king- chavez- healt
h- center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

SA 8:00AM-4:00PM

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

 950 S EUCLID AVE

SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
/clinics/king- chavez- healt
h- center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

SA 8:00AM-4:00PM

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

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

☎ After Hours Phone: (619) 515-2300
 🌐 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 📍 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
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 ☎ After Hours Phone: (619) 515-2300
 🌐 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

DAHMS, ERIC

Provider ID: 417937
 Provider Gender: Male
 License Number: G80316
 NPI: 1306808464
 Provider English Spoken: Y

Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
 Board Certified Specialty: No
 📍 4094 4TH AVE
 SAN DIEGO, CA 92103
 📞 Phone: (619) 515-2545
 ☎ After Hours Phone: (619) 515-2545
 🌐 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

DAHMS, ERIC

Provider ID: 417937
 Provider Gender: Male
 License Number: G80316
 NPI: 1306808464
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
 Board Certified Specialty: No
 📍 4094 4TH AVE
 SAN DIEGO, CA 92103
 📞 Phone: (619) 515-2545
 ☎ After Hours Phone: (619) 515-2545
 🌐 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 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
 Board Certified Specialty: No
 📍 4094 4TH AVE
 SAN DIEGO, CA 92103
 📞 Phone: (619) 515-2545
 ☎ After Hours Phone: (619) 515-2545
 🌐 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

INTERNAL MEDICINE

DIEP, KEVIN

Provider ID: 417937
 Provider Gender: Male
 License Number: 20A17657
 NPI: 1083117865
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 📍 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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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

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
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

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
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

INTERNAL MEDICINE

DOMINGUEZ, FERNANDO

Provider ID: 417937
 Provider Gender: Male
 License Number: A154708
 NPI: 1972917672
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)

515-2545
 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

INTERNAL MEDICINE

DOMINGUEZ, FERNANDO

Provider ID: 417937
 Provider Gender: Male
 License Number: A154708
 NPI: 1972917672
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 4094 4TH AVE
 SAN DIEGO, CA 92103
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 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

INTERNAL MEDICINE

FARASAT, SADAF

Provider ID: 206360
 Provider Gender: Female
 License Number: A147939
 NPI: 1255696407

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Hindi, Punjabi,
 Urdu

Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL, UCSD
 LA JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR, NATIVIDAD MEDICAL
 CENTER, PALOMAR MEDICAL
 CENTER

Board Certified Specialty: No
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

INTERNAL MEDICINE

FARASAT, SADAF

Provider ID: 206360
 Provider Gender: Female
 License Number: A147939
 NPI: 1255696407

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Hindi, Punjabi,
 Urdu

Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL, UCSD
 LA JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR, NATIVIDAD MEDICAL
 CENTER, PALOMAR MEDICAL
 CENTER

Board Certified Specialty: No
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 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

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
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-2:00PM







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

 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-2:00PM

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
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101
 Phone: (619) 515-2430
 After Hours Phone: (619) 515-2430
 Website: www.fhcsd.org
 Email: jinah@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101
 Phone: (619) 515-2430
 After Hours Phone: (619) 515-2430
 Website: www.fhcsd.org
 Email: jinah@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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

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
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

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
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Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

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

 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

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

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

 4094 4TH AVE
SAN DIEGO, CA 92103

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Fax: (619) 501-9645

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

JEONG, MATTHEW

Provider ID: 417782

Provider Gender: Male


License Number: A190535


NPI: 1558982512


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1250 6TH AVE STE 100
SAN DIEGO, CA 92101

 Phone: (619) 515-2430

 After Hours Phone: (619)
515-2430

 Website: www.fhcsd.org

Email: jinah@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

INTERNAL MEDICINE

JEONG, MATTHEW

Provider ID: 417782

Provider Gender: Male


License Number: A190535


NPI: 1558982512

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1250 6TH AVE STE 100
SAN DIEGO, CA 92101

 Phone: (619) 515-2430

 After Hours Phone: (619)
515-2430


 Website: www.fhcsd.org

Email: jinah@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

INTERNAL MEDICINE

KRIJGER, LISA

Provider ID: 403583

Provider Gender: Female

License Number: A67762

NPI: 1932278710

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500
 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

INTERNAL MEDICINE

KRIJGER, LISA

Provider ID: 403583

Provider Gender: Female

License Number: A67762

NPI: 1932278710

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No


 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

INTERNAL MEDICINE

LALITHAKUMARI, ARYA

Provider ID: 206362

Provider Gender: Female

License Number: A140646

NPI: 1265874010

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Hemet


Global Medical Center, Menifee

Global Medical Center

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 451167

Provider Gender: Female

License Number: G71855

NPI: 1124176102


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 451167

Provider Gender: Female

License Number: G71855

NPI: 1124176102

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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: Y
Min/Max Age: 0\150
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

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
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Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

LU, STEPHANIE

Provider ID: 206362
Provider Gender: Female
License Number: 20A20252
NPI: 1518524586
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No

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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

LU, STEPHANIE

Provider ID: 206362
Provider Gender: Female
License Number: 20A20252
NPI: 1518524586
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
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: Y
Min/Max Age: 0\150
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
1809 NATIONAL AVE

SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
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 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

NARANJO, RODRIGO

Provider ID: 482070
 Provider Gender: Male
 License Number: A119010

NPI: 1609095264
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 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
 📍 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

NARANJO, RODRIGO

Provider ID: 482070
 Provider Gender: Male
 License Number: A119010
 NPI: 1609095264

☐ Provider English Spoken: Y
 ☐ Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

NARAYANAN, MEENA

Provider ID: 206363
 Provider Gender: Female
 License Number: A113448
 NPI: 1508170697
 ☐ Provider English Spoken: Y
 ☐ Provider Language(s) Spoken: Farsi, Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, Adventist Health and Rideout
 Board Certified Specialty: No
 📍 4725 MARKET ST
 SAN DIEGO, CA 92102
 ☎ Phone: (619) 515-2560
 ☎ After Hours Phone: (619) 515-2560
 🌐 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

NARAYANAN, MEENA

Provider ID: 206363
 Provider Gender: Female
 License Number: A113448
 NPI: 1508170697
 ☐ Provider English Spoken: Y
 ☐ Provider Language(s) Spoken: Farsi, Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, Adventist Health and Rideout
 Board Certified Specialty: No
 📍 4725 MARKET ST
 SAN DIEGO, CA 92102
 ☎ Phone: (619) 515-2560
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 🌐 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 📍 4725 MARKET ST
 SAN DIEGO, CA 92102
 📞 Phone: (619) 515-2560
 🕒 After Hours Phone: (619)
 515-2560
 🌐 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 📍 4725 MARKET ST
 SAN DIEGO, CA 92102

📞 Phone: (619) 515-2560
 🕒 After Hours Phone: (619)
 515-2560
 🌐 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER

INTERNAL MEDICINE

RAMERS, CHRISTIAN

Provider ID: 417937
 Provider Gender: Male
 License Number: A119631
 NPI: 1730381385
 ☐ Provider English Spoken: Y
 ☐ Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 📍 4094 4TH AVE
 SAN DIEGO, CA 92103
 📞 Phone: (619) 515-2545
 🕒 After Hours Phone: (619)
 515-2545
 🌐 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER

INTERNAL MEDICINE

RAMERS, CHRISTIAN

Provider ID: 417937
 Provider Gender: Male
 License Number: A119631


NPI: 1730381385
 ☐ Provider English Spoken: Y
 ☐ Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 📍 4094 4TH AVE
 SAN DIEGO, CA 92103
 📞 Phone: (619) 515-2545
 🕒 After Hours Phone: (619)
 515-2545
 🌐 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER

INTERNAL MEDICINE

ROUEL, WADI



Provider ID: 185268
 Provider Gender: Male
 License Number: C55979
 NPI: 1740254713
 ☐ Provider English Spoken: Y
 ☐ Provider Language(s)
 Spoken: Arabic, Spanish,
 Syriac
 Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL,
 SCRIPPS MEMORIAL
 HOSPITAL, GROSSMONT
 HOSPITAL
 Board Certified Specialty: No
 📍 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 📞 Phone: (619) 255-9155
 🕒 After Hours Phone: (619)
 255-9155

 Website: www.lamaestra.org
 Email: aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):


N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-6:00PM
 SA 8:00AM-2:00PM


INTERNAL MEDICINE

ROUEL, WADI

Provider ID: 185268
 Provider Gender: Male
 License Number: C55979
 NPI: 1740254713
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, Spanish, Syriac
 Cultural Competency: N
 Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL


Board Certified Specialty: No
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619) 255-9155





 Website: www.lamaestra.org
 Email: aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150


American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-6:00PM
 SA 8:00AM-2:00PM

INTERNAL MEDICINE

SASSIC, JESSICA


Provider ID: 417937
 Provider Gender: Female
 License Number: A185024
 NPI: 1598342529
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No





 4094 4TH AVE
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

INTERNAL MEDICINE


SASSIC, JESSICA




Provider ID: 417937
 Provider Gender: Female
 License Number: A185024
 NPI: 1598342529
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

INTERNAL MEDICINE

SHI, RUJING

Provider ID: 417937
 Provider Gender: Female
 License Number: 20A19399
 NPI: 1710446539
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL
 Board Certified Specialty: No

 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
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 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM


INTERNAL MEDICINE

SHI, RUJING


Provider ID: 417937
 Provider Gender: Female
 License Number: 20A19399
 NPI: 1710446539
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL

Board Certified Specialty: No

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 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

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

 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

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

 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
 N




 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM


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

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

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

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
🕒 After Hours Phone: (619)
515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

VALDEZ, KRYSTAL

Provider ID: 417101
Provider Gender: Female
License Number: A156854
NPI: 1629480272
☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N

Hospital Affiliation: TWIN
CITIES COMMUNITY
HOSPITAL, SIERRA VISTA
REGIONAL MED CTR,
PARADISE VALLEY HOSPITAL

Board Certified Specialty: No

📍 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
mahan.org)
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL): Provider Gender: Female
License Number: A169207
NPI: 1346628310

♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-4:30PM

INTERNAL MEDICINE

VALDEZ, KRYSTAL

Provider ID: 417101
Provider Gender: Female
License Number: A156854
NPI: 1629480272
☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N

Hospital Affiliation: TWIN
CITIES COMMUNITY
HOSPITAL, SIERRA VISTA
REGIONAL MED CTR,
PARADISE VALLEY HOSPITAL

Board Certified Specialty: No

📍 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
mahan.org)

Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-4:30PM

INTERNAL MEDICINE

VIDAURRAZAGA, MONICA

Provider ID: 417937

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No

📍 4094 4TH AVE
SAN DIEGO, CA 92103
☎ Phone: (619) 515-2545
🕒 After Hours Phone: (619)
515-2545

🌐 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

📍 4094 4TH AVE
SAN DIEGO, CA 92103
☎ Phone: (619) 515-2545
🕒 After Hours Phone: (619)
515-2545

🌐 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

- American Sign Language (ASL): Cultural Competency: N
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
1501 IMPERIAL AVE SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
- INTERNAL MEDICINE**
WATTANAMANO, PORNTHEP
Provider ID: 206046
Provider Gender: Male
License Number: C186338
NPI: 1295738516
Provider English Spoken: Y
Provider Language(s) Spoken: Thai
Cultural Competency: N
Board Certified Specialty: No
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: Y
Min/Max Age: 0\150
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
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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
- 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
1501 IMPERIAL AVE SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
- INTERNAL MEDICINE**
WATTANAMANO, PORNTHEP
Provider ID: 206046
Provider Gender: Male
License Number: C186338
NPI: 1295738516
Provider English Spoken: Y
Provider Language(s) Spoken: Thai
Cultural Competency: N
Board Certified Specialty: No
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: Y
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American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

☎ After Hours Phone: (858) 279-0925
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 Min/Max Age: 0\150
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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

📍 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

WATTS, ELI

Provider ID: 451167
 Provider Gender: Male

License Number: A79383
 NPI: 1649373739
 ☐ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

WATTS, ELI

Provider ID: 451167
 Provider Gender: Male
 License Number: A79383
 NPI: 1649373739
 ☐ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
 Board Certified Specialty: No
 📍 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: Y

Min/Max Age: 0\150
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

INTERVENTIONAL

CARDIOLOGY

MOUSSAVIAN, MEHRAN


Provider ID: 206363
 Provider Gender: Male
 License Number: 20A7241
 NPI: 1689788234
 ☐ Provider English Spoken: Y
 ☐ Provider Language(s) Spoken: Farsi

Cultural Competency: N
 Hospital Affiliation: SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout
 Board Certified Specialty: No

📍 4725 MARKET ST
 SAN DIEGO, CA 92102
 ☎ Phone: (619) 263-2499
 ☎ After Hours Phone: (619) 263-2499

🌐 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N

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

**INTERVENTIONAL
CARDIOLOGY**

MOUSSAVIAN, MEHRAN

Provider ID: 206363
Provider Gender: Male
License Number: 20A7241
NPI: 1689788234
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout
Board Certified Specialty: No
 *4725 MARKET ST SAN DIEGO, CA 92102*
 *Phone: (619) 263-2499*
 *After Hours Phone: (619) 263-2499*
 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

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

**INTERVENTIONAL
CARDIOLOGY**




SHETABI, KAMBIZ

Provider ID: 206363
Provider Gender: Male
License Number: A126187
NPI: 1972827806
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital
Board Certified Specialty: No
 *4725 MARKET ST SAN DIEGO, CA 92102*
 *Phone: (619) 515-2560*
 *After Hours Phone: (619) 515-2560*
 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

**INTERVENTIONAL
CARDIOLOGY**

SHETABI, KAMBIZ


Provider ID: 206363
Provider Gender: Male
License Number: A126187
NPI: 1972827806
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi, Spanish

Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital
Board Certified Specialty: No
 *4725 MARKET ST SAN DIEGO, CA 92102*
 *Phone: (619) 515-2560*
 *After Hours Phone: (619) 515-2560*
 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

NEUROLOGY


CANTU-REYNA, GUILLERMO

Provider ID: 185268
Provider Gender: Male
License Number: A41375
NPI: 1447389101
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Board Certified Specialty: No
 *4060 FAIRMOUNT AVE SAN DIEGO, CA 92105*
 *Phone: (619) 255-9155*
 *After Hours Phone: (619) 255-9155*
 *Website: www.lamaestra.org*
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL): *Cultural Competency: N*
N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM


NEUROLOGY

CANTU-REYNA, GUILLERMO

Provider ID: 185268
Provider Gender: Male
License Number: A41375
NPI: 1447389101
 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: SHARP CHULA VISTA MED CTR
Board Certified Specialty: No

 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 *Phone: (619) 255-9155*
 *After Hours Phone: (619) 255-9155*
 *Website: www.lamaestra.org*

g
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM


OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER

Provider ID: 185268
Provider Gender: Female
License Number: A172929
NPI: 1679008569
 *Provider English Spoken: Y*


Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 *Phone: (619) 280-4213*
 *After Hours Phone: (619) 280-4213*
 *Website: www.lamaestra.org*

g
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER



Provider ID: 185268
Provider Gender: Female
License Number: A172929
NPI: 1679008569
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 *Phone: (619) 280-4213*
 *After Hours Phone: (619) 280-4213*
 *Website: www.lamaestra.org*

g
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM


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

 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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT*

PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

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

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

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

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

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
 3705 MISSION BLVD
 SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
 515-2444
 Website: www.fhcsd.org
 Email: sabay@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8:30AM-5:00PM

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
 3514 30TH ST
 SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
 515-2424

 Website: www.fhcsd.org
 Email: jenanm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\18
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

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
 3705 MISSION BLVD
 SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
 515-2444
 Website: www.fhcsd.org
 Email: sabay@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8:30AM-5:00PM

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
 3514 30TH ST
 SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
 515-2424
 Website: www.fhcsd.org
 Email: jenanm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\18
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER





OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI


Provider ID: 206362
 Provider Gender: Female
 License Number: 20A14919
 NPI: 1619397031
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL,
 SCRIPPS MERCY HOSPITAL
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:30AM-5:30PM
 F 8:30AM-5:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:30AM-5:30PM
 TU 8:30AM-9:00PM
 W-F 8:30AM-5:30PM
 SA 9:00AM-4:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:30AM-5:30PM
 TU 8:30AM-9:00PM
 W-F 8:30AM-5:30PM
 SA 9:00AM-4:00PM

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
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OBSTETRICS / GYNECOLOGY

BLAKE, GARY
 Provider ID: 206046
 Provider Gender: Male
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 TU 8:30AM-9:00PM
 W-F 8:30AM-5:30PM
 SA 9:00AM-4:00PM

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
 3514 30TH ST
 SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
 515-2424
 Website: www.fhcsd.org
 Email: jenanm@fhcsd.org
 Medi-Cal Open Panel: Y
 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
 3544 30TH ST
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 Phone: (619) 515-2424
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 Website: www.fhcsd.org
 Medi-Cal Open Panel: Y
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 Accessibility: CONTACT
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OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE
 Provider ID: 416831
 Provider Gender: Female
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 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL,
 SCRIPPS MERCY HOSPITAL,
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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
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 PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 402851

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL


CHULA VISTA, SHARP MARY


BIRCH HOSP FOR WOMEN

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Board Certified Specialty: No

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Min/Max Age: 0\150

American Sign Language (ASL):

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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

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2420

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515-2420

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 4725 MARKET ST
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 Phone: (619) 515-2420

 After Hours Phone: (619)
515-2420

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): License Number: A68463
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


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BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

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Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206362

Provider Gender: Female

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

 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: Y

Min/Max Age: 0\150

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

F 8:30AM-5:00PM

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

 1809 NATIONAL AVE

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 Phone: (619) 515-2300

 After Hours Phone: (619)
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 Website: www.fhcsd.org


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):


N

 *Accessibility: CONTACT PROVIDER*
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

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
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

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

4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2420
 After Hours Phone: (619) 515-2420
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

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

4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2420
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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

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

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 402851
Provider Gender: Male
License Number: A113001
NPI: 1225231582
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR

Board Certified Specialty: No

3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444

Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1225231582

N

 Accessibility: CONTACT PROVIDER

Hours: M-W 8:30AM-5:00PM
TH 9:30AM-6:00PM

OBSTETRICS / GYNECOLOGY


CARTER, KHALIL

Provider ID: 416831

Provider Gender: Male

License Number: A113001

NPI: 1225231582

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR

Board Certified Specialty: No

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Y

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

 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

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
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 Website: www.fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

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 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY


CARTER, KHALIL

Provider ID: 416831

Provider Gender: Male

License Number: A113001

NPI: 1225231582

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,


GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR

Board Certified Specialty: No

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 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):

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 Accessibility: CONTACT PROVIDER

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

 3705 MISSION BLVD
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 Website: www.fhcsd.org


Email: sabay@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-W 8:30AM-5:00PM

TH 9:30AM-6:00PM

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA

Provider ID: 402851

Provider Gender: Female

License Number: A118095

NPI: 1073701041

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

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Hours: M-TH 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA

Provider ID: 416831

Provider Gender: Female

License Number: A118095

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Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

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Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA

Provider ID: 206362

Provider Gender: Female

License Number: A118095

NPI: 1073701041

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:30PM

F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA

Provider ID: 416831

Provider Gender: Female

License Number: A118095

NPI: 1073701041

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

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Email: jenanm@fhcsd.org

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Min/Max Age: 0\18

American Sign Language (ASL):

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Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


CERVANTES, SANDRA

Provider ID: 402851

Provider Gender: Female

License Number: A118095

NPI: 1073701041

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP


CORONADO HOSP AND


HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
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 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA

Provider ID: 206360

Provider Gender: Female

License Number: A118095

NPI: 1073701041

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND


HEALTHCARE CTR,


GROSSMONT HOSPITAL

Board Certified Specialty: No

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 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA

Provider ID: 206363

Provider Gender: Female

License Number: A118095

NPI: 1073701041

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND


HEALTHCARE CTR,


GROSSMONT HOSPITAL


Board Certified Specialty: No

 4725 MARKET ST

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 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY


CERVANTES, SANDRA

Provider ID: 206363

Provider Gender: Female

License Number: A118095

NPI: 1073701041

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND


HEALTHCARE CTR,


GROSSMONT HOSPITAL

Board Certified Specialty: No

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

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





OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA


Provider ID: 206360
Provider Gender: Female
License Number: A118095
NPI: 1073701041

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

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
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 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA

Provider ID: 206362

Provider Gender: Female
License Number: A118095
NPI: 1073701041

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

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No

 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: Y
Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-5:30PM
F 8:00AM-5:00PM

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

 1809 NATIONAL AVE
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 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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

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Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N

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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

 4725 MARKET ST
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515-2560

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Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

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Min/Max Age: 0\150

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N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 402851

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

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

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

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

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA


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Provider Gender: Female


License Number: A163464

NPI: 1326531401


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Spoken: Spanish*
Cultural Competency: N
*Hospital Affiliation: SCRIPPS
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Grossmont Hospital*
Board Certified Specialty: No

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TH 9:00AM-6:00PM
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

 3514 30TH ST
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Medi-Cal Open Panel: Y
Min/Max Age: 0\18

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PROVIDER*




OBSTETRICS / GYNECOLOGY


DE MIK, TRAVIS

Provider ID: 416831
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NPI: 1629277322

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Board Certified Specialty: No

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OBSTETRICS / GYNECOLOGY


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OBSTETRICS / GYNECOLOGY

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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
 4725 MARKET ST
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 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y
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 American Sign Language (ASL): N
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OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 206363
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 Min/Max Age: 0\150
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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
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OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 206360
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 Min/Max Age: 0\150
 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

1809 NATIONAL AVE
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Phone: (619) 515-2300
After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

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

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

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

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
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Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

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
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Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 402851
Provider Gender: Female
License Number: A178499
NPI: 1033613732

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

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital

Board Certified Specialty: No

3705 MISSION BLVD
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Phone: (619) 515-2444
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Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY


DORUELO, ASHLEY

Provider ID: 402851

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 3514 30TH ST
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Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY


DORUELO, ASHLEY

Provider ID: 416831

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No

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Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

FOLCH TORRES-AGUIAR, BEATRIZ


Provider ID: 416831

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

 3514 30TH ST
SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

FOLCH TORRES-AGUIAR, BEATRIZ

Provider ID: 416831

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

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424
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 Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

**FOLCH TORRES-AGUIAR,
BEATRIZ**

Provider ID: 206362

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

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424
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515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

**FOLCH TORRES-AGUIAR,
BEATRIZ**

Provider ID: 402851

Provider Gender: Female

License Number: A148014

NPI: 1457794752

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Yue
Chinese

Cultural Competency: N



Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 3705 MISSION BLVD

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 Phone: (619) 515-2444
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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

**FOLCH TORRES-AGUIAR,
BEATRIZ**

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Spoken: Spanish, Yue
Chinese



Cultural Competency: N


Hospital Affiliation:

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SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

N

 Accessibility: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY

FOLCH TORRES-AGUIAR, BEATRIZ


Provider ID: 206360

Provider Gender: Female

License Number: A148014

NPI: 1457794752

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish, Yue Chinese


Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA

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 1809 NATIONAL AVE SAN DIEGO, CA 92113

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 Website: www.fhcsd.org Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): Hours: M-F 8:30AM-5:30PM

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

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OBSTETRICS / GYNECOLOGY


FOLCH TORRES-AGUIAR, BEATRIZ


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Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No

 4725 MARKET ST SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

N

OBSTETRICS / GYNECOLOGY


FOLCH TORRES-AGUIAR, BEATRIZ


Provider ID: 206363

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

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OBSTETRICS / GYNECOLOGY


FOLCH TORRES-AGUIAR, BEATRIZ


Provider ID: 206360

Provider Gender: Female

License Number: A148014

NPI: 1457794752




 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish, Yue Chinese

Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

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Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

*Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM*

OBSTETRICS / GYNECOLOGY

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Sharp Grossmont Hospital,

SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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

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

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Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):
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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
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Hours: M-W 8:30AM-5:30PM
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OBSTETRICS / GYNECOLOGY


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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


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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

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MERCY HOSPITAL,



GROSSMONT HOSPITAL

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OBSTETRICS / GYNECOLOGY




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 Hours: M-W 8:30AM-5:00PM
 TH 9:30AM-6:00PM
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
 4725 MARKET ST
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 Website: www.fhcsd.org
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
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 Hours: M-F 8:30AM-5:30PM

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
 4725 MARKET ST
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 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
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OBSTETRICS / GYNECOLOGY

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OBSTETRICS / GYNECOLOGY
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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
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OBSTETRICS / GYNECOLOGY


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OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 402851

Provider Gender: Female

License Number: A116680

NPI: 1700073962

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Provider Language(s)
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Cultural Competency: N

Hospital Affiliation:

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Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Y
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

 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: Y
Min/Max Age: 0\150



American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

MELENDEZ BERRIOS, IARA DEL


Provider ID: 416831
Provider Gender: Female
License Number: A114181
NPI: 1740514249


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

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No

 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Y

Min/Max Age: 0\18



American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

MELENDEZ BERRIOS, IARA DEL


Provider ID: 416831
Provider Gender: Female
License Number: A114181
NPI: 1740514249

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No

 3514 30TH ST
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 Phone: (619) 515-2424
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 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Y

Min/Max Age: 0\18



American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

MELENDEZ BERRIOS, IARA DEL

Provider ID: 206362
Provider Gender: Female
License Number: A114181
NPI: 1740514249


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

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No

 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: Y
Min/Max Age: 0\150

American Sign Language (ASL):


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

OBSTETRICS / GYNECOLOGY
MELENDEZ BERRIOS, IARA DEL

Provider ID: 402851
Provider Gender: Female
License Number: A114181
NPI: 1740514249



 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No




 3705 MISSION BLVD
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 *After Hours Phone: (619) 515-2444*
 *Website: www.fhcsd.org*
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150


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

OBSTETRICS / GYNECOLOGY
MELENDEZ BERRIOS, IARA DEL

Provider ID: 402851
Provider Gender: Female
License Number: A114181
NPI: 1740514249

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No



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Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


OBSTETRICS / GYNECOLOGY
MELENDEZ BERRIOS, IARA DEL

Provider ID: 206363
Provider Gender: Female
License Number: A114181
NPI: 1740514249

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No



 4725 MARKET ST
 SAN DIEGO, CA 92102
 *Phone: (619) 515-2560*
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 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N


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


OBSTETRICS / GYNECOLOGY
MELENDEZ BERRIOS, IARA DEL

Provider ID: 206363
Provider Gender: Female
License Number: A114181
NPI: 1740514249

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No

 4725 MARKET ST
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 *Phone: (619) 515-2560*
 *After Hours Phone: (619) 515-2560*

 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N

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

OBSTETRICS / GYNECOLOGY

MELENDEZ BERRIOS, IARA DEL

Provider ID: 206360
 Provider Gender: Female
 License Number: A114181
 NPI: 1740514249

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
 Board Certified Specialty: No

1809 NATIONAL AVE SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:00AM-7:00PM
 TU-TH 8:00AM-6:00PM
 F 8:00AM-5:30PM
 SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

MELENDEZ BERRIOS, IARA DEL

Provider ID: 206360
 Provider Gender: Female
 License Number: A114181
 NPI: 1740514249

Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
 Board Certified Specialty: No

1809 NATIONAL AVE SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

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 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:00AM-7:00PM
 TU-TH 8:00AM-6:00PM
 F 8:00AM-5:30PM
 SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

MELENDEZ BERRIOS, IARA DEL

Provider ID: 206362
 Provider Gender: Female
 License Number: A114181
 NPI: 1740514249

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
 Board Certified Specialty: No

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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

PHAN, TIFFANI

Provider ID: 417101
 Provider Gender: Female
 License Number: A161105
 NPI: 1134515695

Provider English Spoken: Y
 Provider Language(s) Spoken: Vietnamese
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 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

Board Certified Specialty: No

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
mahan.org)

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 402851

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

3705 MISSION BLVD

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Phone: (616) 515-2444

After Hours Phone: (616)
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Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 402851

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 206362

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 416831

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

3514 30TH ST

SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 416831

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

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Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 206362

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

3544 30TH ST

SAN DIEGO, CA 92104

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After Hours Phone: (619)
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Website: www.fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 206360

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

1809 NATIONAL AVE

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515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 206363

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

4725 MARKET ST

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Phone: (619) 515-2420

After Hours Phone: (619) 515-2420

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 206360

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

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Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 206363

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

4725 MARKET ST

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Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 206363

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s)

Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

4725 MARKET ST

SAN DIEGO, CA 92102

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After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

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Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

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Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 416831

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

3514 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:00PM

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

3514 30TH ST

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 Min/Max Age: 0\18
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY



SAPRA, SONIA

Provider ID: 402851
 Provider Gender: Female
 License Number: A164859
 NPI: 1952751711
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hindi
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL
 Board Certified Specialty: No
 3705 MISSION BLVD
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 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
 Email: sabay@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-W 8:30AM-5:30PM
 TH 9:00AM-6:00PM

F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


SAPRA, SONIA



Provider ID: 402851
 Provider Gender: Female
 License Number: A164859
 NPI: 1952751711
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hindi
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL
 Board Certified Specialty: No

 3705 MISSION BLVD
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 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
 Email: sabay@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-W 8:30AM-5:30PM
 TH 9:00AM-6:00PM
 F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SHUCKETT, ARIEL

Provider ID: 206046
 Provider Gender: Female
 License Number: A144372
 NPI: 1245590124
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SHUCKETT, ARIEL

Provider ID: 206046
 Provider Gender: Female
 License Number: A144372
 NPI: 1245590124
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

SHUCKETT, ARIEL

Provider ID: 206046

Provider Gender: Female

License Number: A144372


NPI: 1245590124

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS*

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

SHUCKETT, ARIEL

Provider ID: 206046

Provider Gender: Female

License Number: A144372

NPI: 1245590124


 *Provider English Spoken: Y*
Cultural Competency: N


*Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
MARY BIRCH HOSP FOR*

WOMEN AND NEWBORNS

Board Certified Specialty: No

 6973 LINDA VISTA RD
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 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 402851

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198


 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: Sharp


Grossmont Hospital

Board Certified Specialty: No

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 *Phone: (619) 515-2444*

 *After Hours Phone: (619)
515-2444*

 *Website: www.fhcsd.org*
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

*Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM*

F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 416831

Provider Gender: Female

License Number: 20A13958


NPI: 1932269198


 *Provider English Spoken: Y*
Cultural Competency: N


*Hospital Affiliation: Sharp
Grossmont Hospital*

Board Certified Specialty: No

 3514 30TH ST
SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*

 *After Hours Phone: (619)
515-2424*

 *Website: www.fhcsd.org*
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-5:00PM

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

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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\18
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-5:00PM

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
 3705 MISSION BLVD
 SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
 Email: sabay@fhcsd.org
 Medi-Cal Open Panel: Y
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 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-W 8:30AM-5:30PM
 TH 9:00AM-6:00PM
 F 8:30AM-5:30PM





OBSTETRICS / GYNECOLOGY



STABEN, REBECCA

Provider ID: 206360
 Provider Gender: Female
 License Number: 20A13958
 NPI: 1932269198
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: Sharp
 Grossmont Hospital
 Board Certified Specialty: No
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206360
 Provider Gender: Female
 License Number: 20A13958
 NPI: 1932269198
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: Sharp
 Grossmont Hospital
 Board Certified Specialty: No
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
 515-2560
 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER






OBSTETRICS / GYNECOLOGY
TRUJILLO, JENNIFER

Provider ID: 451167
 Provider Gender: Female
 License Number: 20A8204
 NPI: 1053407593
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, SHARP CHULA VISTA
 MED CTR
 Board Certified Specialty: No
 950 S EUCLID AVE
 SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: www.syhealth.org
 /clinics/king- chavez- healt
 h- center
 Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

OBSTETRICS / GYNECOLOGY
TRUJILLO, JENNIFER

Provider ID: 451167
 Provider Gender: Female
 License Number: 20A8204
 NPI: 1053407593
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, SHARP CHULA VISTA
 MED CTR

Board Certified Specialty: No
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 662-4100
 Website: www.syhealth.org
 /clinics/king- chavez- healt
 h- center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

OBSTETRICS / GYNECOLOGY
WINESBURG, JENNIFER

Provider ID: 206363
 Provider Gender: Female
 License Number: 20A11535

NPI: 1811162456
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SHARP
 CORONADO HOSP AND
 HEALTHCARE CTR,
 GROSSMONT HOSPITAL,
 DESERT REGIONAL MED CTR
 Board Certified Specialty: No
 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2420
 After Hours Phone: (619)
 515-2420
 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
WINESBURG, JENNIFER

Provider ID: 206363
 Provider Gender: Female
 License Number: 20A11535
 NPI: 1811162456
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SHARP
 CORONADO HOSP AND
 HEALTHCARE CTR,

GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No

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Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

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

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

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

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Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 206362

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Board Certified Specialty: No

3544 30TH ST

SAN DIEGO, CA 92104

Phone: (619) 515-2400

After Hours Phone: (619)
515-2400

Website: www.fhcsd.org
Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

F 8:30AM-5:00PM

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

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY
WINESBURG, JENNIFER

Provider ID: 416831

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Board Certified Specialty: No

3514 30TH ST

SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY
WINESBURG, JENNIFER

Provider ID: 206362

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

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GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

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3544 30TH ST

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
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Accessibility: CONTACT
PROVIDER

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

F 8:30AM-5:00PM

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

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OBSTETRICS / GYNECOLOGY
WINESBURG, JENNIFER


Provider ID: 416831

Provider Gender: Female


License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No


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Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\18
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER


OBSTETRICS / GYNECOLOGY
ZIEG, ALAN

Provider ID: 402851
Provider Gender: Male
License Number: G78814
NPI: 1699790634

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
 3705 MISSION BLVD

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 Phone: (619) 515-2444
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 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):


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 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
ZIEG, ALAN

Provider ID: 416831
Provider Gender: Male
License Number: G78814
NPI: 1699790634

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
 3514 30TH ST
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 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\18
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY
ZIEG, ALAN

Provider ID: 206362
Provider Gender: Male
License Number: G78814
NPI: 1699790634


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
 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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY
ZIEG, ALAN

Provider ID: 416831
Provider Gender: Male
License Number: G78814
NPI: 1699790634

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation:

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

Board Certified Specialty: No

3514 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
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Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 402851

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

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

Board Certified Specialty: No

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)

515-2444

Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206362

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

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

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206360

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y
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

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206360

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y
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

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Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

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Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206363

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

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

Board Certified Specialty: No

4725 MARKET ST
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Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206363

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

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

Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

OPHTHALMOLOGY

NAJAFI, DAVID

Provider ID: 206360

Provider Gender: Male

License Number: A68124

NPI: 1396715991

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Persian,
Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-6:00PM

TH 8:30AM-6:00PM

F 8:30AM-5:00PM

SA 8:30AM-5:00PM

OPHTHALMOLOGY



NAJAFI, DAVID

Provider ID: 206360

Provider Gender: Male


License Number: A68124


NPI: 1396715991


 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Persian,
 Spanish
 Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL,
 SCRIPPS MERCY HOSPITAL,
 SCRIPPS MEMORIAL
 HOSPITAL, SHARP MEMORIAL
 HOSPITAL

Board Certified Specialty: No

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
 515-2300

 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
 PROVIDER

Hours: M-TU 8:30AM-6:00PM

TH 8:30AM-6:00PM

F 8:30AM-5:00PM

SA 8:30AM-5:00PM

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

 4725 MARKET ST
 SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
 515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
 PROVIDER

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

 4725 MARKET ST
 SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
 515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101

 Phone: (619) 233-8500


 After Hours Phone: (619)
 233-8500

 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
 PROVIDER

Hours: M-F 8:00AM-4:45PM

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

 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101



 Phone: (619) 233-8500






 After Hours Phone: (619)
 233-8500

 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-4:45PM

OTOLARYNGOLOGY


DAVIS, MORGAN

Provider ID: 206360
 Provider Gender: Female
 License Number: A181809
 NPI: 1891359154
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N
 Board Certified Specialty: No
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

OTOLARYNGOLOGY







DAVIS, MORGAN

Provider ID: 206360
 Provider Gender: Female
 License Number: A181809
 NPI: 1891359154
 Provider English Spoken: Y

 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ABRAMSON, RACHEL


Provider ID: 185268
 Provider Gender: Female
 License Number: A104918
 NPI: 1588707178
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, SHARP CHULA VISTA MED CTR
 Board Certified Specialty: No
 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105
 Phone: (619) 280-4213
 After Hours Phone: (619) 280-4213
 Website: www.lamaestra.org
 Email: aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F 8:00AM-6:00PM
 SA 8:00AM-2:00PM

PEDIATRICS

ABRAMSON, RACHEL

Provider ID: 185268
 Provider Gender: Female
 License Number: A104918
 NPI: 1588707178
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, SHARP CHULA VISTA MED CTR
 Board Certified Specialty: No
 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105
 Phone: (619) 280-4213
 After Hours Phone: (619) 280-4213
 Website: www.lamaestra.org

g
 Email: aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-6:00PM
 SA 8:00AM-2:00PM

PEDIATRICS






ADJAN, ROULA

Provider ID: 185268
 Provider Gender: Female
 License Number: A81682

NPI: 1992847263
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 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
 Email: aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

ADJAN, ROULA

Provider ID: 185268
 Provider Gender: Female
 License Number: A81682
 NPI: 1992847263
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 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

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

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

 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: Y

Min/Max Age: 0\22

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

 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: Y

Min/Max Age: 0\22

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

ANDREE, GREGOR

Provider ID: 482070

Provider Gender: Male

License Number: A72833

NPI: 1467436063

Provider English Spoken: Y


Provider Language(s)


Spoken: German, Spanish


Cultural Competency: N

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PEDIATRICS

ANDREE, GREGOR



Provider ID: 482070

Provider Gender: Male

License Number: A72833
 NPI: 1467436063
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: German, Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M 8:30AM-5:30PM
 TU 8:30AM-9:00PM
 W-F 8:30AM-5:30PM
 SA 9:00AM-4:00PM

PEDIATRICS







ARCHAMBAULT, CHRISTIAN


Provider ID: 5589
 Provider Gender: Male
 NPI: 1992776918
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, SCRIPPS MERCY
 HOSPITAL, PALOMAR HEALTH,
 SHARP MARY BIRCH HOSP
 FOR WOMEN AND

NEWBORNS, CHILDRENS
 HOSPITAL OF ORANGE
 COUNTY, PARADISE VALLEY
 HOSPITAL, PARADISE VALLEY
 HOSPITAL
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

PEDIATRICS








AWDYKOVYCH, MARTA

Provider ID: 206360
 Provider Gender: Female
 License Number: A44027
 NPI: 1447265137
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Chinese, French,
 Spanish, Ukrainian
 Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL
 Board Certified Specialty: No
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PEDIATRICS

AWDYKOVYCH, MARTA

Provider ID: 206360
 Provider Gender: Female
 License Number: A44027
 NPI: 1447265137
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Chinese, French,
 Spanish, Ukrainian
 Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL
 Board Certified Specialty: No
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PEDIATRICS

AYSON, NICOLE

Provider ID: 417429
 Provider Gender: Female
 License Number: A128091

NPI: 1013278704
 □ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Board Certified Specialty: No
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101
 Phone: (619) 515-2525
 After Hours Phone: (619)
 515-2525
 Website: www.fhcsd.org
 Email: janeta@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

PEDIATRICS

AYSON, NICOLE

Provider ID: 417429
 Provider Gender: Female
 License Number: A128091
 NPI: 1013278704
 □ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Board Certified Specialty: No
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101
 Phone: (619) 515-2525
 After Hours Phone: (619)
 515-2525
 Website: www.fhcsd.org
 Email: janeta@fhcsd.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

PEDIATRICS

BAJWA, MANDEEP

Provider ID: 416831
 Provider Gender: Male
 License Number: A186551
 NPI: 1720615867
 □ Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 3514 30TH ST
 SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
 515-2424
 Website: www.fhcsd.org
 Email: jenanm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\18
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8:00AM-5:00PM

PEDIATRICS

BAJWA, MANDEEP

Provider ID: 416831
 Provider Gender: Male
 License Number: A186551
 NPI: 1720615867
 □ Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 3514 30TH ST
 SAN DIEGO, CA 92104
 Phone: (619) 515-2424

☎ After Hours Phone: (619) 515-2424
 🌐 Website: www.fhcsd.org
 Email: jenanm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\18
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-5:00PM

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
 📍 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

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
 📍 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

BOWERS, JESSIE

Provider ID: 394841
 Provider Gender: Female
 NPI: 1730594235
 ☐ Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 📍 12036 SCRIPPS HIGHLANDS DR STE 102 SAN DIEGO, CA 92131
 📞 Phone: (858) 566-4444
 Fax: (858) 566-3321
 ☎ After Hours Phone: (858) 566-4444

566-4444
 🌐 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CABARLO, JEHRIB

Provider ID: 206360
 Provider Gender: Male
 License Number: 20A8516
 NPI: 1770661340
 ☐ Provider English Spoken: Y
 ☐ Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Board Certified Specialty: No
 📍 1809 NATIONAL AVE SAN DIEGO, CA 92113
 📞 Phone: (619) 515-2300
 ☎ After Hours Phone: (619) 515-2300
 🌐 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

CABARLO, JEHRIB

Provider ID: 206360

Provider Gender: Male
 License Number: 20A8516
 NPI: 1770661340
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Board Certified Specialty: No
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8:00AM-8:30PM
 F 8:00AM-5:00PM
 SA 8:00AM-2:00PM

PEDIATRICS

CASTELNOVI, CLAUDIA

Provider ID: 185268
 Provider Gender: Female
 License Number: A111170
 NPI: 1417279324
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: French, Italian,
 Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA
 Board Certified Specialty: No
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619)
 255-9155
 Website: www.lamaestra.or
 g
 Email:

aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PEDIATRICS

CASTELNOVI, CLAUDIA

Provider ID: 185268
 Provider Gender: Female
 License Number: A111170
 NPI: 1417279324
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: French, Italian,
 Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA
 Board Certified Specialty: No
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619)
 255-9155
 Website: www.lamaestra.or
 g
 Email:
 aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CHEN, JENNIFER

Provider ID: 206363
 Provider Gender: Female
 License Number: A141057
 NPI: 1255785150
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Board Certified Specialty: No
 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

CHEN, JENNIFER

Provider ID: 206363
 Provider Gender: Female
 License Number: A141057
 NPI: 1255785150
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Board Certified Specialty: No
 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

CONE, STEPHANIE

Provider ID: 185268
 Provider Gender: Female
 License Number: A123929
 NPI: 1437444858
 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO
 Board Certified Specialty: No
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Phone: (619) 255-9154
 After Hours Phone: (619) 255-9154
 Website: www.lamaestra.org
 Email: aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-6:00PM
 SA 8:00AM-2:00PM

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
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Phone: (619) 255-9154
 After Hours Phone: (619) 255-9154
 Website: www.lamaestra.org
 Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-6:00PM
 SA 8:00AM-2:00PM

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

1809 NATIONAL AVE
 SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:00AM-7:00PM
 TU-TH 8:00AM-6:00PM
 F 8:00AM-5:30PM
 SA 8:00AM-5:00PM

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

1809 NATIONAL AVE
 SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

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

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: Y

Min/Max Age: 0\150

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 9:00AM-4:00PM

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

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: Y
 Min/Max Age: 0\150
 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 9:00AM-4:00PM

PEDIATRICS

FISHMAN, ELENA

Provider ID: 524340
 Provider Gender: Female
 NPI: 1740249432
 Provider English Spoken: Y
 Provider Language(s) Spoken: Russian
 Cultural Competency: N
 Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL
 Board Certified Specialty: No
 11943 EL CAMINO REAL STE 210
 SAN DIEGO, CA 92130
 Phone: (858) 793-1011
 Fax: (858) 793-1035
 After Hours Phone: (858) 793-1011
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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

3514 30TH ST
 SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
 Email: jenanm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\18
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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
 3514 30TH ST
 SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
 Email: jenanm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\18
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

FORTUNE, ERIN

Provider ID: 206360
 Provider Gender: Male
 License Number: A95577
 NPI: 1801088422
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
 Board Certified Specialty: No
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Hours: M-F 9:00AM-5:00PM

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

📍 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 ☎ Phone: (619) 515-2300
 🕒 After Hours Phone: (619)
 515-2300
 🌐 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Hours: M-F 9:00AM-5:00PM

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

📍 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 📍 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 ☎ Phone: (619) 255-9154
 🕒 After Hours Phone: (619)
 255-9154
 🌐 Website: www.lamaestra.org

g
 Email:
 aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 📍 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 ☎ Phone: (619) 255-9154
 🕒 After Hours Phone: (619)
 255-9154
 🌐 Website: www.lamaestra.org

g
 Email:
 aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

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

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-7:00PM

TU-TH 8:30AM-6:00PM

F 8:30AM-5:30PM

SA 8:30AM-5:00PM

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

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-7:00PM

TU-TH 8:30AM-6:00PM

F 8:30AM-5:30PM

SA 8:30AM-5:00PM

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

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

HANSEN, JOHN

Provider ID: 318919

Provider Gender: Male

NPI: 1780655621

Provider English Spoken: Y

Provider Language(s)

Spoken: Danish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SHARP MARY BIRCH HOSP

**FOR WOMEN AND
NEWBORNS**

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

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

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

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

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-8:30PM
F 8:00AM-5:00PM
SA 8:00AM-2:00PM

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

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

PEDIATRICS

HORMOZDYARAN, SANAYA

Provider ID: 612398

Provider Gender: Female

NPI: 1750887634

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

PEDIATRICS

JORDAN, JAMIE

Provider ID: 237831
 Provider Gender: Female
 NPI: 1275762833
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM


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
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU 8:30AM-5:30PM
 W 10:00AM-7:00PM
 TH-F 8:30AM-5:30PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU 8:30AM-5:30PM
 W 10:00AM-7:00PM
 TH-F 8:30AM-5:30PM

PEDIATRICS

KESANAPALLI, DEEPTHI

Provider ID: 235069
 Provider Gender: Female
 NPI: 1487948584
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS

Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:30AM-6:00PM
 F 8:30AM-0:00PM

PEDIATRICS

LIU, JESICA

Provider ID: 206363
 Provider Gender: Female
 License Number: A166312
 NPI: 1184157620
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

LIU, JESICA

Provider ID: 206363
 Provider Gender: Female
 License Number: A166312
 NPI: 1184157620
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

PEDIATRICS

LUJAN, ARLEEN

Provider ID: 206360
 Provider Gender: Female
 License Number: A61687
 NPI: 1760412431
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

LUJAN, ARLEEN

Provider ID: 206360
Provider Gender: Female
License Number: A61687
NPI: 1760412431
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

MADANY, GEORGE

Provider ID: 318924
Provider Gender: Male
NPI: 1811968837
Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, French,
Spanish

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

Board Certified Specialty: No

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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MAHENDRAN, SRIVIDYA

Provider ID: 482070
Provider Gender: Female
License Number: A92173
NPI: 1487843454

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No

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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

PEDIATRICS

MAHENDRAN, SRIVIDYA

Provider ID: 482070
Provider Gender: Female
License Number: A92173
NPI: 1487843454
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT

PROVIDER

PEDIATRICS

MANRIQUEZ-CASTILLO, ERENDIRA

Provider ID: 185268

Provider Gender: Female

License Number: A75533


NPI: 1356397418


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: VALLEY CHILDRENS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619) 255-9155

 Website: www.lamaestra.org


Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PEDIATRICS

MANRIQUEZ-CASTILLO, ERENDIRA

Provider ID: 185268

Provider Gender: Female

License Number: A75533


NPI: 1356397418


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: VALLEY CHILDRENS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619) 255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

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

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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

PEDIATRICS

MLNARIK, ANASTASIA


Provider ID: 558645

Provider Gender: Female

NPI: 1972000537


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

 11943 EL CAMINO REAL STE 210
SAN DIEGO, CA 92130

 Phone: (858) 793-1011

Fax: (858) 793-1035


 After Hours Phone: (858) 793-1011

 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM



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

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

PEDIATRICS


PARKER, SHERINE

Provider ID: 206360

Provider Gender: Female

License Number: G81658


NPI: 1477626513


 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS


HOSPITAL

Board Certified Specialty: No

 1809 NATIONAL AVE SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-7:00PM

TU-TH 8:30AM-6:00PM

F 8:30AM-5:30PM

SA 8:30AM-5:00PM

PEDIATRICS


PARKER, SHERINE

Provider ID: 206360

Provider Gender: Female


License Number: G81658

NPI: 1477626513

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL


Board Certified Specialty: No

 1809 NATIONAL AVE SAN DIEGO, CA 92113

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 After Hours Phone: (619)

515-2300

 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-7:00PM

TU-TH 8:30AM-6:00PM

F 8:30AM-5:30PM

SA 8:30AM-5:00PM

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

 3514 30TH ST SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org
 Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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
 3514 30TH ST
 SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
 515-2424
 Website: www.fhcsd.org
 Email: jenanm@fhcsd.org
 Medi-Cal Open Panel: Y
 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
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

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

1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
 233-8500
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:30PM

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
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
 233-8500
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:30PM

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
 950 S EUCLID AVE
 SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: www.syhealth.org
 /clinics/king- chavez- healt

h- center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-4:00PM

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

 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
h- center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-4:00PM

PEDIATRICS






RODRIGUEZ, JAVIER



Provider ID: 185268
 Provider Gender: Male
 License Number: A82639
 NPI: 1013059385
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No

 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619)
 255-9155
 Website: www.lamaestra.org
g
 Email:
aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PEDIATRICS


RODRIGUEZ, JAVIER






Provider ID: 185268
 Provider Gender: Male
 License Number: A82639
 NPI: 1013059385
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619)
 255-9155

 Website: www.lamaestra.org
g
 Email:
aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PEDIATRICS

RUBENSTEIN, STUART

Provider ID: 521305
 Provider Gender: Male
 NPI: 1689633844
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS, RADY CHILDRENS
 HOSPITAL SAN DIEGO,
 SCRIPPS MEMORIAL
 HOSPITAL, SHARP MEMORIAL
 HOSPITAL

Board Certified Specialty: No
 11943 EL CAMINO REAL STE
 210
 SAN DIEGO, CA 92130
 Phone: (858) 793-1011
 Fax: (858) 793-1035
 After Hours Phone: (858)
 793-1011
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

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

 3514 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org


Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

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

 3514 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

PEDIATRICS

SEBSO, JODI

Provider ID: 416831

Provider Gender: Female

License Number: A103099

NPI: 1538484316

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL

Board Certified Specialty: No

 3514 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

PEDIATRICS

SEBSO, JODI

Provider ID: 416831

Provider Gender: Female

License Number: A103099

NPI: 1538484316

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL

Board Certified Specialty: No

 3514 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

SEBSO, JODI

Provider ID: 206360

Provider Gender: Female

License Number: A103099

NPI: 1538484316

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

SEBSO, JODI

Provider ID: 206360

Provider Gender: Female

License Number: A103099

NPI: 1538484316

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

SHENOY, ASHVIN

Provider ID: 232392

Provider Gender: Male

NPI: 1619262664

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SHARP

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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


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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS



SHIAU, NANCY

Provider ID: 40852
 Provider Gender: Female
 NPI: 1750352779
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, ALVARADO HOSP MED CTR
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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

 3705 MISSION BLVD
 SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
 Email: sabay@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

SPITZER, MARSHA

Provider ID: 402851
 Provider Gender: Female
 License Number: A76785
 NPI: 1851323315
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
 Board Certified Specialty: No

 3705 MISSION BLVD
 SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
 Email: sabay@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

SPITZER, MARSHA

Provider ID: 417429

Provider Gender: Female

License Number: A76785

NPI: 1851323315

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

 1550 BROADWAY STE 2 SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619) 515-2525


 Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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

PEDIATRICS

SPITZER, MARSHA

Provider ID: 417429

Provider Gender: Female

License Number: A76785

NPI: 1851323315

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

 1550 BROADWAY STE 2 SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619) 515-2525

 Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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

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

 1809 NATIONAL AVE SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

STUMP, CHARI

Provider ID: 587747

Provider Gender: Female

NPI: 1265968788


Provider English Spoken: Y


Cultural Competency: N

Hospital Affiliation: SHARP


MEMORIAL HOSPITAL

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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

PEDIATRICS

SUBRAMANIAN, RAMA

Provider ID: 662343

Provider Gender: Female

NPI: 1932593506

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

11943 EL CAMINO REAL STE 210
SAN DIEGO, CA 92130
Phone: (858) 793-1011
Fax: (858) 793-1035
After Hours Phone: (858) 793-1011
Website: N/A
Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

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
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\18
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM

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

3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM

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
2391 ISLAND AVE
SAN DIEGO, CA 92102
Phone: (619) 515-2435
After Hours Phone: (619) 515-2435
Website: N/A
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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
2391 ISLAND AVE
SAN DIEGO, CA 92102
Phone: (619) 515-2435
After Hours Phone: (619) 515-2435
Website: N/A
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 11943 EL CAMINO REAL STE
 210
 SAN DIEGO, CA 92130
 Phone: (858) 793-1011

Fax: (858) 793-1035
 After Hours Phone: (858)
 793-1011
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-0:00PM

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
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):

N
 ♿ Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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

📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
 SA 8:30AM-0:00PM

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
 📍 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: Y

Min/Max Age: 0\22

American Sign Language (ASL):

N
 ♿ Accessibility: CONTACT PROVIDER

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
 📍 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: Y
 Min/Max Age: 0\22
 American Sign Language (ASL):

N
 ♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

WONG, YOLANDA

Provider ID: 482070
 Provider Gender: Female
 License Number: A94449
 NPI: 1851599872

☐ Provider English Spoken: Y
 ☐ Provider Language(s)
 Spoken: Spanish

Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N
 ♿ Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM
 TU 8:30AM-9:00PM
 W-F 8:30AM-5:30PM
 SA 9:00AM-4:00PM

PEDIATRICS

WONG, YOLANDA

Provider ID: 482070
 Provider Gender: Female
 License Number: A94449
 NPI: 1851599872

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

Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO

Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Hours: M 8:30AM-5:30PM
 TU 8:30AM-9:00PM
 W-F 8:30AM-5:30PM
 SA 9:00AM-4:00PM

PEDIATRICS


ZACHRY, ALISON

Provider ID: 662759
 Provider Gender: Female
 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
 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Hours: M-TH 8:00AM-8:00PM
 F 8:00AM-5:00PM

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

 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: Y

Min/Max Age: 0\22

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

 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: Y

Min/Max Age: 0\22

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

PEDIATRICS

ZAHEER, AARON

Provider ID: 482070

Provider Gender: Male

License Number: A61238

NPI: 1902882301

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Persian, Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

PEDIATRICS

ZAHEER, AARON

Provider ID: 482070

Provider Gender: Male

License Number: A61238

NPI: 1902882301

Provider English Spoken: Y

Provider Language(s)
 Spoken: Persian, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
 DIEGO

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

PEDIATRICS

ZANDKARIMI, 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

1809 NATIONAL AVE
 SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
 515-2300

Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

PEDIATRICS

ZANDKARIMI, 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

1809 NATIONAL AVE
 SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
 515-2300

Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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
 2325 COMMERCIAL ST STE
 1400
 SAN DIEGO, CA 92113
 *Phone: (619) 515-2422*
 *After Hours Phone: (619)*
515-2422
 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
 N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM

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
 2325 COMMERCIAL ST STE
 1400
 SAN DIEGO, CA 92113
 *Phone: (619) 515-2422*
 *After Hours Phone: (619)*
515-2422
 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):

N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM


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


 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 *Phone: (619) 255-9155*
 *After Hours Phone: (619)*
255-9155
 *Website: www.lamaestra.org*
Email:

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
 N

 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

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

 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 *Phone: (619) 255-9155*
 *After Hours Phone: (619)*
255-9155
 *Website: www.lamaestra.org*

Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
 N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

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

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619)*
515-2300
 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
 N
 *Accessibility: CONTACT*
PROVIDER

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

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA

Provider ID: 206362

Provider Gender: Female

License Number: PA17220

NPI: 1376550657

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA

Provider ID: 206362

Provider Gender: Female

License Number: PA17220

NPI: 1376550657

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHAN, TIFFANY

Provider ID: 206360

Provider Gender: Female

License Number: PA23258

NPI: 1790111607

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHAN, TIFFANY

Provider ID: 206360

Provider Gender: Female

License Number: PA23258

NPI: 1790111607

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619)
233-8500
Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM
TU-W 8:30AM-5:00PM
TH 8:30AM-9:00PM
F 8:30AM-5:00PM

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

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619)
233-8500
Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM
TU-W 8:30AM-5:00PM
TH 8:30AM-9:00PM

F 8:30AM-5:00PM

PHYSICIANS ASSISTANT

DOLMETSCH, JEANETTE

Provider ID: 417987

Provider Gender: Female

License Number: PA58905

NPI: 1164941456

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

PHYSICIANS ASSISTANT

DOLMETSCH, JEANETTE

Provider ID: 417987

Provider Gender: Female

License Number: PA58905

NPI: 1164941456

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

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: Y
Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424

Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424

Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Y
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

5160 FEDERAL BLVD
SAN DIEGO, CA 92105
Phone: (619) 515-2454
After Hours Phone: (619) 515-2454

Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

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

5160 FEDERAL BLVD
SAN DIEGO, CA 92105
Phone: (619) 515-2454
After Hours Phone: (619) 515-2454

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y
Min/Max Age: 0\150

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

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

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

 4725 MARKET ST
 SAN DIEGO, CA 92102

 Phone: (619) 515-2560


 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101

 Phone: (619) 515-2430

 After Hours Phone: (619) 515-2430

 Website: www.fhcsd.org
 Email: jinah@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

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

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

 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101

 Phone: (619) 515-2430


 After Hours Phone: (619) 515-2430

 Website: www.fhcsd.org
 Email: jinah@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT


LAPINA, LORI


Provider ID: 417937
 Provider Gender: Female
 License Number: PA23231
 NPI: 1245670413


Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
 SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


LAPINA, LORI


Provider ID: 417937
 Provider Gender: Female
 License Number: PA23231
 NPI: 1245670413

Provider English Spoken: Y
 Cultural Competency: N


Board Certified Specialty: No

 4094 4TH AVE
 SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545


 Website: www.fhcsd.org

Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


LEON, FLOR

Provider ID: 419529
 Provider Gender: Female
 License Number: PA53788
 NPI: 1902358237

 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

 2325 COMMERCIAL ST STE 1400
 SAN DIEGO, CA 92113
 Phone: (619) 515-2422
 After Hours Phone: (619) 515-2422


 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER


PHYSICIANS ASSISTANT

LEON, FLOR

Provider ID: 419529
 Provider Gender: Female
 License Number: PA53788
 NPI: 1902358237

 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

 2325 COMMERCIAL ST STE 1400
 SAN DIEGO, CA 92113
 Phone: (619) 515-2422
 After Hours Phone: (619) 515-2422

 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150


American Sign Language (ASL):
 N




 Accessibility: CONTACT PROVIDER


PHYSICIANS ASSISTANT

LEON, FLOR

Provider ID: 206360
 Provider Gender: Female
 License Number: PA53788
 NPI: 1902358237

 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER




PHYSICIANS ASSISTANT

LEON, FLOR

Provider ID: 206360
 Provider Gender: Female


License Number: PA53788
 NPI: 1902358237

 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150


American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER


PHYSICIANS ASSISTANT

LEON, FLOR

Provider ID: 356145
 Provider Gender: Female
 License Number: PA53788
 NPI: 1902358237

 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

 2391 ISLAND AVE
 SAN DIEGO, CA 92102
 Phone: (619) 515-2435
 After Hours Phone: (619) 515-2435

 Website: N/A
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

LEON, FLOR

Provider ID: 356145

Provider Gender: Female

License Number: PA53788

NPI: 1902358237

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

2391 ISLAND AVE
SAN DIEGO, CA 92102

Phone: (619) 515-2435

After Hours Phone: (619) 515-2435

Website: N/A

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

LLOYD, MATTHEW

Provider ID: 417429

Provider Gender: Male

License Number: PA62752

NPI: 1487307369

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619) 515-2525

Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

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

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619) 515-2525

Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619) 515-2525

Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619) 515-2525

Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org


Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org


Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 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: Y

Min/Max Age: 0\150

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

 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: Y

Min/Max Age: 0\150

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

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

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

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619)
255-9155
Website: www.lamaestra.org

Email:
aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

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

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619)

515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:00AM-5:00PM
 TU 8:00AM-8:00PM
 W-F 8:00AM-5:00PM
 SA 9:00AM-1:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):


N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:00AM-5:00PM
 TU 8:00AM-8:00PM
 W-F 8:00AM-5:00PM
 SA 9:00AM-1:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M 8:00AM-5:00PM
 TU 8:00AM-8:00PM
 W-F 8:00AM-5:00PM
 SA 9:00AM-1:00PM


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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

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

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300


 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300


 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 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: Y

Min/Max Age: 0\150

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

 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: Y

Min/Max Age: 0\150

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

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

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

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)

515-2525

 Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 316 25TH ST
SAN DIEGO, CA 92102

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

316 25TH ST
SAN DIEGO, CA 92102
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100

Website: N/A
Medi-Cal Open Panel: Y
Min/Max Age: 0\120

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

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

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

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
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Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y
Min/Max Age: 0\150

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

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y
Min/Max Age: 0\150

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

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
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Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TURNER, SHEREENA

Provider ID: 206360
Provider Gender: Female
License Number: PA20396
NPI: 1992934988

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

Cultural Competency: N
Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


TURNER, SHEREENA


Provider ID: 206360

Provider Gender: Female

License Number: PA20396

NPI: 1992934988


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

UDOH, EKAETE

Provider ID: 418535


Provider Gender: Male

License Number: PA19664


NPI: 1841472776


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT


UDOH, EKAETE

Provider ID: 418535

Provider Gender: Male


License Number: PA19664

NPI: 1841472776


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

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

 3544 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PROVIDER

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI


Provider ID: 233597

Provider Gender: Female

License Number: PA18746

NPI: 1932297595

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish,
Vietnamese


Cultural Competency: N

Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-2:00PM


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

 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: Y
 Min/Max Age: 0\150



American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI

Provider ID: 233597
 Provider Gender: Female
 License Number: PA18746

NPI: 1932297595
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Vietnamese


Cultural Competency: N
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\150



American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-2:00PM




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

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300



 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 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

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org



Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PODIATRIST

LE, DIANA

Provider ID: 206360
 Provider Gender: Female
 License Number: DPM5734
 NPI: 1184112864

 Provider English Spoken: Y
 Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: ANAHEIM REGIONAL MEDICAL CTR

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PODIATRIST

LE, DIANA

Provider ID: 206360

Provider Gender: Female

License Number: DPM5734

NPI: 1184112864

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: ANAHEIM REGIONAL MEDICAL CTR

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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SAN DIEGO, CA 92113

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 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org


Email: janeta@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

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

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

PREVENTATIVE MEDICINE

GENERAL

HILL, LINDA

Provider ID: 482070

Provider Gender: Female

License Number: G41532

NPI: 1467434811

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
 MEDICAL CTR
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M 8:30AM-5:30PM
 TU 8:30AM-9:00PM
 W-F 8:30AM-5:30PM
 SA 9:00AM-4:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:30AM-5:30PM
 SA 9:00AM-4:00PM

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
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 N
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PREVENTATIVE MEDICINE
GENERAL

HILL, LINDA
 Provider ID: 206046
 Provider Gender: Female
 License Number: G41532
 NPI: 1467434811
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 Provider Language(s)
 Spoken: French, Spanish
 Cultural Competency: N
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 Accessibility: CONTACT
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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

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 6973 LINDA VISTA RD
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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM
 SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

HILL, LINDA

Provider ID: 482070

Provider Gender: Female

License Number: G41532

NPI: 1467434811

Provider English Spoken: Y

Provider Language(s) Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

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

6973 LINDA VISTA RD
 SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 279-0377

After Hours Phone: (858) 279-0925

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

SA 9:00AM-4:00PM

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

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 SA 9:00AM-4:00PM

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

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Min/Max Age: 0\150

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM



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

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Provider ID: 206046
Provider Gender: Male
License Number: G70886
NPI: 1952386765


 *Provider English Spoken: Y*

Cultural Competency: N
Board Certified Specialty: Yes

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American Sign Language (ASL): N

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PREVENTATIVE MEDICINE


GENERAL


RISSER, JOSEPH

Provider ID: 482070
Provider Gender: Male
License Number: G70886
NPI: 1952386765


 *Provider English Spoken: Y*
Cultural Competency: N
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Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

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

 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*

Fax: (858) 279-0377

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 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

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Fax: (858) 279-0377

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 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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Cultural Competency: N


Hospital Affiliation: SHARP

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

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

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 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM






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
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

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
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
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 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

CONCORS, ANDREW
 Provider ID: 417937
 Provider Gender: Male
 License Number: PT12930
 NPI: 1578706743
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 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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Medi-Cal Open Panel: Y
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 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM



REGISTERED PHYSICAL THERAPIST

CONCORS, ANDREW
 Provider ID: 417937
 Provider Gender: Male
 License Number: PT12930
 NPI: 1578706743
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
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 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE
 Provider ID: 417937
 Provider Gender: Male
 License Number: PT295173


NPI: 1497236384

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

Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
 515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

**REGISTERED PHYSICAL
 THERAPIST**



CUMMINGS, GEORGE

Provider ID: 417937

Provider Gender: Male


License Number: PT295173

NPI: 1497236384

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 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

**REGISTERED PHYSICAL
 THERAPIST**



DAHMS, MADELYNN

Provider ID: 206360

Provider Gender: Female




License Number: PT295463

NPI: 1245712702

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Sign Language

Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

**REGISTERED PHYSICAL
 THERAPIST**



DAHMS, MADELYNN

Provider ID: 206360

Provider Gender: Female




License Number: PT295463

NPI: 1245712702

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Sign Language

Cultural Competency: N

Board Certified Specialty: No

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 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

**REGISTERED PHYSICAL
 THERAPIST**


FIELDING, JOSEPH



Provider ID: 417937

Provider Gender: Male

License Number: PT40975

NPI: 1235577560

 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
 515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

**REGISTERED PHYSICAL
 THERAPIST**

FIELDING, JOSEPH

Provider ID: 417937
 Provider Gender: Male
 License Number: PT40975
 NPI: 1235577560
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
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 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

HAPKE, ELENA
 Provider ID: 417937
 Provider Gender: Female
 License Number: PT292613
 NPI: 1003354895
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):

N
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REGISTERED PHYSICAL THERAPIST

HAPKE, ELENA
 Provider ID: 417937
 Provider Gender: Female
 License Number: PT292613
 NPI: 1003354895
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

HERMES, MARY
 Provider ID: 206360
 Provider Gender: Female
 License Number: PT24707
 NPI: 1518028547
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 1809 NATIONAL AVE

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 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

HERMES, MARY
 Provider ID: 206360
 Provider Gender: Female
 License Number: PT24707
 NPI: 1518028547
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
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 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

IRIZARRY, NICOLE

Provider ID: 206360
 Provider Gender: Female
 License Number: PT33914
 NPI: 1003088063

Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No

1809 NATIONAL AVE
 SAN DIEGO, CA 92113

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

**REGISTERED PHYSICAL
 THERAPIST**

IRIZARRY, NICOLE

Provider ID: 206360

Provider Gender: Female

License Number: PT33914

NPI: 1003088063

Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

**REGISTERED PHYSICAL
 THERAPIST**

MAHONEY, KAITLYN

Provider ID: 417937

Provider Gender: Female

License Number: PT296559

NPI: 1114583176

Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No

4094 4TH AVE
 SAN DIEGO, CA 92103

Phone: (619) 515-2545

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 515-2545

Website: www.fhcsd.org
 Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

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

**REGISTERED PHYSICAL
 THERAPIST**

MAHONEY, KAITLYN

Provider ID: 417937

Provider Gender: Female

License Number: PT296559

NPI: 1114583176

Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No

4094 4TH AVE
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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

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

**REGISTERED PHYSICAL
 THERAPIST**

MIGNEA, DAVID

Provider ID: 417937

Provider Gender: Male

License Number: PT293536

NPI: 1043736879

Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No

4094 4TH AVE
 SAN DIEGO, CA 92103

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Min/Max Age: 0\150

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Accessibility: CONTACT
 PROVIDER

Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

**REGISTERED PHYSICAL
 THERAPIST**

MIGNEA, DAVID

Provider ID: 417937
 Provider Gender: Male
 License Number: PT293536
 NPI: 1043736879
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 4094 4TH AVE
 SAN DIEGO, CA 92103
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 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

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
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org

Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-9:00PM
 F 8:00AM-5:00PM

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
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1649564295

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

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

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

RHEUMATOLOGY

OGANDO, SHEENA

Provider ID: 206363

Provider Gender: Female

License Number: A142743

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

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

RHEUMATOLOGY

REDDY, DANA

Provider ID: 206363

Provider Gender: Female

License Number: A115598

NPI: 1144538778

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

RHEUMATOLOGY

REDDY, DANA

Provider ID: 206363

Provider Gender: Female

License Number: A115598

NPI: 1144538778

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560


Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Y


Min/Max Age: 0\150

American Sign Language (ASL): License Number: A115598
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM


RHEUMATOLOGY
REDDY, DANA

Provider ID: 403583
Provider Gender: Female
License Number: A115598
NPI: 1144538778


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500


 Website: N/A
Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL): License Number: SP27677
N




 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

RHEUMATOLOGY
REDDY, DANA


Provider ID: 403583
Provider Gender: Female

NPI: 1144538778
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Board Certified Specialty: No


 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500




 Website: N/A
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

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

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300


 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150




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

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

SAN MARCOS

CERTIFIED NURSE
PRACTITIONER
BINETTE, DONYA


Provider ID: 206426
Provider Gender: Female
License Number: NP95001653
NPI: 1427325166

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 150 VALPRED RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
 736-6767
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER






**CERTIFIED NURSE
PRACTITIONER**



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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

**CERTIFIED NURSE
PRACTITIONER**

DOAN, CHINH

Provider ID: 206426
 Provider Gender: Female
 License Number: NP18874
 NPI: 1083845069
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Vietnamese
 Cultural Competency: N
 Board Certified Specialty: No
 150 VALPRED RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
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 Accessibility: CONTACT
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**CERTIFIED NURSE
PRACTITIONER**



DOAN, CHINH

Provider ID: 206426
 Provider Gender: Female
 License Number: NP18874
 NPI: 1083845069
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Vietnamese
 Cultural Competency: N
 Board Certified Specialty: No
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 American Sign Language (ASL):
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 Accessibility: CONTACT
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**CERTIFIED NURSE
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DOAN, CHINH

Provider ID: 206426
 Provider Gender: Female
 License Number: NP18874
 NPI: 1083845069
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Vietnamese
 Cultural Competency: N
 Board Certified Specialty: No
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 American Sign Language (ASL):
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Provider ID: 206426
 Provider Gender: Female
 License Number: NP18874
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DOAN, CHINH

Provider ID: 206426
 Provider Gender: Female
 License Number: NP18874
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 Provider English Spoken: Y
 Provider Language(s)
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**CERTIFIED NURSE
PRACTITIONER**





DOAN, CHINH
 Provider ID: 206426
 Provider Gender: Female
 License Number: NP18874
 NPI: 1083845069
 Provider English Spoken: Y
 Provider Language(s)
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 Cultural Competency: N
 Board Certified Specialty: No
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 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 1595 GRAND AVE STE 106
 SAN MARCOS, CA 92078
 Phone: (760) 736-6767
 Fax: (760) 736-6744
 After Hours Phone: (760)
 736-6767
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 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
 1595 GRAND AVE STE 106
 SAN MARCOS, CA 92078

 Phone: (760) 736-6767
 Fax: (760) 736-6744
 After Hours Phone: (760)
 736-6767
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 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
 1595 GRAND AVE STE 106
 SAN MARCOS, CA 92078
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 Fax: (760) 736-6744
 After Hours Phone: (760)
 736-6767
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
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**CERTIFIED NURSE
PRACTITIONER**

FODDA, RAMI
 Provider ID: 614511

Provider Gender: Male
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 Board Certified Specialty: No
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 American Sign Language (ASL):
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 Accessibility: CONTACT
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**CERTIFIED NURSE
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 736-6767
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 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
 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: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 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

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: Y

Min/Max Age: 0\150

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

150 VALPRED A RD
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Website: www.ihpsocal.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

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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

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

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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

150 VALPRED A RD
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After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

HENLEY, MEARA

Provider ID: 206426

Provider Gender: Female

License Number: NP95002545

NPI: 1538319645

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

HENLEY, MEARA

Provider ID: 206426

Provider Gender: Female

License Number: NP95002545

NPI: 1538319645

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

150 VALPRED A RD
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CERTIFIED NURSE PRACTITIONER

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Website: www.ihpsocal.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HENLEY, MEARA

Provider ID: 206426
Provider Gender: Female
License Number: NP95002545
NPI: 1538319645

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

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CERTIFIED NURSE PRACTITIONER

KOUSARI, JHALEH

Provider ID: 206426
Provider Gender: Female
License Number: NP20893
NPI: 1811262405

Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

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CERTIFIED NURSE PRACTITIONER

MACIAS, ALISSA

Provider ID: 206426

Provider Gender: Female


License Number: NP21368


NPI: 1952658445

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

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CERTIFIED REGISTERED

NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 206426

Provider Gender: Female

License Number: NM235844

NPI: 1407287469

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

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

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 SA 8:00AM-5:00PM

**CERTIFIED REGISTERED
NURSE MIDWIFE**

KELLY, KATHERINE

Provider ID: 206426
 Provider Gender: Female
 License Number: NM235997
 NPI: 1801134275
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: PALOMAR
 MEDICAL CENTER
 Board Certified Specialty: No

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KELLY, KATHERINE

Provider ID: 206426
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NPI: 1801134275
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Provider Language(s)
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Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
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FAMILY PRACTICE

MATIAS, JULIE

Provider ID: 206426
Provider Gender: Female

License Number: 20A15159

NPI: 1083094510

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 206426

Provider Gender: Male

License Number: C54157

NPI: 1275630618

Provider English Spoken: Y

Provider Language(s)
Spoken: Bengali

Cultural Competency: N

Board Certified Specialty: No

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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

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
Fax: (760) 736-6744

After Hours Phone: (760) 736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
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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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Provider ID: 614511







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License Number: C54157

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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

FAMILY PRACTICE






NATH, DEVARSHI

Provider ID: 206426
Provider Gender: Male
License Number: C54157
NPI: 1275630618
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Bengali
Cultural Competency: N
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
 N
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FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 206426
Provider Gender: Male
License Number: C54157
NPI: 1275630618
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Bengali
Cultural Competency: N
Board Certified Specialty: No
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FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 206426
Provider Gender: Male
License Number: C54157
NPI: 1275630618

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Bengali

Cultural Competency: N

Board Certified Specialty: No

150 VALPRED RD
 SAN MARCOS, CA 92069

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Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

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

SA 8:00AM-5:00PM

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

1595 GRAND AVE STE 106
 SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
 736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

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

1595 GRAND AVE STE 106
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Fax: (760) 736-6744

After Hours Phone: (760)
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Website: www.ihpsocal.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

SAFI, ROOZCHEHR

Provider ID: 206426

Provider Gender: Female

License Number: A116562

NPI: 1659563641

Provider English Spoken: Y

Provider Language(s)

Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No

150 VALPRED RD
 SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)
 736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

SAFI, ROOZCHEHR

Provider ID: 206426

Provider Gender: Female

License Number: A116562

NPI: 1659563641

Provider English Spoken: Y

Provider Language(s)

Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No

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Provider Gender: Female

License Number: A116562

NPI: 1659563641

Provider English Spoken: Y

Provider Language(s)

Spoken: Farsi
 Cultural Competency: N
 Board Certified Specialty: No

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 Min/Max Age: 0\150
 American Sign Language (ASL):



N

 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE

WILLIE, KADEN

Provider ID: 206426
 Provider Gender: Male
 License Number: 20A17306
 NPI: 1790133767




Provider English Spoken: Y
 Provider Language(s)
 Spoken: Portuguese
 Cultural Competency: N
 Board Certified Specialty: No
 150 VALPRED RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
 736-6767
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
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 PROVIDER

FAMILY PRACTICE

WILLIE, KADEN

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 Provider Gender: Male
 License Number: 20A17306
 NPI: 1790133767

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Portuguese
 Cultural Competency: N
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Provider ID: 206426
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Provider English Spoken: Y
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 Cultural Competency: N
 Board Certified Specialty: No






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 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FQHC

TRUECARE,

Provider ID: 206426
 NPI: 1811617939
 Provider English Spoken: Y
 Cultural Competency: N
 150 VALPRED A RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 Fax: (760) 736-8740
 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM


FQHC
TRUECARE,

Provider ID: 206426

NPI: 1245246917

 Provider English Spoken: Y
Cultural Competency: N

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

SA 8:00AM-5:00PM


FQHC
TRUECARE,

Provider ID: 206426

NPI: 1598484255

 Provider English Spoken: Y
Cultural Competency: N

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

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736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

SA 8:00AM-5:00PM


FQHC
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Provider ID: 206426

NPI: 1811617939

 Provider English Spoken: Y
Cultural Competency: N

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Medi-Cal Open Panel: Y

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American Sign Language (ASL):

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


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American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

SA 8:00AM-5:00PM


FQHC
TRUECARE,

Provider ID: 614511

NPI: 1245246917

 Provider English Spoken: Y
Cultural Competency: N


 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078


 Phone: (760) 736-6767


Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
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FQHC

TRUECARE,

Provider ID: 614511
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 1595 GRAND AVE STE 106
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FQHC

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 736-6767
 Website: www.ihpsocal.org

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

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: Y
 Min/Max Age: 0\150
 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
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 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
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GENERAL PRACTICE

WITCZAK, IZABELA

Provider ID: 206426
 Provider Gender: Female
 License Number: A71311
 NPI: 1184735201
 Provider English Spoken: Y
 Provider Language(s) Spoken: Polish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
 ENCINITAS
 Board Certified Specialty: No
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 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 206426
 Provider Gender: Male
 License Number: G74757
 NPI: 1467485078
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 150 VALPRED RD
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 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PROVIDER

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

Provider ID: 206426
 Provider Gender: Female
 License Number: A97181
 NPI: 1154477628
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Spanish
 Cultural Competency: N
 Hospital Affiliation: TRI CITY
 MEDICAL CTR, PALOMAR
 MEDICAL CENTER
 Board Certified Specialty: No
 150 VALPRED RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
 736-6767
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH


Provider ID: 206426
 Provider Gender: Female
 License Number: A97181
 NPI: 1154477628
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Spanish
 Cultural Competency: N
 Hospital Affiliation: TRI CITY
 MEDICAL CTR, PALOMAR
 MEDICAL CENTER
 Board Certified Specialty: No
 150 VALPRED RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
 736-6767
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

Hospital Affiliation: TRI CITY
 MEDICAL CTR, PALOMAR
 MEDICAL CENTER
 Board Certified Specialty: No
 150 VALPRED RD
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 736-6767
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH



Provider ID: 206426
 Provider Gender: Female
 License Number: A97181
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 Provider Language(s)
 Spoken: Farsi, Spanish
 Cultural Competency: N
 Hospital Affiliation: TRI CITY
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N
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Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM




OBSTETRICS / GYNECOLOGY


MOSTOFIAN, EIMANEH


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License Number: A97181
NPI: 1154477628

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Farsi, Spanish*
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER

Board Certified Specialty: No

 *150 VALPREDA RD*
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
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 *Website: www.ihpsocal.org*
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OBSTETRICS / GYNECOLOGY


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




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

 *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: Y
Min/Max Age: 0\150
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

 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: Y

Min/Max Age: 0\150

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

 150 VALPRED A RD

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 Website: www.ihpsocal.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
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OBSTETRICS / GYNECOLOGY


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MEDICAL CENTER

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Min/Max Age: 0\150

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OBSTETRICS / GYNECOLOGY

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Hospital Affiliation: TRI CITY


MEDICAL CTR, PALOMAR


MEDICAL CENTER

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
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OBSTETRICS / GYNECOLOGY

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 Website: www.ihpsocal.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
SCHWEIKERT, SUZANNE






Provider ID: 206426
 Provider Gender: Female
 License Number: A60958
 NPI: 1477560142
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, PALOMAR MEDICAL CENTER
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
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 Provider ID: 206426




Provider Gender: Female
 License Number: A60958
 NPI: 1477560142
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, PALOMAR MEDICAL CENTER
 Board Certified Specialty: No
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OBSTETRICS / GYNECOLOGY
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 Hospital Affiliation: SHARP MEMORIAL HOSPITAL, TRI

CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, PALOMAR MEDICAL CENTER
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OBSTETRICS / GYNECOLOGY








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 Spoken: Spanish
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 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL, TRI
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 PALOMAR MEDICAL CENTER
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OBSTETRICS / GYNECOLOGY







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 PALOMAR MEDICAL CENTER
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 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-5:00PM

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
 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: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150

American Sign Language (ASL): Cultural Competency: N
 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

150 VALPRED RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
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 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Y
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 NPI: 1215135306
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 Provider Language(s) Spoken: Hindi, Spanish

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 Min/Max Age: 0\150
 American Sign Language (ASL): N
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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
 150 VALPRED 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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

 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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

 150 VALPRED A RD
 SAN MARCOS, CA 92069
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 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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






 150 VALPRED A RD

SAN MARCOS, CA 92069
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 Min/Max Age: 0\150
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PEDIATRICS

POSADAS, EMERITO

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 Provider Gender: Male
 License Number: A48980
 NPI: 1720093198
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 Provider Language(s) Spoken: Spanish, Tagalog
 Cultural Competency: N
 Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
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PEDIATRICS

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 Cultural Competency: N
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Board Certified Specialty: No




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PEDIATRICS

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PEDIATRICS

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 MEDICAL CENTER

Board Certified Specialty: No






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 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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


 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-6:00PM

PEDIATRICS

QUINTERO, CAROLYN



Provider ID: 614767
 Provider Gender: Female
 NPI: 1023033156
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 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
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-6:00PM
 SA 8:00AM-5:00PM

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
 150 VALPRED A RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
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 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
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 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



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 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
 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: Y
 Min/Max Age: 0\150
 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
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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
 📍 150 VALPRED A RD
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 CHILDRENS HOSPITAL SAN
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736-6767
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

📍 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-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
 📍 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: Y
 Min/Max Age: 0\999
 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)
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 MEDICAL CENTER
 Board Certified Specialty: No
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 📞 Phone: (760) 736-6767
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 American Sign Language (ASL):

N

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License Number: PA17718

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Provider Language(s) Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 *Phone: (760) 736-6767*

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Medi-Cal Open Panel: Y

Min/Max Age: 0\999

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American Sign Language (ASL):

N

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PHYSICIANS ASSISTANT

BLAKESPEAR, JEREMY

Provider ID: 206426

Provider Gender: Male

License Number: PA19825


NPI: 1750474177


Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL): *Medi-Cal Open Panel: Y*
N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

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Min/Max Age: 0\150

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
 150 VALPRED A RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
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PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 206426
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 License Number: PA22667
 NPI: 1174964001
 Provider English Spoken: Y
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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

📍 150 VALPRED A RD
 SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
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 PROVIDER

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Provider ID: 206426
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Min/Max Age: 0\150
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
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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH

Provider ID: 206426
Provider Gender: Female
License Number: PA51867
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Provider English Spoken: Y
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Cultural Competency: N
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PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH

Provider ID: 206426
Provider Gender: Female
License Number: PA51867
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Provider English Spoken: Y
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Cultural Competency: N
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Phone: (760) 736-6767
After Hours Phone: (760) 736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

SAN YSIDRO

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 206292

Provider Gender: Female

License Number: C52581

NPI: 1053300251

Provider English Spoken: Y
Provider Language(s)
Spoken: Cambodian, Hindi,

Spanish, Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 206292

Provider Gender: Female

License Number: C52581

NPI: 1053300251

Provider English Spoken: Y

Provider Language(s)
Spoken: Cambodian, Hindi,
Spanish, Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No


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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

CARDIOVASCULAR DISEASE

PONCE, SONIA

Provider ID: 206292

Provider Gender: Female

License Number: A145008


NPI: 1164659033


Provider English Spoken: Y
Cultural Competency: N


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

Board Certified Specialty: No

 *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: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

CARDIOVASCULAR DISEASE

PONCE, SONIA

Provider ID: 206292

Provider Gender: Female

License Number: A145008

NPI: 1164659033


Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

 *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: Y

Min/Max Age: 0\150

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

 *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: Y

Min/Max Age: 0\150

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

 *3364 BEYER BLVD SAN YSIDRO, CA 92173*

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 *Website: https://www.syhealth.org/locations*

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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






 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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

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





 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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

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




 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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

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

 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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

GUADARRAMA, IGNACIO

Provider ID: 227469
Provider Gender: Male
License Number: NP95003671
NPI: 1821331174
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

 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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

GUADARRAMA, IGNACIO

Provider ID: 227469
Provider Gender: Male

License Number: NP95003671 N
 NPI: 1821331174
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

HACINAS, REYNALDO

Provider ID: 206292
 Provider Gender: Male
 License Number: NP95003024
 NPI: 1215304860
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

HACINAS, REYNALDO

Provider ID: 206292
 Provider Gender: Male
 License Number: NP95003024
 NPI: 1215304860
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\150

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER


Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM

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
 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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

 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: Y

Min/Max Age: 0\150

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

 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: Y

Min/Max Age: 0\150

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

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

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

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

CERTIFIED NURSE

PRACTITIONER

PITTMAN, LILIANA

Provider ID: 227469

Provider Gender: Female


License Number: NP95017732


NPI: 1326599002


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

PRACTITIONER

PITTMAN, LILIANA

Provider ID: 227469


Provider Gender: Female


License Number: NP95017732
NPI: 1326599002


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

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

 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: Y

Min/Max Age: 0\150

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

 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: Y

Min/Max Age: 0\150

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
Cultural Competency: N

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

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
Cultural Competency: N

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

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

 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: Y

Min/Max Age: 0\150

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

CRUZ, MICHAEL

Provider ID: 206292

Provider Gender: Male

License Number: A138772

NPI: 1265851133

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

CRUZ, MICHAEL

Provider ID: 206292

Provider Gender: Male

License Number: A138772

NPI: 1265851133

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

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

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: Y

Min/Max Age: 0\150

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

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: Y

Min/Max Age: 0\150

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

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:00PM

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
 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: Y
 Min/Max Age: 0\150
 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
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
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 Website: www.syhealth.org/clinics/san-ysidro-health-center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE



ARRIETA, NOEMI

Provider ID: 206292
 Provider Gender: Female
 License Number: 20A11153
 NPI: 1912223496
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
 Board Certified Specialty: No
 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

- center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM

FAMILY PRACTICE



ARRIETA, NOEMI





Provider ID: 206292
 Provider Gender: Female
 License Number: 20A11153
 NPI: 1912223496
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 Board Certified Specialty: No


 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM

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




 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center


Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:30AM-5:00PM


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



 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100

 Website: syhealth.org/clinics/maternal-child-health-center


Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:30AM-5:00PM

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

 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM

FAMILY PRACTICE

CAMPOS, MELISSA

Provider ID: 227411
 Provider Gender: Female
 License Number: A138474
 NPI: 1427475318
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
 Board Certified Specialty: No

4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)

662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CAMPOS, MELISSA

Provider ID: 227411
 Provider Gender: Female
 License Number: A138474
 NPI: 1427475318
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
 Board Certified Specialty: No

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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CARRIEDO CENICEROS, MARIA

Provider ID: 206292

Provider Gender: Female
 License Number: A78373
 NPI: 1295746618
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 205-6341
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org /clinics/san-ysidro-health-center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CARRIEDO CENICEROS, MARIA

Provider ID: 206292
 Provider Gender: Female
 License Number: A78373
 NPI: 1295746618
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 205-6341
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org

/clinics/san- ysidro- health
- center
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CASTILLO, STEPHANIE

Provider ID: 206292
Provider Gender: Female
License Number: A159673
NPI: 1902330723
☑ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

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License Number: A159673
NPI: 1902330723

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Cultural Competency: N
Board Certified Specialty: No
📍 4004 BEYER BLVD
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- center

Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

CEVALLOS, JAMES

Provider ID: 206292
Provider Gender: Male
License Number: A55469
NPI: 1720181829
☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173
☎ Phone: (619) 662-4100
Fax: (619) 205-6341
📞 After Hours Phone: (619)
662-4100
🌐 Website: www.syhealth.org
/clinics/san- ysidro- health

- center
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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N
♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CEVALLOS, JAMES

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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
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☎ Phone: (619) 662-4100
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/clinics/san- ysidro- health
- center
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CORONADO, MYRNA

Provider ID: 206292

Provider Gender: Female
 License Number: A112627
 NPI: 1710147566
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE
CORONADO, MYRNA

Provider ID: 206292
 Provider Gender: Female
 License Number: A112627
 NPI: 1710147566
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 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
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 Website: www.syhealth.org
 /clinics/san- ysidro- health
 - center
 Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE
CORONADO, MYRNA

Provider ID: 227411
 Provider Gender: Female
 License Number: A112627
 NPI: 1710147566
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 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- c
 enter
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE
CORONADO, MYRNA

Provider ID: 227411
 Provider Gender: Female
 License Number: A112627
 NPI: 1710147566
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N

Board Certified Specialty: No
 4050 BEYER BLVD
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 662-4100
 Website: syhealth.org/clinic
 s/maternal- child- health- c
 enter
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE
DALUGDUGAN, ESTHER

Provider ID: 206292
 Provider Gender: Female
 License Number: A112511
 NPI: 1962662718
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Tagalog
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE
DALUGDUGAN, ESTHER
 Provider ID: 206292
 Provider Gender: Female
 License Number: A112511
 NPI: 1962662718

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Tagalog
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR
 Board Certified Specialty: No

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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FAMILY PRACTICE
ESTRADA, JOHANNA
 Provider ID: 206292
 Provider Gender: Female
 License Number: A127188
 NPI: 1255698155

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
 VISTA, SCRIPPS GREEN
 HOSPITAL, SCRIPPS
 MEMORIAL HOSPITAL
 Board Certified Specialty: No

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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM

FAMILY PRACTICE
ESTRADA, JOHANNA
 Provider ID: 206292
 Provider Gender: Female
 License Number: A127188
 NPI: 1255698155

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, SCRIPPS GREEN
 HOSPITAL, SCRIPPS
 MEMORIAL HOSPITAL
 Board Certified Specialty: No

4004 BEYER BLVD
 SAN YSIDRO, CA 92173

Phone: (619) 662-4100
 After Hours Phone: (619)
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 Website: www.syhealth.org
 /clinics/san-ysidro-health
 -center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM

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

4004 BEYER BLVD
 SAN YSIDRO, CA 92173
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 Website: www.syhealth.org
 /clinics/san-ysidro-health
 -center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

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

 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

- center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

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

 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

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

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

 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

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 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

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 3364 BEYER BLVD


SAN YSIDRO, CA 92173

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 After Hours Phone: (619)




662-4100

 Website: <https://www.syhealth.org/locations>

alth.org/locations
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 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
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 662-4100
 Website: *www.syhealth.org*
/clinics/san-ysidro-health-center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150

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
 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: Y
 Min/Max Age: 0\150
 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
 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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

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
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
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Medi-Cal Open Panel: Y

Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-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
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
Fax: (619) 205-6341
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org /clinics/san-ysidro-health-center*


Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

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
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
Fax: (619) 205-6341
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org /clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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




 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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

 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LEUTE, ERIC

Provider ID: 206292
 Provider Gender: Male
 License Number: A80832
 NPI: 1720171507
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

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

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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

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

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: Y

Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

4004 BEYER BLVD
SAN YSIDRO, CA 92173

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662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NAVARRO, VANESSA

Provider ID: 227469
Provider Gender: Female
License Number: A113624
NPI: 1952563421

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

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

Board Certified Specialty: No

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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NAVARRO, VANESSA

Provider ID: 227469

Provider Gender: Female

License Number: A113624

NPI: 1952563421

Provider English Spoken: Y

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Board Certified Specialty: No

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SAN YSIDRO, CA 92173

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After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

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
 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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM

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
 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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM






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
 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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM



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
 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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ORTIZ ILIZALITURRI, ANA

Provider ID: 227411
 Provider Gender: Female
 License Number: A178949
 NPI: 1316407026
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
 Board Certified Specialty: No
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PROVIDER
 Hours: M-F 8:30AM-5:00PM



FAMILY PRACTICE

ORTIZ ILIZALITURRI, ANA

Provider ID: 206292
 Provider Gender: Female
 License Number: A178949
 NPI: 1316407026
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ORTIZ ILIZALITURRI, ANA

Provider ID: 206292
 Provider Gender: Female
 License Number: A178949
 NPI: 1316407026
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish






Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA



Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ORTIZ ILIZALITURRI, ANA




Provider ID: 227411
 Provider Gender: Female
 License Number: A178949
 NPI: 1316407026
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
 Board Certified Specialty: No
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100


 Website: syhealth.org/clinics/maternal-child-health-center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE


RAJAIPOUR, NEGIN

Provider ID: 206292
 Provider Gender: Female
 License Number: A145480
 NPI: 1508286709
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi
 Cultural Competency: N
 Hospital Affiliation: CHULA VISTA COMM HOSP
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM

FAMILY PRACTICE

RAJAIPOUR, NEGIN

Provider ID: 206292
 Provider Gender: Female
 License Number: A145480
 NPI: 1508286709
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi
 Cultural Competency: N
 Hospital Affiliation: CHULA VISTA COMM HOSP
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM


FAMILY PRACTICE

RAJAIPOUR, NEGIN

Provider ID: 227469
 Provider Gender: Female
 License Number: A145480
 NPI: 1508286709
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi
 Cultural Competency: N
 Hospital Affiliation: CHULA VISTA COMM HOSP

Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


RAJAIPOUR, NEGIN

Provider ID: 227469
 Provider Gender: Female
 License Number: A145480
 NPI: 1508286709
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi
 Cultural Competency: N

Hospital Affiliation: CHULA VISTA COMM HOSP

Board Certified Specialty: No

 3364 BEYER BLVD
 SAN YSIDRO, CA 92173
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 After Hours Phone: (619) 662-4100

 Website: <https://www.syhealth.org/locations>
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

 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: Y

Min/Max Age: 0\150

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


ROJAS, STEVEN

Provider ID: 206292

Provider Gender: Male

License Number: A132982

NPI: 1801230297


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE


ROJAS, STEVEN

Provider ID: 206292

Provider Gender: Male

License Number: A132982

NPI: 1801230297


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
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 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

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

 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: Y

Min/Max Age: 0\150



American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM





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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

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

 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: Y

Min/Max Age: 0\150


American Sign Language (ASL): N





 Accessibility: CONTACT PROVIDER

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

 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: Y

Min/Max Age: 0\150


American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SHAHTAJI, ALAN

Provider ID: 206292
Provider Gender: Male
License Number: 20A11087
NPI: 1972751089


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
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 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER




FAMILY PRACTICE

SHAHTAJI, ALAN

Provider ID: 206292
Provider Gender: Male
License Number: 20A11087
NPI: 1972751089

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
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 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


SNYDER, CHRISTOPHER

Provider ID: 206292

Provider Gender: Male

License Number: 20A7502

NPI: 1922041235

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

Hospital - Downey, JOHN F KENNEDY MEMORIAL HOSP,

CEDARS SINAI MEDICAL



CENTER, SCRIPPS MEMORIAL HOSPITAL ENCINITAS,


EISENHOWER MEDICAL CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL): Provider ID: 206292

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


SNYDER, CHRISTOPHER


Provider ID: 206292

Provider Gender: Male

License Number: 20A7502

NPI: 1922041235

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

Hospital - Downey, JOHN F

KENNEDY MEMORIAL HOSP,

CEDARS SINAI MEDICAL



CENTER, SCRIPPS MEMORIAL HOSPITAL ENCINITAS,


EISENHOWER MEDICAL CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

STALEY, MICHAELA

Provider Gender: Female



License Number: A157772


NPI: 1912438250

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
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 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

STALEY, MICHAELA

Provider ID: 206292

Provider Gender: Female



License Number: A157772


NPI: 1912438250

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SWEET, PATRICK

Provider ID: 206292

Provider Gender: Male

License Number: A101827

NPI: 1457407702


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: HOAG
HOSPITAL IRVINE, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, GROSSMONT
HOSPITAL, SCRIPPS


MEMORIAL HOSPITAL,
DESERT REGIONAL MED CTR,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
PIONEERS MEMORIAL
HOSPITAL, PIONEERS
MEMORIAL HOSPITAL

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

SWEET, PATRICK

Provider ID: 206292

Provider Gender: Male

License Number: A101827

NPI: 1457407702


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: HOAG
HOSPITAL IRVINE, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, GROSSMONT
HOSPITAL, SCRIPPS


MEMORIAL HOSPITAL,
DESERT REGIONAL MED CTR,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
PIONEERS MEMORIAL
HOSPITAL, PIONEERS
MEMORIAL HOSPITAL

Board Certified Specialty: No

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662-4100

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

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

 4004 BEYER BLVD
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662-4100

 Website: www.syhealth.org

/clinics/san- ysidro- health
- center
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TU 8:30AM-5:30PM

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
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
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662-4100
 Website: www.syhealth.org
/clinics/san- ysidro- health
- center
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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

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 Website: www.syhealth.org
/clinics/san- ysidro- health
- center
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE



UTZ, JACK

Provider ID: 206292
Provider Gender: Male
License Number: A183145
NPI: 1194353094
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
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662-4100

 Website: www.syhealth.org
/clinics/san- ysidro- health
- center
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

UTZ, JACK


Provider ID: 206292
Provider Gender: Male
License Number: A183145
NPI: 1194353094
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
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/clinics/san- ysidro- health
- center
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

VAN HOLLEBEKE, RACHEL






Provider ID: 206292
Provider Gender: Female
License Number: A177337
NPI: 1497217756

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM SA 8:30AM-2:00PM

FAMILY PRACTICE



VAN HOLLEBEKE, RACHEL

Provider ID: 206292
Provider Gender: Female
License Number: A177337
NPI: 1497217756
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
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 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
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 *Website: www.syhealth.org /clinics/san-ysidro-health-center*
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM SA 8:30AM-2:00PM

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




 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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

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

 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: Y
Min/Max Age: 0\150
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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR,

Provider ID: 227411
 NPI: 1558852947

 Provider English Spoken: Y
 Cultural Competency: N
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER,

Provider ID: 206292
 NPI: 1952364747


 Provider English Spoken: Y
 Cultural Competency: N
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 205-6305
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center


Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM

FQHC

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER,

Provider ID: 206292
 NPI: 1952364747

 Provider English Spoken: Y
 Cultural Competency: N
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 205-6305
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER


Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM

FQHC

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS,

Provider ID: 227469
 NPI: 1801438239

 Provider English Spoken: Y
 Cultural Competency: N
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM


FQHC

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS,

Provider ID: 227469
 NPI: 1801438239

 Provider English Spoken: Y
 Cultural Competency: N
 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: Y

Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM




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

 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: Y



Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM

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

 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: Y

Min/Max Age: 0\150


American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM


GENERAL PRACTICE

TEJEDA, FRANCISCO

Provider ID: 206292
 Provider Gender: Male
 License Number: A66885
 NPI: 1407940075

 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No


 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

GENERAL PRACTICE

TEJEDA, FRANCISCO

Provider ID: 206292
 Provider Gender: Male
 License Number: A66885
 NPI: 1407940075

 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER

GYNECOLOGY

CALDERON, JORGE

Provider ID: 206292
 Provider Gender: Male
 License Number: A40480

NPI: 1407800881

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, PARADISE VALLEY


HOSPITAL, LOMPOC VALLEY


MEDICAL CENTER


Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

GYNECOLOGY


CALDERON, JORGE


Provider ID: 206292

Provider Gender: Male

License Number: A40480

NPI: 1407800881

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, PARADISE VALLEY


HOSPITAL, LOMPOC VALLEY


MEDICAL CENTER


Board Certified Specialty: No

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 4004 BEYER BLVD

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- center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

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

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

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 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

4004 BEYER BLVD
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Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CARPENTER, 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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

INTERNAL MEDICINE

CARPENTER, 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

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

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
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 205-6341

After Hours Phone: (619)
 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

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
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 205-6341
 After Hours Phone: (619)

662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

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: Y
 Min/Max Age: 0\150
 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

3364 BEYER BLVD
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 Website: <https://www.syhealth.org/locations>
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

INTERNAL MEDICINE

DE LA ROSA, JOSE

Provider ID: 206292
 Provider Gender: Male
 License Number: A49267
 NPI: 1689646572
 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

DE LA ROSA, JOSE

Provider ID: 206292

Provider Gender: Male

License Number: A49267

NPI: 1689646572

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

INTERNAL MEDICINE

DILLON, BENEDICT

Provider ID: 227411

Provider Gender: Male

License Number: A111118

NPI: 1710142708

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish

Cultural Competency: N

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

Board Certified Specialty: No

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

DILLON, BENEDICT

Provider ID: 227411

Provider Gender: Male

License Number: A111118

NPI: 1710142708

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

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

Board Certified Specialty: No

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-8:00PM
 SA 8:00AM-2:00PM

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-8:00PM
 SA 8:00AM-2:00PM

INTERNAL MEDICINE

KAUFER, DAVID

Provider ID: 206292

Provider Gender: Male

License Number: G80107


NPI: 1710082789


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM

INTERNAL MEDICINE

KAUFER, DAVID

Provider ID: 206292

Provider Gender: Male

License Number: G80107


NPI: 1710082789


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
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 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM

INTERNAL MEDICINE


KAUFER, DAVID

Provider ID: 227469

Provider Gender: Male

License Number: G80107


NPI: 1710082789


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

KAUFER, DAVID

Provider ID: 227469
 Provider Gender: Male
 License Number: G80107
 NPI: 1710082789
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 206292
 Provider Gender: Female
 License Number: G71855
 NPI: 1124176102
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150

American Sign Language (ASL): EISENHOWER MEDICAL CTR
 N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 206292
 Provider Gender: Female
 License Number: G71855
 NPI: 1124176102
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 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:

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: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 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

 *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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

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

 *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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

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

 *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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT*

PROVIDER

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

 *4004 BEYER BLVD*

SAN YSIDRO, CA 92173

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 *Website: www.syhealth.org /clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

RAMIREZ SANCHEZ, CLAUDIA


Provider ID: 206292

Provider Gender: Female

License Number: A160493

NPI: 1659720555

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL



CHULA VISTA

Board Certified Specialty: No



 4004 BEYER BLVD
SAN YSIDRO, CA 92173
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662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

RAMIREZ SANCHEZ, CLAUDIA

Provider ID: 206292
Provider Gender: Female
License Number: A160493
NPI: 1659720555
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No

 4004 BEYER BLVD
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Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE



SALERNO, MARIANA


Provider ID: 206292
Provider Gender: Female
License Number: A131021
NPI: 1598921645
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Providence
St. Joseph Hospital Eureka
Board Certified Specialty: No

 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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE



SALERNO, MARIANA

Provider ID: 206292
Provider Gender: Female
License Number: A131021
NPI: 1598921645
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Providence
St. Joseph Hospital Eureka
Board Certified Specialty: No
 4004 BEYER BLVD

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Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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

 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: Y
Min/Max Age: 0\150
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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

SHEIKH MOHAMED, AMIRA

Provider ID: 227469

Provider Gender: Female

License Number: A153975

NPI: 1831583079

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, French,
Hindi, Italian, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL,


SCRIPPS MERCY HOSPITAL


CHULA VISTA

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

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

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

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662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

📍 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: Y
Min/Max Age: 0\150
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
 📍 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: Y
Min/Max Age: 0\150
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
 📍 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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 ♿ *Accessibility: CONTACT PROVIDER*

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
 📍 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
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enter
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 N
 ♿ Accessibility: CONTACT PROVIDER

INTERVENTIONAL

CARDIOLOGY

MOUSSAVIAN, MEHRAN

Provider ID: 206292
 Provider Gender: Male
 License Number: 20A7241
 NPI: 1689788234
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi
 Cultural Competency: N
 Hospital Affiliation: SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout
 Board Certified Specialty: No
 📍 4004 BEYER BLVD SAN YSIDRO, CA 92173
 ☎ Phone: (619) 662-4100
 📠 Fax: (619) 205-6341
 📞 After Hours Phone: (619) 662-4100
 🌐 Website: www.syhealth.org /clinics/san- ysidro- health - center

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
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INTERVENTIONAL

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 Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

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
 📍 4050 BEYER BLVD SAN YSIDRO, CA 92173
 ☎ Phone: (619) 662-4100
 📞 After Hours Phone: (619) 662-4100
 🌐 Website: syhealth.org/clinic s/maternal- child- health- center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:00PM
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

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Medi-Cal Open Panel: Y
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 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

CARR, MIANDA

Provider ID: 227411
 Provider Gender: Female
 License Number: A104660
 NPI: 1083815823
 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: ST
 JOSEPHS MEDICAL CENTER,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, SCRIPPS MERCY
 HOSPITAL

Board Certified Specialty: No
 4050 BEYER BLVD
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Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

OBSTETRICS / GYNECOLOGY

CARR, MIANDA

Provider ID: 206292
 Provider Gender: Female
 License Number: A104660
 NPI: 1083815823
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: ST
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 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, SCRIPPS MERCY
 HOSPITAL

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- center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
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 PROVIDER

OBSTETRICS / GYNECOLOGY

CARR, MIANDA

Provider ID: 206292
 Provider Gender: Female
 License Number: A104660
 NPI: 1083815823
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: ST
 JOSEPHS MEDICAL CENTER,
 SCRIPPS MERCY HOSPITAL
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OBSTETRICS / GYNECOLOGY

CARR, MIANDA

Provider ID: 227411
 Provider Gender: Female

License Number: A104660
 NPI: 1083815823
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: ST
 JOSEPHS MEDICAL CENTER,
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 CHULA VISTA, SCRIPPS MERCY
 HOSPITAL

Board Certified Specialty: No

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Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

OBSTETRICS / GYNECOLOGY

CARSON, LATISA

Provider ID: 206292
 Provider Gender: Female
 License Number: A72235
 NPI: 1245229129

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR
 Board Certified Specialty: No

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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

OBSTETRICS / GYNECOLOGY

CARSON, LATISA

Provider ID: 206292
 Provider Gender: Female
 License Number: A72235
 NPI: 1245229129

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 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
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Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

OBSTETRICS / GYNECOLOGY

DANESHMAND, SHAHRAM

Provider ID: 206292

Provider Gender: Male
 License Number: A63844
 NPI: 1891867412
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, GROSSMONT
 HOSPITAL, SHARP MEMORIAL
 HOSPITAL, SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS, SCRIPPS
 MEMORIAL HOSPITAL, TRI
 CITY MEDICAL CTR, SHARP
 MARY BIRCH HOSP FOR
 WOMEN AND NEWBORNS,
 SHARP MARY BIRCH HOSP
 FOR WOMEN AND
 NEWBORNS, SCRIPPS GREEN
 HOSPITAL, SCRIPPS MERCY
 HOSPITAL, SCRIPPS MERCY
 HOSPITAL CHULA VISTA

Board Certified Specialty: No

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Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM

OBSTETRICS / GYNECOLOGY
DANESHMAND, SHAHRAM

Provider ID: 227411

Provider Gender: Male

License Number: A63844

NPI: 1891867412

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, SCRIPPS GREEN
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA

Board Certified Specialty: No

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-1948

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY
DANESHMAND, SHAHRAM

Provider ID: 227411

Provider Gender: Male

License Number: A63844

NPI: 1891867412

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Provider Language(s)
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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
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HOSPITAL, SHARP MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL, TRI
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SHARP MARY BIRCH HOSP
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HOSPITAL, SCRIPPS MERCY
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Board Certified Specialty: No

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 Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM

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
 📍 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
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OBSTETRICS / GYNECOLOGY
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Provider ID: 206292
 Provider Gender: Female

License Number: 20A9907
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OBSTETRICS / GYNECOLOGY
DINH, MY

Provider ID: 227411
 Provider Gender: Female
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 NPI: 1316146996
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PROVIDER

OBSTETRICS / GYNECOLOGY
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 ☑ Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
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 🌐 Website: syhealth.org/clinics/maternal-child-health-center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
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Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
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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

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Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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
Cultural Competency: N
Board Certified Specialty: No
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA

Provider ID: 206292
Provider Gender: Female
License Number: A175006

NPI: 1255878997
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4004 BEYER BLVD
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OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA

Provider ID: 227411
Provider Gender: Female
License Number: A175006
NPI: 1255878997
Provider English Spoken: Y
Cultural Competency: N
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OBSTETRICS / GYNECOLOGY


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 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM





OBSTETRICS / GYNECOLOGY

JENKINS, ENCHANTA

Provider ID: 227411
Provider Gender: Female
License Number: C143625
NPI: 1285604702

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY

HOSPITAL
Board Certified Specialty: No

 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
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Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*





OBSTETRICS / GYNECOLOGY

JENKINS, ENCHANTA

Provider ID: 227411
Provider Gender: Female
License Number: C143625
NPI: 1285604702

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

 4050 BEYER BLVD
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Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*





OBSTETRICS / GYNECOLOGY

MAJERSKI GONZALEZ, 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

 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: syhealth.org/clinics/maternal-child-health-center*

Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

MAJERSKI GONZALEZ, 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
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

Provider ID: 227411
Provider Gender: Male
License Number: A47906
NPI: 1437181922
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: MERCY GENERAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, SAN JOAQUIN COMM HOSP,

SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER
Board Certified Specialty: No
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO


Provider ID: 227411
Provider Gender: Male
License Number: A47906
NPI: 1437181922
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: MERCY GENERAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP JOAQUIN COMM HOSP, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, KERN MEDICAL CENTER
Board Certified Specialty: No
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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
 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: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SHORT, ABIADE

Provider ID: 206292
 Provider Gender: Male
 License Number: A114893
 NPI: 1750559589
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: PARADISE
 VALLEY HOSPITAL, SHARP
 CHULA VISTA MED CTR,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, SCRIPPS MERCY
 HOSPITAL
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


SHORT, ABIADE






Provider ID: 206292
 Provider Gender: Male
 License Number: A114893
 NPI: 1750559589
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N

Hospital Affiliation: PARADISE
 VALLEY HOSPITAL, SHARP
 CHULA VISTA MED CTR,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, SCRIPPS MERCY
 HOSPITAL
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY


MANI, NASRIN


Provider ID: 227469
 Provider Gender: Female
 License Number: A40473
 NPI: 1023061314
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, Faroese,
 Farsi, Persian, Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL, SHARP
 MEMORIAL HOSPITAL, UCSD
 MEDICAL CTR, SHARP CHULA
 VISTA MED CTR, GROSSMONT
 HOSPITAL
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY








MANI, NASRIN

Provider ID: 227469
 Provider Gender: Female
 License Number: A40473
 NPI: 1023061314
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, Faroese, Farsi, Persian, Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR, SHARP CHULA VISTA MED CTR, GROSSMONT HOSPITAL
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 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
 Cultural Competency: N
 Board Certified Specialty: No
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinic-s/maternal-child-health-center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
Cultural Competency: N
Board Certified Specialty: No

 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: syhealth.org/clinics/maternal-child-health-center*
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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

 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
Fax: (619) 205-1948
 *After Hours Phone: (619) 662-4100*
 *Website: syhealth.org/clinics/maternal-child-health-center*
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

BARBADILLO, FERDINAND

Provider ID: 206292
Provider Gender: Male
License Number: A49307
NPI: 1982662193
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Board Certified Specialty: No

 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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT*

PROVIDER
Hours: M-TU 8:30AM-5:30PM

PEDIATRICS

BARBADILLO, FERDINAND

Provider ID: 206292
Provider Gender: Male
License Number: A49307
NPI: 1982662193
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Board Certified Specialty: No

 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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-TU 8:30AM-5:30PM

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

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-1948

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinic
s/maternal- child- health- c
enter

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

CABARLO, JEHRIB

Provider ID: 227411

Provider Gender: Male

License Number: 20A8516

NPI: 1770661340

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

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- c
enter

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

CABARLO, JEHRIB

Provider ID: 227411

Provider Gender: Male

License Number: 20A8516

NPI: 1770661340

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

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- c
enter

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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- c
enter

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

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- c
enter

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

 4050 BEYER BLVD

SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

PEDIATRICS





GHAHREMANI, SIMIN

Provider ID: 206292
 Provider Gender: Female
 License Number: C51110
 NPI: 1508904657

Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi


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

Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM

PEDIATRICS


GHAHREMANI, SIMIN

Provider ID: 206292
 Provider Gender: Female
 License Number: C51110
 NPI: 1508904657


Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi

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

Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM

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
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 205-1948
 After Hours Phone: (619)
 662-4100
 Website: syhealth.org/clinic
 s/maternal- child- health- c
 enter
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

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
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 205-1948
 After Hours Phone: (619)
 662-4100
 Website: syhealth.org/clinic
 s/maternal- child- health- c
 enter
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

PEDIATRICS

PIANSAY, MARIA CORAZON

Provider ID: 206292

Provider Gender: Female

License Number: A93785

NPI: 1669680351

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

PEDIATRICS

PIANSAY, MARIA CORAZON

Provider ID: 206292

Provider Gender: Female

License Number: A93785

NPI: 1669680351

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

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

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

enter

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): DIEGO

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

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1948

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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


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Min/Max Age: 0\150

American Sign Language (ASL):

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 Accessibility: CONTACT
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PEDIATRICS


SAHMS, TIMOTHY


Provider ID: 206292

Provider Gender: Male

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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

 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: Y

Min/Max Age: 0\150

American Sign Language (ASL): Provider Gender: Female

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-7:30PM

SA 8:30AM-2:00PM

PEDIATRICS


SAHMS, TIMOTHY

Provider ID: 206292

Provider Gender: Male

License Number: G51462

NPI: 1780697276

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-7:30PM

SA 8:30AM-2:00PM

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

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

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Min/Max Age: 0\150

American Sign Language (ASL):

N

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Min/Max Age: 0\150

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

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

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Provider ID: 227411

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 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:00PM

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
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 ☎ Phone: (619) 662-4100
 📠 Fax: (619) 205-1948
 🕒 After Hours Phone: (619) 662-4100
 🌐 Website: syhealth.org/clinics/maternal-child-health-center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BUCKNER, JOSEPH

Provider ID: 206292
 Provider Gender: Male
 License Number: PA18363
 NPI: 1215909205
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100
 🕒 After Hours Phone: (619) 662-4100
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
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 Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 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
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/locations
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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
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 SAN YSIDRO, CA 92173
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 662-4100
 Website: www.syhealth.org
 /clinics/san- ysidro- health
 - center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PHYSICIANS ASSISTANT
PORTO MADURSKI, KRISTINE

Provider ID: 227411
 Provider Gender: Female
 License Number: PA16269
 NPI: 1053403782
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: syhealth.org/clinic
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 enter
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

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

PHYSICIANS ASSISTANT
PORTO MADURSKI, KRISTINE

Provider ID: 227411
 Provider Gender: Female
 License Number: PA16269
 NPI: 1053403782
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 4050 BEYER BLVD
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 Website: syhealth.org/clinic
 s/maternal- child- health- c
 enter

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 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: Y
 Min/Max Age: 0\150
 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
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
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 662-4100
 Website: www.syhealth.org
 /clinics/san- ysidro- health
 - center
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

 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: Y
Min/Max Age: 0\150
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

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 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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

 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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
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 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

 4004 BEYER BLVD
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662-4100
 Website: www.syhealth.org

[/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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

 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: Y
Min/Max Age: 0\150
American Sign Language (ASL):
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 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

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Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TRUJILLO, MIGUEL

Provider ID: 206292
Provider Gender: Male
License Number: PA15656
NPI: 1285806794
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No

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: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TRUJILLO, MIGUEL

Provider ID: 206292
Provider Gender: Male
License Number: PA15656
NPI: 1285806794
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No

4004 BEYER BLVD
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Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND

Board Certified Specialty: No

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: Y
Min/Max Age: 0\150
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
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Board Certified Specialty: No

3364 BEYER BLVD
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Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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

Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR

Board Certified Specialty: No

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

Fax: (619) 205-6341

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662-4100

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Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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NPI: 1790890788

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Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR

Board Certified Specialty: No

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL

THERAPIST

CLARK, SKYLAR

Provider ID: 227469

Provider Gender: Female

License Number: PT302385

NPI: 1457089187

📄 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

📍 3364 BEYER BLVD
SAN YSIDRO, CA 92173

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

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

REGISTERED PHYSICAL

THERAPIST

CLARK, SKYLAR

Provider ID: 227469

Provider Gender: Female

License Number: PT302385

NPI: 1457089187

📄 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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

REGISTERED PHYSICAL

THERAPIST

TORRES, JOANN

Provider ID: 206292

Provider Gender: Female

License Number: PT296607

NPI: 1134732522

📄 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173

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662-4100

🌐 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL

THERAPIST

TORRES, JOANN

Provider ID: 206292

Provider Gender: Female

License Number: PT296607

NPI: 1134732522

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

4004 BEYER BLVD
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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

SPEECH PATHOLOGIST

HILL, CARLA

Provider ID: 206292

Provider Gender: Female

License Number: SP9075

NPI: 1043950751

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

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662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

SPEECH PATHOLOGIST

HILL, CARLA

Provider ID: 206292

Provider Gender: Female

License Number: SP9075

NPI: 1043950751

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

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

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

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

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

PEDIATRICS

MANGINE, REGINA

Provider ID: 366456

Provider Gender: Female

NPI: 1417177577

Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

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

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

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Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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
 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
 515-2555
 Website: www.fhcsd.org
 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
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 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 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
 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
 515-2555
 Website: www.fhcsd.org
 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 Phone: (619) 515-2555

After Hours Phone: (619)
 515-2555
 Website: www.fhcsd.org
 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
 515-2555
 Website: www.fhcsd.org
 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CONSTANTINO, STEPHANIE

Provider ID: 206361

Provider Gender: Female

License Number: A149063

NPI: 1366824971

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin


Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): Provider Gender: Female

N

 Accessibility: CONTACT
PROVIDER

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

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

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

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

FAMILY PRACTICE

ROSE, PATRICIA

Provider ID: 206361

License Number: A76059


NPI: 1588677314


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555


 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

TU 8:30AM-7:00PM

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

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555


 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):  After Hours Phone: (619) 515-2555

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
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

 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
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FQHC


GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC,


Provider ID: 206361

NPI: 1508801069

 Provider English Spoken: Y
Cultural Competency: N

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555
Fax: (619) 462-5584

 Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Y
Min/Max Age: 0\150

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

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555

 Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY



ALIMONOS, LYSISTRATI

Provider ID: 206361

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031



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


Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555

 Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
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

 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
 515-2555

 Website: www.fhcsd.org
 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

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

 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
 515-2555

 Website: www.fhcsd.org
 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

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

 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
 515-2555

 Website: www.fhcsd.org
 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

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

 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
 515-2555

 Website: www.fhcsd.org
 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA

Provider ID: 206361

Provider Gender: Female

License Number: A118095

NPI: 1073701041
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL
 Board Certified Specialty: No
 8788 JAMACHA RD SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:30AM-5:30PM
 TU 8:30AM-7:00PM
 W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA

Provider ID: 206361
 Provider Gender: Female
 License Number: A118095
 NPI: 1073701041
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND

HEALTHCARE CTR, GROSSMONT HOSPITAL
 Board Certified Specialty: No
 8788 JAMACHA RD SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:30AM-5:30PM
 TU 8:30AM-7:00PM
 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

8788 JAMACHA RD SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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

8788 JAMACHA RD SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555
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 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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
 8788 JAMACHA RD
 SPRING VALLEY, CA 91977

 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


FOLCH TORRES-AGUIAR, BEATRIZ

Provider ID: 206361
Provider Gender: Female
License Number: A148014
NPI: 1457794752
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: N

Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA



Board Certified Specialty: No

 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):

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

OBSTETRICS / GYNECOLOGY
FOLCH TORRES-AGUIAR, BEATRIZ


Provider ID: 206361
Provider Gender: Female
License Number: A148014
NPI: 1457794752


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish, Yue Chinese*

Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No



 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 *Phone: (619) 515-2555*
 *After Hours Phone: (619) 515-2555*

 *Website: www.fhcsd.org*
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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



 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
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Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

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



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Email: angelad@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*


OBSTETRICS / GYNECOLOGY
LIPSCHITZ, LISA


Provider ID: 206361
Provider Gender: Female
License Number: A72005
NPI: 1649208711

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

Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No

 8788 JAMACHA RD
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Email: angelad@fhcsd.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

Hours: M 8:30AM-5:30PM
 TU 8:30AM-7:00PM
 W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206361
 Provider Gender: Female
 License Number: A72005
 NPI: 1649208711

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

Cultural Competency: N
 Hospital Affiliation: SHARP
 CORONADO HOSP AND
 HEALTHCARE CTR, SCRIPPS
 MERCY HOSPITAL,
 GROSSMONT HOSPITAL
 Board Certified Specialty: No

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 Website: www.fhcsd.org
 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Hours: M 8:30AM-5:30PM
 TU 8:30AM-7:00PM
 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
 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
 515-2555

Website: www.fhcsd.org
 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Hours: M 8:30AM-5:30PM
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 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
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Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Hours: M 8:30AM-5:30PM
 TU 8:30AM-7:00PM
 W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


**MELLENDEZ BERRIOS, IARA
 DEL**

Provider ID: 206361
 Provider Gender: Female
 License Number: A114181
 NPI: 1740514249


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

Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL,
 GROSSMONT HOSPITAL

Board Certified Specialty: No
 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
 515-2555

 Website: www.fhcsd.org
 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM
 TU 8:30AM-7:00PM
 W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MELENDEZ BERRIOS, IARA DEL



Provider ID: 206361
 Provider Gender: Female
 License Number: A114181
 NPI: 1740514249


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

Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL,
 GROSSMONT HOSPITAL

Board Certified Specialty: No


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 Website: www.fhcsd.org
 Email: angelad@fhcsd.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

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

TU 8:30AM-7:00PM
 W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO



Provider ID: 206361
 Provider Gender: Male
 License Number: A154298
 NPI: 1710316450


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

Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SHARP
 CORONADO HOSP AND
 HEALTHCARE CTR,
 GROSSMONT HOSPITAL

Board Certified Specialty: No

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 SPRING VALLEY, CA 91977

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 Website: www.fhcsd.org
 Email: angelad@fhcsd.org

Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 206361
 Provider Gender: Male
 License Number: A154298
 NPI: 1710316450



Provider English Spoken: Y


Provider Language(s)
 Spoken: Spanish

Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SHARP
 CORONADO HOSP AND
 HEALTHCARE CTR,
 GROSSMONT HOSPITAL

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Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA



Provider ID: 206361
 Provider Gender: Female
 License Number: A164859
 NPI: 1952751711


Provider English Spoken: Y
 Provider Language(s)
 Spoken: Hindi


Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL

Board Certified Specialty: No

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 515-2555

 Website: www.fhcsd.org
 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150

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




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

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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

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 Min/Max Age: 0\150
 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

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 Website: www.fhcsd.org
 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 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

 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555

 Website: www.fhcsd.org
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M 8:30AM-5:30PM
 TU 8:30AM-7:00PM
 W-F 8:30AM-5:30PM

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
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 PROVIDER
 Hours: M 8:30AM-5:30PM
 TU 8:30AM-7:00PM
 W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206361
 Provider Gender: Male
 License Number: G78814
 NPI: 1699790634
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,
 SHARP CORONADO HOSP
 AND HEALTHCARE CTR,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA
 Board Certified Specialty: No
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 515-2555
 Website: www.fhcsd.org
 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206361
 Provider Gender: Male
 License Number: G78814
 NPI: 1699790634
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL,
 SCRIPPS MERCY HOSPITAL,
 SHARP CORONADO HOSP
 AND HEALTHCARE CTR,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA
 Board Certified Specialty: No
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 9:00AM-5:00PM

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
 8788 JAMACHA RD
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
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 Accessibility: CONTACT
 PROVIDER

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
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 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

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
 8788 JAMACHA RD
 SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
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Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
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 Accessibility: CONTACT
 PROVIDER
 Hours: M 8:30AM-5:30PM
 TU 8:30AM-7:00PM
 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
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 Email: angelad@fhcsd.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

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
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 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M 8:30AM-5:30PM
 TU 8:30AM-7:00PM
 W-F 8:30AM-5:30PM

VALLEY CENTER

CLINIC OUTPATIENT

NEIGHBORHOOD

HEALTHCARE,

Provider ID: 519918
 NPI: 1437335148
 Provider English Spoken: Y
 Cultural Competency: N
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

CLINIC OUTPATIENT

NEIGHBORHOOD

HEALTHCARE,

Provider ID: 519918
 NPI: 1437335148
 Provider English Spoken: Y
 Cultural Competency: N
 28477 LIZARD ROCKS RD
 VALLEY CENTER, CA 92082
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 742-9919
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

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

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

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VALLEY CENTER, CA 92082

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 After Hours Phone: (760)
742-9919

 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

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

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

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

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

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

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FQHC


NEIGHBORHOOD HEALTHCARE,

Provider ID: 519918

NPI: 1437335148

Provider English Spoken: Y
Cultural Competency: N

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

FQHC


NEIGHBORHOOD HEALTHCARE,

Provider ID: 519918

NPI: 1437335148

Provider English Spoken: Y
Cultural Competency: N

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VALLEY CENTER, CA 92082

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Fax: (360) 462-2750

 After Hours Phone: (760) 742-9919

 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

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

 28714 VALLEY CENTER RD
STE L

VALLEY CENTER, CA 92082

 Phone: (760) 749-7770

Fax: (760) 751-9988

 After Hours Phone: (760) 749-7770

 Website: N/A

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

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






 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8:00AM-5:00PM

VISTA






CERTIFIED NURSE
PRACTITIONER

HALGEDAHL, YI
 Provider ID: 400339
 Provider Gender: Female

License Number: NP95006826
 NPI: 1619246907
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Mandarin
 Cultural Competency: N
 Board Certified Specialty: No
 134 GRAPEVINE RD
 VISTA, CA 92083
 Phone: (760) 631-5000
 After Hours Phone: (760)
 631-5000
 Website: www.vistacommunityclinic.org






Email: credentialing@vcc.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M 8:00AM-5:00PM
 TU 10:30AM-7:30PM
 W-F 8:00AM-5:00PM


CERTIFIED NURSE
PRACTITIONER
HALGEDAHL, YI

Provider ID: 400339
 Provider Gender: Female
 License Number: NP95006826
 NPI: 1619246907
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Mandarin
 Cultural Competency: N
 Board Certified Specialty: No
 134 GRAPEVINE RD
 VISTA, CA 92083
 Phone: (760) 631-5000
 After Hours Phone: (760)
 631-5000

 Website: www.vistacommunityclinic.org
 Email: credentialing@vcc.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M 8:00AM-5:00PM
 TU 10:30AM-7:30PM
 W-F 8:00AM-5:00PM

CERTIFIED NURSE
PRACTITIONER
SCHAEPE, RHODORA

Provider ID: 400339
 Provider Gender: Female
 License Number: NP7791
 NPI: 1700974789
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 134 GRAPEVINE RD
 VISTA, CA 92083
 Phone: (760) 631-5000
 After Hours Phone: (760)
 631-5000
 Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M 8:00AM-5:00PM
 TU 10:30AM-7:30PM
 W-F 8:00AM-5:00PM

**CERTIFIED NURSE
PRACTITIONER**

SCHAEPE, RHODORA

Provider ID: 400339

Provider Gender: Female

License Number: RN410247

NPI: 1700974789

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

**CERTIFIED NURSE
PRACTITIONER**

SCHAEPE, RHODORA

Provider ID: 400339

Provider Gender: Female

License Number: RN410247

NPI: 1700974789

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

134 GRAPEVINE RD
VISTA, CA 92083

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Email: credentialing@vcc.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

**CERTIFIED NURSE
PRACTITIONER**

SCHAEPE, RHODORA

Provider ID: 400339

Provider Gender: Female

License Number: NP7791

NPI: 1700974789

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

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631-5000

Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

TU 10:30AM-7:30PM

**CERTIFIED NURSE
PRACTITIONER**

WILLIAMS, JINA

Provider ID: 400339

Provider Gender: Female

License Number: NP95020624

NPI: 1225500259

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

**CERTIFIED NURSE
PRACTITIONER**

WILLIAMS, JINA

Provider ID: 400339

Provider Gender: Female

License Number: NP95020624

NPI: 1225500259



Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

134 GRAPEVINE RD
VISTA, CA 92083


Phone: (760) 631-5000

After Hours Phone: (760)

631-5000
 Website: www.vistacommunityclinic.org
 Email: credentialing@vcc.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 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
 134 GRAPEVINE RD
 VISTA, CA 92083
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
 Email: credentialing@vcc.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 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
 134 GRAPEVINE RD
 VISTA, CA 92083
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
 Email: credentialing@vcc.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE






NGUYEN, DANIELA

Provider ID: 664798
 Provider Gender: Female
 NPI: 1891069662
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 1000 VALE TERRACE DR
 VISTA, CA 92084
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website: N/A
 Medi-Cal Open Panel: Y
 Min/Max Age: 12\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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




FQHC


VCC DURIAN,

Provider ID: 411518
 NPI: 1851300123
 Provider English Spoken: Y
 Cultural Competency: N
 105 DURIAN ST STE A
 VISTA, CA 92083
 Phone: (844) 308-5003
 Fax: (760) 414-3892
 After Hours Phone: (844) 308-5003
 Website: www.vistacommunityclinic.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:00PM

FQHC

VCC DURIAN,

Provider ID: 411518
 NPI: 1851300123
 Provider English Spoken: Y
 Cultural Competency: N
 105 DURIAN ST STE A
 VISTA, CA 92083
 Phone: (844) 308-5003
 Fax: (760) 414-3892
 After Hours Phone: (844) 308-5003
 Website: www.vistacommunityclinic.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:00PM


FQHC


**VISTA COMMUNITY CLINIC
 GRAPEVINE,**

Provider ID: 400339
NPI: 1851300123

 *Provider English Spoken: Y*
Cultural Competency: N

 134 GRAPEVINE RD
 VISTA, CA 92083

 *Phone: (760) 631-5000*
Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*


 *Website: www.vistacommunityclinic.org*

Email: credentialing@vcc.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

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

TU 10:30AM-7:30PM


W-F 8:00AM-5:00PM


FQHC

**VISTA COMMUNITY CLINIC
 GRAPEVINE,**

Provider ID: 400339
NPI: 1851300123

 *Provider English Spoken: Y*
Cultural Competency: N

 134 GRAPEVINE RD
 VISTA, CA 92083

 *Phone: (760) 631-5000*
Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

 *Website: www.vistacommunityclinic.org*

Email: credentialing@vcc.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

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

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

GENERAL PRACTICE

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

 134 GRAPEVINE RD
 VISTA, CA 92083

 *Phone: (760) 631-5000*

 *After Hours Phone: (760) 631-5000*

 *Website: www.vistacommunityclinic.org*

Email: credentialing@vcc.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

GENERAL PRACTICE


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

 134 GRAPEVINE RD
 VISTA, CA 92083

 *Phone: (760) 631-5000*

 *After Hours Phone: (760) 631-5000*

 *Website: www.vistacommunityclinic.org*

Email: credentialing@vcc.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


PEDIATRICS

AMANI, RAMIN

Provider ID: 79901

Provider Gender: Male

NPI: 1659366292

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Farsi, Persian, Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 950 CIVIC CENTER DR STE A
 VISTA, CA 92083
 Phone: (760) 439-4839
 Fax: (760) 439-4841
 After Hours Phone: (760) 439-4839
 Website: N/A

Email: RAMINAMANIMD@GMAIL.COM
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU 9:00AM-4:00PM
 W 9:00AM-0:00PM
 TH-F 9:00AM-4:00PM

PEDIATRICS

AMBO, STANLEY

Provider ID: 52269
 Provider Gender: Male
 NPI: 1891735676
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ASSELIN, LYNETTE

Provider ID: 65507
 Provider Gender: Female
 NPI: 1053484568
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: TRI CITY MEDICAL CTR
 Board Certified Specialty: No

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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-6:00PM
 SA 9:00AM-1:00PM

PEDIATRICS

BEDROSIAN, DIANE

Provider ID: 80272
 Provider Gender: Female
 NPI: 1447323951
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: TRI CITY MEDICAL CTR
 Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-6:00PM
 SA 9:00AM-1:00PM

PEDIATRICS

CASTRO, JORGE

Provider ID: 100779
 Provider Gender: Male
 NPI: 1326082868
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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
 105 DURIAN ST STE A VISTA, CA 92083
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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
 105 DURIAN ST STE A VISTA, CA 92083
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 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
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-6:00PM

SA 9:00AM-1:00PM

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
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-6:00PM
 SA 9:00AM-1:00PM

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

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommu
nityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

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

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommu
nityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

PEDIATRICS

NAUDIN, VERONICA

Provider ID: 84118

Provider Gender: Female

NPI: 1093755878

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

SA 8:00AM-0:00PM

PEDIATRICS

PERTL, URSULA

Provider ID: 593894

Provider Gender: Female

NPI: 1609947464

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS

HOSPITAL SAN DIEGO,

CHILDRENS HOSP OF LOS

ANGELES

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-2:00PM

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

SA 8:00AM-0:00PM

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  Accessibility: CONTACT PROVIDER
 134 GRAPEVINE RD
 VISTA, CA 92083
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
 Email: credentialing@vcc.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 9:00AM-2:00PM
 F 8:00AM-5:00PM
 SA 8:00AM-4:00PM

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
 134 GRAPEVINE RD
 VISTA, CA 92083
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
 Email: credentialing@vcc.org
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N

ALPINE

CHIROPRACTOR

KELCHNER, MATTHEW

Provider ID: 290507

Board Certified Specialty: No

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1174656755

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-4:00PM

M 8:30AM-5:30PM

TU-TH 8:00AM-2:30PM

F 8:30AM-5:30PM

SA 8:00AM-2:30PM

Website: N/A

FAMILY PRACTICE

DUBE, BIANCA

Provider ID: 295477

Board Certified Specialty: No

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

Fax: (619) 662-4196

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1740535152

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

OPTOMETRIST

AOTO, KIM

Provider ID: 268720

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

PSYCHOLOGIST

FRITZ, JENNIFER

Provider ID: 290496

Board Certified Specialty: No

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

Fax: (916) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1013071497

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PSYCHOLOGIST

SMITH, STEPHANIE

Provider ID: 290676

Board Certified Specialty: No

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1346700325

Provider English Spoken: Y



Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999


American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

CARLSBAD


CERTIFIED NURSE PRACTITIONER

HOOPER, BONNIE


Provider ID: 275252
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


CERTIFIED NURSE PRACTITIONER

RICE, ELIZABETH

Provider ID: 304664
Board Certified Specialty: No
 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: Y
Min/Max Age: 18\999

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*



 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

HEARING AID DEALER / SUPPLIER


DAVIS, KELLE

Provider ID: 268654
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*



 *Hours: M-F*
8:30AM-5:00PM

 *Website: N/A*

NEUROLOGY



YOSHII-CONTRERAS, JUNE

Provider ID: 296589
Board Certified Specialty: No
 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: Y
Min/Max Age: 18\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*




 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

OTOLARYNGOLOGY

DONALDSON, CHADWICK

Provider ID: 268146
Board Certified Specialty: No

 2390 FARADAY AVE
 CARLSBAD, CA 92008
 *Phone: (858) 909-0770*
 *Fax: (858) 909-0880*

 *After Hours Phone: (858)*

909-0770
 Provider Gender: Male
 NPI: 1891743910
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL,
 TEMECULA VALLEY HOSPITAL
 INC, SCRIPPS MEMORIAL
 HOSPITAL, SOUTHWEST
 HEALTHCARE RANCHO
 SPRINGS HOSPITAL,
 SOUTHWEST HEALTHCARE
 INLAND VALLEY HOSPITAL,
 SHARP MEMORIAL HOSPITAL,
 SHARP CHULA VISTA MED
 CTR, SHARP CHULA VISTA
 MED CTR, Sharp Grossmont
 Hospital
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT
HERMANSON, KATHLEEN

Provider ID: 269004
 Board Certified Specialty: No
 6010 HIDDEN VALLEY RD
 STE 200
 CARLSBAD, CA 92011
 Phone: (760) 631-3000
 Fax: (760) 631-3016
 After Hours Phone: (760)

631-3000
 Provider Gender: Female
 NPI: 1598160343
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-4:00PM
 Website: N/A

PHYSICIANS ASSISTANT
INOCELDA, ANDREW

Provider ID: 269089
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT
SHIMIZU, KELSIE MIDORI


Provider ID: 296819
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A


PHYSICIANS ASSISTANT
WILAND, WINONA

Provider ID: 296809
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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


 Website: N/A


REGISTERED PHYSICAL THERAPIST

AMBROSE, CHRISTOPHER

Provider ID: 248010

Board Certified Specialty: No

 3070 MADISON ST
CARLSBAD, CA 92008

 Phone: (760) 434-6100

Fax: (760) 471-5139

 After Hours Phone: (760)
591-7750

Provider Gender: Male

NPI: 1114977535


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 8\125

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M 7:00AM-7:00PM
TU 7:00AM-5:00PM
W 7:00AM-7:00PM
TH 7:00AM-5:00PM
F 7:00AM-7:00PM


 Website: N/A


REGISTERED PHYSICAL THERAPIST

BOUTELLE, BARBARA

Provider ID: 246318

Board Certified Specialty: No

 3070 MADISON ST
CARLSBAD, CA 92008

 Phone: (760) 434-6100

Fax: (760) 471-5139

 After Hours Phone: (760)
434-6100

Provider Gender: Female

NPI: 1437107711


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M 7:00AM-7:00PM
TU 7:00AM-5:00PM
W 7:00AM-7:00PM
TH 7:00AM-5:00PM
F 7:00AM-7:00PM


 Website: N/A


REGISTERED PHYSICAL THERAPIST

BOUTELLE, DAVID

Provider ID: 248307

Board Certified Specialty: No

 3070 MADISON ST
CARLSBAD, CA 92008

 Phone: (760) 434-6100

Fax: (760) 471-5139

 After Hours Phone: (760)
434-6100

Provider Gender: Male


NPI: 1063461101


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M 7:00AM-7:00PM
TU 7:00AM-5:00PM
W 7:00AM-7:00PM
TH 7:00AM-5:00PM
F 7:00AM-7:00PM


 Website: N/A


REGISTERED PHYSICAL THERAPIST

MCGEE, JACQUELINE


Provider ID: 252472

Board Certified Specialty: No

 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: Y

Min/Max Age: 8\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
7:00AM-6:00PM


 Website: N/A

SURGERY NEUROLOGICAL

BEN-HAIM, SHARONA

Provider ID: 244069

Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 🕒 Hours: M-F
 8:00AM-5:00PM
 🌐 Website: N/A

SURGERY NEUROLOGICAL

BLASKIEWICZ, DONALD
 Provider ID: 270283
 Board Certified Specialty: No
 📍 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: Y

Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 🕒 Hours: M-F
 8:00AM-5:00PM
 🌐 Website: N/A

SURGERY NEUROLOGICAL

MURTHY, NIKHIL
 Provider ID: 299996
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 🌐 Website: N/A

SURGERY NEUROLOGICAL

PHAM, MARTIN
 Provider ID: 203510
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 🕒 Hours: M-F
 8:00AM-5:00PM
 🌐 Website: N/A

CHULA VISTA


**ANESTHESIOLOGY PAIN
 MANAGEMENT**


DAIRO, BRANDON
 Provider ID: 300088
 Board Certified Specialty: No
 📍 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: Y

Min/Max Age: 18\999

American Sign Language (ASL): Board Certified Specialty: No

N

 Accessibility: CONTACT PROVIDER

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

 Website: N/A


ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON


Provider ID: 299879

Board Certified Specialty: No

 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: Y

Min/Max Age: 18\100

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

 Website: N/A

CARDIOLOGY


MOHAMEDALI, BURHAN

Provider ID: 245576


Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

CARDIOLOGY


NAGHI, JESSE

Provider ID: 247625

Board Certified Specialty: No

 752 MEDICAL CENTER CT
STE 207

CHULA VISTA, CA 91911


 Phone: (619) 867-0557


Fax: (619) 867-0558

 After Hours Phone: (619)
867-0557

Provider Gender: Male

NPI: 1386896736

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Bulgarian,
Russian, Spanish, Tagalog
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL

HOSPITAL, GROSSMONT
HOSPITAL, SHARP MEMORIAL


HOSPITAL, ALVARADO
HOSPITAL LLC, SHARP CHULA


VISTA MED CTR, SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

 Website: N/A

CARDIOLOGY


ROUGH, STEVEN

Provider ID: 302985

Board Certified Specialty: No

 754 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911

 Phone: (619) 434-4288

Fax: (619) 434-4315

 After Hours Phone: (619)
434-4288

Provider Gender: Male




NPI: 1386821460

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish
Cultural Competency: N




Hospital Affiliation: SHARP



CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
ALVARADO HOSP MED CTR
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CARDIOLOGY

ROUGH, STEVEN




Provider ID: 298442
Board Certified Specialty: No
 754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
 Phone: (619) 434-4288
Fax: (619) 434-4315
 After Hours Phone: (619)
434-4288
Provider Gender: Male
NPI: 1386821460



 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM



 Website: N/A


CARDIOLOGY

SHEREV, DIMITRI

Provider ID: 268950
Board Certified Specialty: No
 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,
ALVARADO COMMUNITY
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
ALVARADO HOSPITAL LLC,
SHARP CHULA VISTA MED
CTR, SHARP CHULA VISTA
MED CTR, TRI CITY MEDICAL
CTR, SCRIPPS MERCY
HOSPITAL CHULA VISTA, Sharp
Grossmont Hospital
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N




 Accessibility: CONTACT PROVIDER
 Hours: M-F

8:30AM-5:00PM
 Website: N/A

CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 295846
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CARDIOLOGY

YAU, STEPHEN

Provider ID: 295855
Board Certified Specialty: No
 429 BROADWAY
CHULA VISTA, CA 91910
 Phone: (619) 434-0204
Fax: (619) 337-0191
 After Hours Phone: (619)
434-0204
Provider Gender: Male

NPI: 1689037376

Provider English Spoken: Y
Cultural Competency: N

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

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

CARDIOLOGY

YAU, STEPHEN

Provider ID: 302105

Board Certified Specialty: No

429 BROADWAY
CHULA VISTA, CA 91910

Phone: (619) 434-0204

Fax: (619) 337-0191

After Hours Phone: (619)
434-0204

Provider Gender: Male

NPI: 1689037376

Provider English Spoken: Y
Cultural Competency: N

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

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

CARDIOLOGY

YAU, STEPHEN

Provider ID: 296946

Board Certified Specialty: No

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: Male

NPI: 1689037376

Provider English Spoken: Y
Cultural Competency: N

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

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

CARDIOVASCULAR DISEASE

LERNER, JONATHAN

Provider ID: 303445

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

CERTIFIED ACUPUNCTURIST

LAM, KHANH

Provider ID: 295381

Board Certified Specialty: No

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: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A



CERTIFIED ACUPUNCTURIST
WILCOX, WENONAH

Provider ID: 290591
Board Certified Specialty: No


 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: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER
BRAYTENBAH, MELANIE

Provider ID: 262342
Board Certified Specialty: No

 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: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM



 Website: N/A

CERTIFIED NURSE

PRACTITIONER


BRAYTENBAH, MELANIE

Provider ID: 295830
Board Certified Specialty: No

 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: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE

PRACTITIONER

BRAYTENBAH, MELANIE


Provider ID: 268746

Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM



 Website: N/A


CERTIFIED NURSE

PRACTITIONER


CARAPIA, FABIOLA

Provider ID: 54496
Board Certified Specialty: No

 340 4TH AVE STE 4
CHULA VISTA, CA 91910
 Phone: (619) 427-1144
Fax: (619) 427-1185

 After Hours Phone: (619)
427-1144

Provider Gender: Female
NPI: 1184905994

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 18\150




American Sign Language (ASL):
N

 Accessibility: CONTACT




PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A





**CERTIFIED NURSE
 PRACTITIONER**

CARAPIA, FABIOLA
 Provider ID: 295918
 Board Certified Specialty: No
 340 4TH AVE STE 4
 CHULA VISTA, CA 91910
 Phone: (619) 427-1144
 Fax: (619) 427-1185
 After Hours Phone: (619)
 427-1144

Provider Gender: Female
 NPI: 1184905994
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A

**CERTIFIED NURSE
 PRACTITIONER**

CARRION GELABERT, ANA
 Provider ID: 302402
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-6:00PM
 Website: N/A

**CERTIFIED NURSE
 PRACTITIONER**

DE DIOS, SARAH
 Provider ID: 302418
 Board Certified Specialty: No
 450 4TH AVE STE 215
 CHULA VISTA, CA 91910
 Phone: (619) 425-3840
 Fax: (619) 425-3842
 After Hours Phone: (619)
 425-3840
 Provider Gender: Female
 NPI: 1528632742

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM






 Website: N/A

**CERTIFIED NURSE
 PRACTITIONER**

GUADARRAMA, IGNACIO
 Provider ID: 262418
 Board Certified Specialty: No
 1323 3RD AVE
 CHULA VISTA, CA 91911
 Phone: (619) 409-6900
 Fax: (619) 409-6901
 After Hours Phone: (619)
 409-6900
 Provider Gender: Male
 NPI: 1821331174








 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

**CERTIFIED NURSE
 PRACTITIONER**




GUADARRAMA, IGNACIO
 Provider ID: 300304
 Board Certified Specialty: No
 880 THIRD AVE STE A
 CHULA VISTA, CA 91911
 Phone: (619) 662-4100
 Fax: (619) 618-2035
 After Hours Phone: (619)
 662-4100
 Provider Gender: Male
 NPI: 1821331174
 Provider English Spoken: Y
 Provider Language(s)





Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: SU 10:00AM-4:00PM M-F 8:30AM-7:30PM SA 8:00AM-2:30PM*
 *Website: N/A*

CERTIFIED NURSE PRACTITIONER
KANTAS, PARIS

Provider ID: 293297
Board Certified Specialty: No
 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: 1114329612
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Medi-Cal Open Panel: Y
Min/Max Age: 2\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: SU 10:00AM-4:00PM M-F 8:30AM-5:30PM SA 8:00AM-2:30PM*
 *Website: N/A*



CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY
Provider ID: 301598
Board Certified Specialty: No
 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: Y
Min/Max Age: 16\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

EMERGENCY MEDICINE
DILLMAN, ARIANA

Provider ID: 290495
Board Certified Specialty: Yes
 333 H ST STE 2080
 CHULA VISTA, CA 91910
 *Phone: (619) 662-4100*
Fax: (661) 205-6305
 *After Hours Phone: (619) 662-4100*
Provider Gender: Female
NPI: 1497067862
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: BEVERLY HOSPITAL, TRI CITY MEDICAL

CTR
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:30AM-5:30PM SA 8:00AM-2:30PM*
 *Website: N/A*

EMERGENCY MEDICINE
EINSTEIN, ERIC

Provider ID: 290482
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:30AM-5:30PM SA 8:00AM-2:30PM*
 *Website: N/A*

EMERGENCY MEDICINE
FRENCH, TONIANNE
Provider ID: 290538

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM

Website: N/A

EMERGENCY MEDICINE

GALASSO, MADISON

Provider ID: 290477

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM

Website: N/A

EMERGENCY MEDICINE

GRIESINGER, MICHAEL

Provider ID: 290537

Board Certified Specialty: No

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: SAN
JOAQUIN COMM HOSP

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM

Website: N/A

EMERGENCY MEDICINE

HARRELL-BURDER, BEVERLY

Provider ID: 295890

Board Certified Specialty: No

333 H ST STE 2080

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1619907581

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

EMERGENCY MEDICINE

PHAM, LILY

Provider ID: 304935

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 Website: N/A

EMERGENCY MEDICINE

QUENZER, FAITH

Provider ID: 290637
 Board Certified Specialty: No
 333 H ST STE 2080
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 Fax: (619) 205-6305
 After Hours Phone: (619) 662-4100
 Provider Gender: Female
 NPI: 1295112670
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 UNIVERSITY OF CALIFORNIA
 IRVINE MED CTR, UNIVERSITY
 HSP OF SAN DIEGO CO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:30AM-5:30PM
SA 8:30AM-2:30PM
 Website: N/A

EMERGENCY MEDICINE





REARDON, JACQUELINE



Provider ID: 290673
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM
 Website: N/A

EMERGENCY MEDICINE

ROXAS, ROGER




Provider ID: 290600
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM
 Website: N/A

EMERGENCY MEDICINE

TOVAR, JUAN

Provider ID: 295954
 Board Certified Specialty: No
 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: 1508896333
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM
 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

CARRILLO, MARITZA
 Provider ID: 290970

Board Certified Specialty: No

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

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM

SA 8:00AM-4:00PM

Website: N/A

FAMILY PRACTICE

DEIS, CRISTINA

Provider ID: 302757

Board Certified Specialty: No

1637 THIRD AVE STE H
CHULA VISTA, CA 91911

Phone: (619) 662-4100

Fax: (619) 662-4196

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1639478811

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

FAMILY PRACTICE

HERNANDEZ, RALPH

Provider ID: 300230

Board Certified Specialty: No

880 3RD AVE STE A
CHULA VISTA, CA 91911

Phone: (619) 662-4100

Fax: (619) 618-2035

After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1285782151

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM

Website: N/A

FAMILY PRACTICE

LOZANO, JUAN

Provider ID: 303517

Board Certified Specialty: No

1637 THIRD AVE STE B

CHULA VISTA, CA 91911

Phone: (619) 662-4100

Fax: (619) 205-1376

After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1396373619

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

FAMILY PRACTICE

SEARLES, ROBERT

Provider ID: 300125

Board Certified Specialty: No

678 THIRD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1891807764

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR




Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):


N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A



FAMILY PRACTICE
VELASQUEZ, SHARON




Provider ID: 299164
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:30AM-5:30PM
 SA 8:00AM-2:30PM
 Website: N/A

GASTROENTEROLOGY
NOVO, MEGAN

Provider ID: 296068
 Board Certified Specialty: No
 296 H ST STE 301



CHULA VISTA, CA 91910
 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: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR, UNIVERSITY OF
 CALIFORNIA IRVINE MED CTR,
 PARADISE VALLEY HOSPITAL,
 TRI CITY MEDICAL CTR,
 SCRIPPS MEMORIAL
 HOSPITAL ENCINITAS,
 SCRIPPS MERCY HOSPITAL,
 SCRIPPS MERCY HOSPITAL,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A




GASTROENTEROLOGY


WIENER, GREGORY
 Provider ID: 257480
 Board Certified Specialty: Yes
 353 CHURCH AVE STE A
 CHULA VISTA, CA 91910
 Phone: (619) 585-8883
 Fax: (619) 585-8892
 After Hours Phone: (619)

585-8883
 Provider Gender: Male
 NPI: 1811099534
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: French, Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL,
 SCRIPPS MEMORIAL
 HOSPITAL, SCRIPPS MERCY
 HOSPITAL, SHARP CHULA
 VISTA MED CTR, SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):








N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH
 8:30AM-4:30PM
 F 8:30AM-3:00PM
 Website: N/A

GENERAL PRACTICE

SAMI, REMAN
 Provider ID: 295214
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

HEARING AID DEALER / SUPPLIER



ANDERSON, ELAINE
 Provider ID: 268688
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE
 Provider ID: 268651
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:30AM-5:00PM
 Website: N/A

HEMATOLOGY / ONCOLOGY

ITURBE-ALESSIO, IGNACIO
 Provider ID: 297145
 Board Certified Specialty: No
 855 3RD AVE STE 3330
 CHULA VISTA, CA 91911
 Phone: (619) 745-1031
 Fax: (619) 745-1032
 After Hours Phone: (619)
 745-1031
 Provider Gender: Male
 NPI: 1972513695
 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 MERCY
 HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

HEMATOLOGY / ONCOLOGY

ITURBE-ALESSIO, IGNACIO
 Provider ID: 295662
 Board Certified Specialty: No
 855 3RD AVE STE 3330
 CHULA VISTA, CA 91911
 Phone: (619) 745-1031
 Fax: (619) 745-1032
 After Hours Phone: (619)
 745-1031
 Provider Gender: Male
 NPI: 1972513695
 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 MERCY
 HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

HEMATOLOGY / ONCOLOGY

JOHNSON, KENNETH
 Provider ID: 262288
 Board Certified Specialty: No

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,
PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

HEMATOLOGY / ONCOLOGY

MOOLANI, RAMESH

Provider ID: 295976

Board Certified Specialty: No

855 3RD AVE STE 3330
CHULA VISTA, CA 91911

Phone: (619) 745-1031

Fax: (619) 745-1032

After Hours Phone: (619)
745-1031

Provider Gender: Male

NPI: 1437272010

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, LOMA LINDA
UNIVERSITY MED CTR
MURRIETA, SHARP CHULA
VISTA MED CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

HEMATOLOGY / ONCOLOGY

MOOLANI, RAMESH

Provider ID: 297928

Board Certified Specialty: No

855 3RD AVE STE 3330
CHULA VISTA, CA 91911

Phone: (619) 745-1031

Fax: (619) 745-1032

After Hours Phone: (619)
745-1031

Provider Gender: Male

NPI: 1437272010

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA, LOMA LINDA

UNIVERSITY MED CTR

MURRIETA, SHARP CHULA
VISTA MED CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

HEMATOLOGY / ONCOLOGY

SCHWERKOSKE, JOHN

Provider ID: 298654

Board Certified Specialty: No

450 4TH AVE STE 311
CHULA VISTA, CA 91910

Phone: (619) 371-9156

Fax: (619) 526-0833

After Hours Phone: (619)
371-9156

Provider Gender: Male

NPI: 1912260829

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

METHODIST HOSP OF
SACRAMENTO, MERCY SAN
JUAN MEDICAL CENTER,
MERCY GENERAL HOSPITAL,
CITY OF HOPE NATIONAL
MED CTR, MERCY HOSPITAL

OF FOLSOM, UC DAVIS
MEDICAL CTR, WOODLAND

MEMORIAL HOSP,

WOODLAND MEMORIAL

HOSP, LOMA LINDA

UNIVERSITY MED CTR



MURRIETA, Hemet Valley
Medical Center

Medi-Cal Open Panel: Y

Min/Max Age: 0\999






American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER



 Hours: M-F
9:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

NAIDZIONAK, ULADZISLAU

Provider ID: 290568
Board Certified Specialty: No
 750 MEDICAL CENTER CT
STE 9
CHULA VISTA, CA 91911
 Phone: (619) 421-6922
Fax: (619) 421-5569
 After Hours Phone: (619)
421-6922
Provider Gender: Male
NPI: 1023246212
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Russian
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Medi-Cal Open Panel: Y
Min/Max Age: 18\999
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M 9:00AM-4:00PM
TU 9:00AM-5:00PM
W 9:00AM-4:00PM
TH-F 9:00AM-5:00PM
 Website: N/A




INTERVENTIONAL

CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 296051
Board Certified Specialty: No
 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: Y
Min/Max Age: 15\99
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL




MEDICINE

MCCULLOUGH, DEIRDRE

Provider ID: 277263
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


MATERNAL AND FETAL

MEDICINE

MELBER, DORA

Provider ID: 296993
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294653
Board Certified Specialty: No

 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: Y
Min/Max Age: 0\19

American Sign Language (ASL):


N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE

Provider ID: 264687
Board Certified Specialty: No

 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: Y
Min/Max Age: 0\19

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*



 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA

Provider ID: 242523
Board Certified Specialty: No

 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*



 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

NEONATAL / PERINATAL MEDICINE

FLEMING, SARAH

Provider ID: 205646
Board Certified Specialty: No

 435 H ST
 CHULA VISTA, CA 91910
 *Phone: (619) 691-7000*
 *After Hours Phone: (619) 691-7000*

Provider Gender: Female
NPI: 1679809826




 *Provider English Spoken: Y*
Cultural Competency: N

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

Medi-Cal Open Panel: Y
Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL



MEDICINE

MATOBA, NANA

Provider ID: 297976
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\19

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

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


 Website: N/A

NEONATAL / PERINATAL


MEDICINE

NIEMI, ANNA-KAISA

Provider ID: 262159
 Board Certified Specialty: No

 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
 Cultural Competency: N

Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO

Medi-Cal Open Panel: Y
 Min/Max Age: 0\19

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

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

 Website: N/A

NEONATAL / PERINATAL

MEDICINE

NYMAN, KATHERINE

Provider ID: 301823
 Board Certified Specialty: No

 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
 Cultural Competency: N


Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

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

 Website: N/A

NEONATAL / PERINATAL

MEDICINE


SPEZIALE, MARK

Provider ID: 304829
 Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A




NEPHROLOGY

HOREISH, ADAM

Provider ID: 290100
 Board Certified Specialty: No
 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: SCRIPPS
 MERCY HOSPITAL, PARADISE
 VALLEY HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999





American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A




NEPHROLOGY

HOREISH, ADAM

Provider ID: 99947
 Board Certified Specialty: No
 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: SCRIPPS
 MERCY HOSPITAL, PARADISE
 VALLEY HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\150
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A




NEPHROLOGY

HOREISH, ADAM

Provider ID: 99947
 Board Certified Specialty: No
 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: SCRIPPS
 MERCY HOSPITAL, PARADISE
 VALLEY HOSPITAL



Medi-Cal Open Panel: Y
 Min/Max Age: 18\150
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A




NEPHROLOGY

MOOLANI, UJJALA

Provider ID: 296069
 Board Certified Specialty: No
 752 MEDICAL CENTER CT
 STE 302
 CHULA VISTA, CA 91911
 Phone: (619) 421-3361
 Fax: (619) 869-4378
 After Hours Phone: (619)
 421-3361
 Provider Gender: Female
 NPI: 1528221421

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Hindi, Sindhi,
 Spanish, Urdu
 Cultural Competency: N

Hospital Affiliation: SHARP
 CHULA VISTA MED CTR,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A

NEPHROLOGY

MOOLANI, UJJALA

Provider ID: 295915

Board Certified Specialty: No

752 MEDICAL CENTER CT
STE 302

CHULA VISTA, CA 91911

Phone: (619) 421-3361

Fax: (619) 869-4378

After Hours Phone: (619)
421-3361

Provider Gender: Female

NPI: 1528221421

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Sindhi,
Spanish, Urdu

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEPHROLOGY

PATEL, AMAR

Provider ID: 245639

Board Certified Specialty: Yes

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

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEPHROLOGY

PHAM, JENNIFER

Provider ID: 302863

Board Certified Specialty: No

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

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

9:00AM-5:00PM

Website: N/A

NEPHROLOGY

VIDEEN, JOHN

Provider ID: 65646

Board Certified Specialty: No

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: Y

Min/Max Age: 18\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEPHROLOGY






VIDEEN, JOHN

Provider ID: 290110

Board Certified Specialty: No




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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM
 Website: N/A

NEPHROLOGY




VIDEEN, JOHN

Provider ID: 262286
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM
 Website: N/A

NEPHROLOGY

YUAN, HENRY

Provider ID: 268551
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM
 Website: N/A

NEUROLOGY

HOSSEIN ZADEH MALEKI, ANA

Provider ID: 304999
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEUROLOGY

SORIA LOPEZ, JOSE

Provider ID: 295744

Board Certified Specialty: No

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Phone: (619) 425-3840

Fax: (619) 485-5440

After Hours Phone: (619)
425-3840

Provider Gender: Male

NPI: 1225474034

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
SCRIPPS MERCY HOSPITAL

CHULA VISTA, TEMECULA
VALLEY HOSPITAL INC

Medi-Cal Open Panel: Y

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-6:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

ATIGA, SCHUBERT

Provider ID: 290331

Board Certified Specialty: Yes

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: Y

Min/Max Age: 13\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-5:00PM
F 8:00AM-0:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

ATIGA, SCHUBERT

Provider ID: 268953

Board Certified Specialty: Yes

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-5:00PM
F 8:00AM-0:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI

Provider ID: 290712

Board Certified Specialty: No

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: 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

Medi-Cal Open Panel: Y

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI

Provider ID: 205412
 Board Certified Specialty: No
 340 4TH AVE STE 5
 CHULA VISTA, CA 91910
 Phone: (619) 422-2121
 Fax: (619) 422-2427
 After Hours Phone: (619) 422-2121
 Provider Gender: Male
 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
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19

American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER
 Hours: SU 8:00AM-5:00PM
 M-TH 9:00AM-5:00PM
 F 8:00AM-5:00PM
 SA 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY
SHORT, ABIADÉ

Provider ID: 290872
 Board Certified Specialty: No
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 Fax: (619) 425-6941
 After Hours Phone: (619)

662-4100
 Provider Gender: Male
 NPI: 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
 Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-8:00PM
 SA 8:00AM-4:00PM
 Website: N/A

OCCUPATIONAL THERAPIST
MORRIS, SHEILA

Provider ID: 268926
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 7:00AM-6:00PM
 SA 7:00AM-2:00PM
 Website: N/A

ONCOLOGY MEDICAL
SONG, SEUNG-YIL

Provider ID: 290500
 Board Certified Specialty: No
 750 MEDICAL CENTER CT
 STE 9
 CHULA VISTA, CA 91911
 Phone: (858) 571-2811
 After Hours Phone: (858) 571-2811

Provider Gender: Male
 NPI: 1578677860
 Provider English Spoken: Y
 Provider Language(s) Spoken: Korean, Russian, Spanish, Vietnamese
 Cultural Competency: N

Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL, SHARP
 CHULA VISTA MED CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY
BRYANT, DUANE

Provider ID: 297630
 Board Certified Specialty: No

342 F ST
CHULA VISTA, CA 91910
Phone: (619) 422-1471
Fax: (619) 422-0450
After Hours Phone: (619) 422-1471
Provider Gender: Male
NPI: 1023117124
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M 8:00AM-5:00PM
TU 7:00AM-5:00PM
W 8:00AM-5:00PM
TH-F 7:00AM-5:00PM
Website: N/A

OPHTHALMOLOGY

BRYANT, DUANE

Provider ID: 244753
Board Certified Specialty: No
342 F ST
CHULA VISTA, CA 91910
Phone: (619) 422-1471
Fax: (619) 422-0450
After Hours Phone: (619) 422-1471
Provider Gender: Male
NPI: 1023117124
Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL
Medi-Cal Open Panel: Y
Min/Max Age: 13\130
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M 8:00AM-5:00PM
TU 7:00AM-5:00PM
W 8:00AM-5:00PM
TH-F 7:00AM-5:00PM
Website: N/A

OPHTHALMOLOGY

HO, AMIEE

Provider ID: 297633
Board Certified Specialty: No
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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
Website: N/A

OPTOMETRIST

CHAIN, PEI CHI

Provider ID: 297621
Board Certified Specialty: No
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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

OPTOMETRIST

KOO, ANITA

Provider ID: 304537
Board Certified Specialty: No
835 THIRD AVE STE A
CHULA VISTA, CA 91911
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Female
NPI: 1669825667

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPTOMETRIST

KOO, ANITA

Provider ID: 304830
Board Certified Specialty: No
 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: Y
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OPTOMETRIST

MASCARENO, EFRAIN

Provider ID: 268679
Board Certified Specialty: No
 2260 OTAY LAKES RD STE
111
CHULA VISTA, CA 91915
 Phone: (619) 421-5550
Fax: (866) 254-5707

After Hours Phone: (619)
421-5550

Provider Gender: Male
NPI: 1457507279

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-6:00PM

Website: N/A

OPTOMETRIST

MASCARENO, EFRAIN

Provider ID: 262228
Board Certified Specialty: No
 2260 OTAY LAKES RD STE
111
CHULA VISTA, CA 91915
 Phone: (619) 421-5550
Fax: (866) 254-5707
 After Hours Phone: (619)
421-5550

Provider Gender: Male
NPI: 1457507279

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-6:00PM

Website: N/A

OPTOMETRIST

MASCARENO, EFRAIN

Provider ID: 268680
Board Certified Specialty: No
 440 4TH AVE STE 9
CHULA VISTA, CA 91910
 Phone: (619) 427-2020
Fax: (866) 254-5707

After Hours Phone: (619)
427-2020

Provider Gender: Male
NPI: 1457507279

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-6:00PM

Website: N/A

OPTOMETRIST

MASCARENO, EFRAIN

Provider ID: 262229
Board Certified Specialty: No
 440 4TH AVE STE 9
CHULA VISTA, CA 91910
 Phone: (619) 427-2020
Fax: (866) 254-5707


After Hours Phone: (619)
427-2020

Provider Gender: Male
NPI: 1457507279

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999



American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER
 Hours: M-F
 9:00AM-6:00PM
 Website: N/A

OPTOMETRIST
NGUYEN, THU


Provider ID: 125032
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 13\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OPTOMETRIST
NGUYEN, THU





Provider ID: 298022
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OPTOMETRIST
NGUYEN, THU


Provider ID: 265518
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM

 Website: N/A


OPTOMETRIST
RICHARDSON, JULIA

Provider ID: 297645
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A


OPTOMETRIST
SCOVILL, ALEXANDRA


Provider ID: 297625
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL): NPI: 1134144454

N

 Accessibility: CONTACT PROVIDER

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

 Website: N/A


OPTOMETRIST

TRAN, JESSICA

Provider ID: 304888

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

MCCALLION, PATRICK

Provider ID: 290541

Board Certified Specialty: No


 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

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

 Website: N/A

OTOLARYNGOLOGY

SAEZ, NEIL

Provider ID: 302432

Board Certified Specialty: No

 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

Medi-Cal Open Panel: Y


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


**PEDIATRIC EMERGENCY
MEDICINE**

AGHILI, ROXANA

Provider ID: 303782

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM




 Website: N/A


**PEDIATRIC EMERGENCY
MEDICINE**




BETTY, MARYANN

Provider ID: 245751

Board Certified Specialty: No

 386 E H ST STE 202
CHULA VISTA, CA 91910
 Phone: (858) 966-1720
Fax: (858) 966-1725
 After Hours Phone: (858)
966-1720
Provider Gender: Female
NPI: 1285014498


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Y
Min/Max Age: 0\19




American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

DEVERA, GEMMIE



Provider ID: N/A
Board Certified Specialty: No
 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: Y




Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

GROSS, MATTHEW

Provider ID: 297176
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19


American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 Website: N/A




**PEDIATRIC EMERGENCY
MEDICINE**

MENDES, CHANTAL

Provider ID: 295669

Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

MINKA, GENEVIEVE


Provider ID: 289468
Board Certified Specialty: No
 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: 1689646689

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Y
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


**PEDIATRIC EMERGENCY
MEDICINE**

OZAKI, YOSHIHIRO

Provider ID: 241923

Board Certified Specialty: No

 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: 1467898239

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Japanese

Cultural Competency: N



Hospital Affiliation: VALLEY
CHILDRENS HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


**PEDIATRIC EMERGENCY
MEDICINE**

TYGART, MELISSA

Provider ID: 294098

Board Certified Specialty: No

 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: 1336602507

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: N

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


**PEDIATRIC EMERGENCY
MEDICINE**

VAIDYA, KAMALA

Provider ID: 289411

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


**PHYSICAL MEDICINE /
REHABILITATION**

RICHARDSON, HENRY

Provider ID: 295275

Board Certified Specialty: No

 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

BEITTER, KEERSTIN






Provider ID: 300093
 Board Certified Specialty: No
 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: Female
 NPI: 1477129302
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA




Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

DOUGHERTY, CLARA






Provider ID: 301592

Board Certified Specialty: No
 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: 1609987619
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS, SCRIPPS
 MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT


GI, HUNG

Provider ID: 302126
 Board Certified Specialty: No
 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: N
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A


PHYSICIANS ASSISTANT



GUTH, CARA

Provider ID: 299110
 Board Certified Specialty: No
 480 4TH AVE STE 501
 CHULA VISTA, CA 91910
 Phone: (619) 425-9510
 Fax: (619) 425-0539
 After Hours Phone: (619)
 425-9510
 Provider Gender: Female
 NPI: 1992177182
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 21\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

VARGAS, CHRISTOPHER




Provider ID: 268744
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

VARGAS, CHRISTOPHER



Provider ID: 295945
 Board Certified Specialty: No
 2452 FENTON ST STE C101 CHULA VISTA, CA 91914
 Phone: (619) 600-5309
 Fax: (619) 655-4700
 After Hours Phone: (619) 600-5309
 Provider Gender: Male
 NPI: 1922505775
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA

VISTA
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

VARGAS, CHRISTOPHER








Provider ID: 295828
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

WRIGHT, DEREK

Provider ID: 302389
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PODIATRIST

DAVIDSON, JOHN


Provider ID: 129545
 Board Certified Specialty: No
 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


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-4:30PM

 Website: N/A


PODIATRIST

READ, TRENTON

Provider ID: 296655

Board Certified Specialty: No

 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: Y


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

BAYLON, ALDO


Provider ID: 290243

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910


 Phone: (619) 662-4100

Fax: (619) 425-6941

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1649429150

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Y

Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-8:00PM

SA 8:00AM-4:00PM

 Website: N/A


PSYCHOLOGIST

CELAYA, PATRICIA


Provider ID: 294875

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-8:00PM

SA 8:00AM-4:00PM

 Website: N/A


PSYCHOLOGIST

GALLO, LINDA

Provider ID: 296782

Board Certified Specialty: No

 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: Y

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

 Website: N/A


PSYCHOLOGIST

GOULD, HILARY

Provider ID: 290467

Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: SU 10:00AM-4:00PM
 M-F 8:30AM-5:30PM
 SA 8:00AM-2:30PM
 Website: N/A

PSYCHOLOGIST



WIJAYARATNE, IMANIE

Provider ID: 290092
 Board Certified Specialty: No
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 Fax: (619) 271-0260
 After Hours Phone: (619)
 662-4100

Provider Gender: Male
 NPI: 1932358355



 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999



American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

RADIATION ONCOLOGY

CARMONA, RUBEN



Provider ID: 303101
 Board Certified Specialty: No
 769 MEDICAL CENTER CT
 CHULA VISTA, CA 91911
 Phone: (858) 939-5010



Fax: (619) 740-8499
 After Hours Phone: (858)
 939-5010
 Provider Gender: Male
 NPI: 1275929242
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR, Sharp
 Grossmont Hospital, SHARP
 MEMORIAL HOSPITAL



Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

RADIATION ONCOLOGY

COLEMAN, LORI




Provider ID: 206393
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 19\100
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

RADIATION ONCOLOGY

VOLPP, PAUL




Provider ID: 221102
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 19\100
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

RADIATION ONCOLOGY
WEINSTEIN, GEOFFREY

Provider ID: 200538
Board Certified Specialty: No
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Phone: (619) 502-5851
Fax: (619) 502-5865
After Hours Phone: (619) 502-5851
Provider Gender: Male
NPI: 1841233947
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Y
Min/Max Age: 19\100
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON

Provider ID: 304529
Board Certified Specialty: No
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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH
7:00AM-7:00PM
F 7:00AM-5:00PM
SA 8:00AM-1:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST

DAGOSTINO, JACQUELINE

Provider ID: 243632
Board Certified Specialty: No
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: 1710457379
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST



DAGOSTINO, JACQUELINE

Provider ID: 301377
Board Certified Specialty: No
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: 1710457379
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST








DORSEY, KYLE

Provider ID: 301422
Board Certified Specialty: No
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: 1790334316
Provider English Spoken: Y

Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 7:00AM-7:00PM
 Website: N/A


REGISTERED PHYSICAL THERAPIST







DORSEY, KYLE

Provider ID: 286987
 Board Certified Specialty: No
 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: 1790334316
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 7:00AM-7:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

HERMAN, RACHEL



Provider ID: 301376
 Board Certified Specialty: No
 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: 1477121762
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST









HERMAN, RACHEL

Provider ID: 286656
 Board Certified Specialty: No
 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: 1477121762
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

JAIN, ALEXANDRA

Provider ID: 305150
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 55\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA

Provider ID: 299889
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 7:00AM-7:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI
 Provider ID: 301380
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST
KARANDE, PRACHI
 Provider ID: 287100
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA
 Provider ID: 305014
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 7:00AM-7:00PM F 7:00AM-4:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA
 Provider ID: 305013
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 7:00AM-7:00PM F 7:00AM-4:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW
 Provider ID: 301994

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

Website: N/A

REGISTERED PHYSICAL

THERAPIST

NOVENCIDO, ANDREW

Provider ID: 286782

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

Website: N/A

REGISTERED PHYSICAL

THERAPIST

SPARKS, TODD

Provider ID: 129142

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M 7:00AM-7:00PM
TU 7:00AM-0:00PM
W-TH 7:00AM-7:00PM

F 7:00AM-0:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

SPARKS, TODD

Provider ID: 301108

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M 7:00AM-7:00PM
TU 7:00AM-0:00PM

W-TH 7:00AM-7:00PM

F 7:00AM-0:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

STAHL, KEVIN

Provider ID: 301418

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

VILLANUEVA, GIOVANNI

Provider ID: 301532
 Board Certified Specialty: No
 1392 E PALOMAR ST STE 503
 CHULA VISTA, CA 91913
 Phone: (619) 482-3000
 Fax: (619) 482-3001
 After Hours Phone: (619) 482-3000
 Provider Gender: Male
 NPI: 1063046878
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 7:00AM-7:00PM
 Website: N/A

RHEUMATOLOGY

CHITKARA, PUJA

Provider ID: 262358
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-4:30PM
 Website: N/A

RHEUMATOLOGY

CHWA, JEFFREY


Provider ID: 268780
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

RHEUMATOLOGY








REDDY, DANA

Provider ID: 262363
 Board Certified Specialty: No
 272 CHURCH AVE STE 1
 CHULA VISTA, CA 91910
 Phone: (619) 427-1721
 Fax: (619) 427-1235
 After Hours Phone: (619) 427-1721
 Provider Gender: Female
 NPI: 1144538778
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F

8:00AM-4:00PM
 Website: N/A


RHEUMATOLOGY

REDDY, DANA

Provider ID: 244971
 Board Certified Specialty: No
 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: 1144538778
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR,
 SCRIPPS MERCY HOSPITAL,
 SHARP MEMORIAL HOSPITAL,
 SCRIPPS MEMORIAL
 HOSPITAL, SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: SU 10:00AM-4:00PM
 M-F 8:30AM-5:30PM
 SA 8:00AM-2:30PM
 Website: N/A

SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS

Provider ID: 296928
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

SPEECH PATHOLOGIST

CLARK, MELISSA




Provider ID: 296923
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: SU 7:00AM-7:00PM
 M-F 7:00AM-7:00PM

 Website: N/A

SPEECH PATHOLOGIST






MADERA RIVERA, PAULA

Provider ID: 296579
 Board Certified Specialty: No
 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: 1205443769
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, Armenian,
 Farsi, Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 7:00AM-7:00PM
 Website: N/A

SPEECH PATHOLOGIST

O'DORAN, KAYLA

Provider ID: 296587
 Board Certified Specialty: No
 333 H ST STE 5000
 CHULA VISTA, CA 91910
 Phone: (877) 757-8353
 Fax: (818) 357-2505
 After Hours Phone: (877) 757-8353
 Provider Gender: Female
 NPI: 1275021438
 Provider English Spoken: Y
 Provider Language(s)

Spoken: Arabic, Armenian, Farsi, Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 7:00AM-7:00PM
 Website: N/A

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO

Provider ID: 304607
 Board Certified Specialty: No
 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: PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PALOMAR MEDICAL CENTER
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

MORAL, JOHN

Provider ID: 297841
 Board Certified Specialty: No
 480 4TH AVE STE 404
 CHULA VISTA, CA 91910
 Phone: (619) 425-7470
 Fax: (619) 425-7472
 After Hours Phone: (619) 425-7470
 Provider Gender: Male
 NPI: 1720426190
 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
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-5:00PM F 8:00AM-4:00PM
 Website: N/A

SURGERY GENERAL

MORAL, JOHN

Provider ID: 299238
 Board Certified Specialty: No
 480 4TH AVE STE 404
 CHULA VISTA, CA 91910
 Phone: (619) 425-7470
 Fax: (619) 425-7472
 After Hours Phone: (619)

425-7470
 Provider Gender: Male
 NPI: 1720426190
 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
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-5:00PM F 8:00AM-4:00PM
 Website: N/A

SURGERY ORTHOPEDIC

ANDRY, JAMES

Provider ID: 302084
 Board Certified Specialty: No
 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: SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP

AND HEALTHCARE CTR, Sharp
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

SURGERY ORTHOPEDIC


KUSNEZOV, NICHOLAS

Provider ID: 303195

Board Certified Specialty: No

 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

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

SURGERY ORTHOPEDIC

MCKNIGHT, BRADEN


Provider ID: 303713

Board Certified Specialty: No

 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: 1366983587

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, PARADISE


VALLEY HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

 Website: N/A

UROLOGY


SALMASI, AMIRALI


Provider ID: 302913

Board Certified Specialty: No

 752 MEDICAL CENTER CT
STE 101


CHULA VISTA, CA 91911

 Phone: (619) 397-4500

 After Hours Phone: (619)
397-4500

Provider Gender: Male

NPI: 1609187962

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
GROSSMONT HOSPITAL
Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CMP PENDLETON

CERTIFIED NURSE


PRACTITIONER


FREEMAN, WANDA

Provider ID: 298117

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HARRIS, PAMELA

Provider ID: 302288

Board Certified Specialty: No

818 PIER VIEW WAY
CMP PENDLETON, CA
92054

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1407545221

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

CORONADO

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY

Provider ID: 301599

Board Certified Specialty: No

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: Y

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE

Provider ID: 268655

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

DOUGHERTY, CLARA

Provider ID: 301587

Board Certified Specialty: No

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: 1609987619

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

SURGERY ORTHOPEDIC

ANDRY, JAMES

Provider ID: 302087

Board Certified Specialty: No

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: SHARP

CHULA VISTA MED CTR,

SHARP CORONADO HOSP

AND HEALTHCARE CTR, Sharp

Grossmont Hospital, SHARP


MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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

 Website: N/A


SURGERY ORTHOPEDIC

PALLIA, CHRISTOPHER

Provider ID: 302102

Board Certified Specialty: Yes

 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


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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

 Website: N/A

Email: INFO@PALLIAMD.COM


UROLOGY


SALMASI, AMIRALI

Provider ID: 302911

Board Certified Specialty: No


 230 PROSPECT PL STE 210
CORONADO, CA 92118


 Phone: (619) 299-0670

 After Hours Phone: (619)
299-0670

Provider Gender: Male

NPI: 1609187962

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

GROSSMONT HOSPITAL


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

EL CAJON


CARDIOLOGY


SHEREV, DIMITRI

Provider ID: 302988

Board Certified Specialty: No


 1380 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 867-0557

 After Hours Phone: (619)
867-0557

Provider Gender: Male

NPI: 1154323996

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Bulgarian, Russian,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL,

ALVARADO COMMUNITY

HOSPITAL, SHARP MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

ALVARADO HOSPITAL LLC,

SHARP CHULA VISTA MED

CTR, SHARP CHULA VISTA

MED CTR, TRI CITY MEDICAL

CTR, SCRIPPS MERCY

HOSPITAL CHULA VISTA, Sharp

Grossmont Hospital

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 295843

Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A









CARDIOLOGY

YAU, STEPHEN

Provider ID: 295856
 Board Certified Specialty: No
 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: Male
 NPI: 1689037376
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, SCRIPPS MERCY
 HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A






CARDIOVASCULAR DISEASE




LERNER, JONATHAN

Provider ID: 303446
 Board Certified Specialty: No
 1625 E MAIN ST STE 201
 EL CAJON, CA 92021
 Phone: (619) 486-6512
 Fax: (619) 616-2104
 After Hours Phone: (619)
 486-6512
 Provider Gender: Male
 NPI: 1962899823
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A








CERTIFIED ACUPUNCTURIST

CRAFT, KEVIN

Provider ID: 290945
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: TU-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED ACUPUNCTURIST
SLOAN, ERICA

Provider ID: 303149
 Board Certified Specialty: No
 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: 1740962752
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE
PRACTITIONER

BRANNEN, MANDY
 Provider ID: 241600
 Board Certified Specialty: No
 215 W MADISON AVE
 EL CAJON, CA 92020
 Phone: (619) 667-6125

Fax: (619) 590-9036

☎ After Hours Phone: (619) 667-6125

Provider Gender: Female

NPI: 1891205159

☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 4:00PM-7:00PM
W 4:00PM-7:00PM
F 4:00PM-7:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHUDACEK, JANET

Provider ID: 241626

Board Certified Specialty: No

📍 215 W MADISON AVE
EL CAJON, CA 92020

☎ Phone: (760) 737-6960
Fax: (760) 741-2782

☎ After Hours Phone: (760) 737-6960

Provider Gender: Female

NPI: 1932606118

☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 4:00PM-7:00PM
W 4:00PM-7:00PM
F 4:00PM-7:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HAMID, WAHIDA

Provider ID: 302295

Board Certified Specialty: No

📍 875 EL CAJON BLVD
EL CAJON, CA 92020

☎ Phone: (619) 662-4100
Fax: (619) 205-6305

☎ After Hours Phone: (619) 662-4100

Provider Gender: Female

NPI: 1164812293

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

PIRTLE, KEYSHONE

Provider ID: 284244

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, SHANTRICE

Provider ID: 296007

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 8:00AM-2:00PM
TU-F 8:00AM-5:00PM

🌐 Website: N/A

CHIROPRACTOR

FULKS, ZACKARY

Provider ID: 301146

Board Certified Specialty: No

855 E MADISON AVE
EL CAJON, CA 92020

Phone: (619) 270-3600

Fax: (360) 462-2746

After Hours Phone: (619)
270-3600

Provider Gender: Male

NPI: 1407562531

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

CHIROPRACTOR

FULKES, ZACKARY

Provider ID: 303814

Board Certified Specialty: No

855 E MADISON AVE
EL CAJON, CA 92020

Phone: (619) 270-3600

Fax: (360) 462-2746

After Hours Phone: (619)
270-3600

Provider Gender: Male

NPI: 1407562531

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

CHIROPRACTOR

MCCOWN, BARRY

Provider ID: 303849

Board Certified Specialty: No

470 N MOLLISON AVE
EL CAJON, CA 92021

Phone: (833) 867-4642

Fax: (360) 462-5840

After Hours Phone: (833)
867-4642

Provider Gender: Male

NPI: 1487781035

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

CHIROPRACTOR

MCCOWN, BARRY

Provider ID: 303815

Board Certified Specialty: No

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: 1487781035

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

CHIROPRACTOR

MCCOWN, BARRY

Provider ID: 301343

Board Certified Specialty: No

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: 1487781035

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CHIROPRACTOR

ZECHA, RONALD

Provider ID: 290678

Board Certified Specialty: No

855 E MADISON AVE
EL CAJON, CA 92020

Phone: (619) 440-2751

Fax: (858) 633-4697

After Hours Phone: (619)

440-2751
 Provider Gender: Male
 NPI: 1427252121
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-6:00PM
 Website: N/A

CHIROPRACTOR

ZECHA, RONALD

Provider ID: 303983
 Board Certified Specialty: No
 855 E MADISON AVE
 EL CAJON, CA 92020
 Phone: (619) 440-2751
 Fax: (858) 633-4697
 After Hours Phone: (619)
 440-2751
 Provider Gender: Male
 NPI: 1427252121
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-6:00PM
 Website: N/A

DERMATOLOGY

CHIANG, JENNIFER

Provider ID: 269156
 Board Certified Specialty: No
 292 AVOCADO AVE
 EL CAJON, CA 92020
 Phone: (619) 267-8303
 Fax: (619) 267-4835
 After Hours Phone: (619)
 267-8303
 Provider Gender: Female
 NPI: 1457656738
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Chinese, Mandarin,
 Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-4:30PM
 Website: N/A

DERMATOLOGY

CHIANG, JENNIFER

Provider ID: 290517
 Board Certified Specialty: No
 292 AVOCADO AVE
 EL CAJON, CA 92020
 Phone: (619) 267-8303
 Fax: (619) 267-4835
 After Hours Phone: (619)
 267-8303
 Provider Gender: Female
 NPI: 1457656738
 Provider English Spoken: Y
 Provider Language(s)

Spoken: Chinese, Mandarin,
 Spanish

Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-4:30PM
 Website: N/A

DERMATOLOGY

CHIANG, JENNIFER

Provider ID: 107659
 Board Certified Specialty: No
 292 AVOCADO AVE
 EL CAJON, CA 92020
 Phone: (619) 267-8303
 Fax: (619) 267-4835
 After Hours Phone: (619)
 267-8303
 Provider Gender: Female
 NPI: 1457656738
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Chinese, Mandarin,
 Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-4:30PM
 Website: N/A

DERMATOLOGY

GONZALEZ, JOSE

Provider ID: 302908
 Board Certified Specialty: No
 292 AVOCADO AVE
 EL CAJON, CA 92020
 Phone: (619) 579-5115
 Fax: (619) 749-6174

After Hours Phone: (619) 579-5115

Provider Gender: Male

NPI: 1437646288

Provider English Spoken: Y
 Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
 8:30AM-4:30PM

Website: N/A

DERMATOLOGY

NELSON, AISLYN

Provider ID: 302937

Board Certified Specialty: No

292 AVOCADO AVE
 EL CAJON, CA 92020

Phone: (619) 579-5115

After Hours Phone: (619) 579-5115

Provider Gender: Female

NPI: 1154717288

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N

Hospital Affiliation: PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
 8:30AM-4:30PM

Website: N/A

DERMATOLOGY

TYAGI, ABHILASHA

Provider ID: 293506

Board Certified Specialty: No

292 AVOCADO AVE
 EL CAJON, CA 92020

Phone: (619) 267-8303

Fax: (619) 267-4835

After Hours Phone: (619) 267-8303

Provider Gender: Female

NPI: 1609262963

Provider English Spoken: Y
 Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
 8:30AM-4:30PM

Website: N/A

DERMATOLOGY

TYAGI, ABHILASHA

Provider ID: 295773

Board Certified Specialty: No

292 AVOCADO AVE
 EL CAJON, CA 92020

Phone: (619) 267-8303

Fax: (619) 267-4835

After Hours Phone: (619) 267-8303

Provider Gender: Female

NPI: 1609262963

Provider English Spoken: Y
 Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
 8:30AM-4:30PM

Website: N/A

DERMATOLOGY

UEBELHOER, NATHAN

Provider ID: 290447

Board Certified Specialty: No

292 AVOCADO AVE
 EL CAJON, CA 92020

Phone: (619) 267-8303

Fax: (619) 267-4835

After Hours Phone: (619) 267-8303

Provider Gender: Male

NPI: 1659344513

Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: NAVAL

MEDICAL CTR SD RBE

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
 8:30AM-4:30PM

Website: N/A

DERMATOLOGY

UEBELHOER, NATHAN

Provider ID: 302915

Board Certified Specialty: No

292 AVOCADO AVE
EL CAJON, CA 92020

Phone: (619) 267-8303

Fax: (619) 267-4835

After Hours Phone: (619)
267-8303

Provider Gender: Male

NPI: 1659344513

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: NAVAL
MEDICAL CTR SD RBE

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-4:30PM

Website: N/A

DERMATOLOGY

UEBELHOER, NATHAN

Provider ID: 125012

Board Certified Specialty: No

292 AVOCADO AVE
EL CAJON, CA 92020

Phone: (619) 267-8303

Fax: (619) 267-4835

After Hours Phone: (619)
267-8303

Provider Gender: Male

NPI: 1659344513

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: NAVAL
MEDICAL CTR SD RBE

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-4:30PM

Website: N/A

FAMILY PRACTICE

ALGHAMDI, ASMA

Provider ID: 300231

Board Certified Specialty: No

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: 1316310840

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

Website: N/A

FAMILY PRACTICE

RONQUILLO, KAREN AN

Provider ID: 304781

Board Certified Specialty: No

855 E MADISON AVE
EL CAJON, CA 92020

Phone: (619) 440-2751

Fax: (360) 462-2746

After Hours Phone: (619)
440-2751

Provider Gender: Female

NPI: 1275160012

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

GASTROENTEROLOGY

NOVO, MEGAN

Provider ID: 296067

Board Certified Specialty: No

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: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, UNIVERSITY OF

CALIFORNIA IRVINE MED CTR,
PARADISE VALLEY HOSPITAL,

TRI CITY MEDICAL CTR,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA


Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**HEARING AID DEALER /
SUPPLIER**

ANDERSON, ELAINE

Provider ID: 268692

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**HEARING AID DEALER /
SUPPLIER**

DAVIS, KELLE

Provider ID: 268650

Board Certified Specialty: No

 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: Y


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

AWDISHO, ALAN


Provider ID: 291282

Board Certified Specialty: No

 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

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

MANSOUR, DAVID

Provider ID: 291543

Board Certified Specialty: No

 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: 1689164949

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic


Cultural Competency: N


Medi-Cal Open Panel: Y

Min/Max Age: 14\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

MAY, LOUIS

Provider ID: 294916

Board Certified Specialty: No

 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
 N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*





INTERNAL MEDICINE

MICHAEL, RAMI
Provider ID: 294908
Board Certified Specialty: No
 875 EL CAJON BLVD
 EL CAJON, CA 92020
 *Phone: (619) 662-4100*
Fax: (619) 785-3356
 *After Hours Phone: (619) 662-4100*
Provider Gender: Male
NPI: 1467871673
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Y
Min/Max Age: 18\999
American Sign Language (ASL):
 N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:30AM-5:00PM*
 *Website: N/A*

INTERNAL MEDICINE








SHEIKH-MOHAMED, HALA
Provider ID: 295219
Board Certified Specialty: No
 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: 1972946770
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, Hindi, Urdu*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
 N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:30AM-5:00PM*
 *Website: N/A*

OBSTETRICS / GYNECOLOGY

SEAVEY, MICHELLE
Provider ID: 302873
Board Certified Specialty: No
 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: 1114081833
 *Provider English Spoken: Y*
Cultural Competency: N








Hospital Affiliation: Sharp Grossmont Hospital
Medi-Cal Open Panel: Y
Min/Max Age: 12\999
American Sign Language (ASL):
 N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

OCCUPATIONAL THERAPIST

DAMATO, MICHELLE
Provider ID: 295939
Board Certified Specialty: No
 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: 1356814776
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
 N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*






OPTOMETRIST

AOTO, KIM
Provider ID: 268721
Board Certified Specialty: No
 450 FLETCHER PKWY STE 112

EL CAJON, CA 92020
 Phone: (800) 898-2020
 Fax: (844) 897-3788
 After Hours Phone: (800) 898-2020
 Provider Gender: Female
 NPI: 1780935650
 Provider English Spoken: Y
 Provider Language(s) Spoken: Vietnamese
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT




INDA, PRISCILLA

Provider ID: 265073
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\110
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

LE, TAYLOR

Provider ID: 304574
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 3\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT







RAMOS, JACQUELYN

Provider ID: 301106
 Board Certified Specialty: No
 855 E MADISON AVE
 EL CAJON, CA 92020

 Phone: (619) 270-3600
 Fax: (360) 462-2746
 After Hours Phone: (619) 270-3600
 Provider Gender: Female
 NPI: 1003515131
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST

ARAIZA, ERNESTINA

Provider ID: 290286
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PSYCHOLOGIST

CASEY, SHANNON

Provider ID: 290309

Board Certified Specialty: No

215 W MADISON AVE
EL CAJON, CA 92020

Phone: (619) 667-6125

Fax: (619) 590-9036

After Hours Phone: (619)
667-6125

Provider Gender: Female

NPI: 1548873755

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PSYCHOLOGIST

GUARDADO-SOTO, RAQUEL

Provider ID: 290342

Board Certified Specialty: No

855 E MADISON AVE
EL CAJON, CA 92020

Phone: (619) 440-2751

Fax: (858) 633-4692

After Hours Phone: (619)
440-2751

Provider Gender: Female

NPI: 1194999276

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Website: N/A

PSYCHOLOGIST

WHEELER, KIM

Provider ID: 302144

Board Certified Specialty: No

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: Y

Min/Max Age: 11\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

CAMPA, PATRICIA

Provider ID: 302398

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

MORRIS, CHAD

Provider ID: 302403

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ENCINITAS

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304139

Board Certified Specialty: No

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

🗣 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED ACUPUNCTURIST

GONZALEZ, ANDRES

Provider ID: 298659

Board Certified Specialty: No

📍 1130 2ND ST
ENCINITAS, CA 92024

☎ Phone: (760) 736-6767

Fax: (760) 736-8740

🕒 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1841857729

🗣 Provider English Spoken: Y

🗣 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304133

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CARDINELL, ANNA

Provider ID: 291412

Board Certified Specialty: No

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1306978614

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHAMBERS, KATRINA

Provider ID: 303521

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

DWYER, ERIN

Provider ID: 301447

Board Certified Specialty: No

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: Y

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HEAD, KRISTIN

Provider ID: 268657

Board Certified Specialty: No

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

DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HOOPER, BONNIE

Provider ID: 275253

Board Certified Specialty: No

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Phone: (760) 436-2300

Fax: (760) 436-5482

After Hours Phone: (760)
436-2300

Provider Gender: Female

NPI: 1821062878

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

KORMANIK, PATRICIA

Provider ID: 282071

Board Certified Specialty: No

1200 GARDEN VIEW RD

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

LANE, KIMBERLY

Provider ID: 301602

Board Certified Specialty: No

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: Y

Min/Max Age: 16\999

American Sign Language (ASL):


N


 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*




CERTIFIED NURSE

PRACTITIONER

PAKENHAM, KATE

Provider ID: 296268
Board Certified Specialty: No
 1130 2ND ST
 ENCINITAS, CA 92024
 *Phone: (760) 736-6767*
Fax: (760) 736-8740
 *After Hours Phone: (760)
736-6767*
Provider Gender: Female
NPI: 1578299343

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*
 *Hours: SU 8:00AM-8:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-5:00PM*
 *Website: N/A*




CERTIFIED NURSE

PRACTITIONER

SRILASAK, MICHELE

Provider ID: 281856
Board Certified Specialty: No
 1200 GARDEN VIEW RD
 STE 200
 ENCINITAS, CA 92024
 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*
Provider Gender: Female
NPI: 1265487326
 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
*American Sign Language (ASL):
N*


 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*



CERTIFIED NURSE

PRACTITIONER

YEO, ALEXANDRIA

Provider ID: 299940
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
*American Sign Language (ASL):
N*



 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

GASTROENTEROLOGY




DILAURO, STEVEN

Provider ID: 298437
Board Certified Specialty: No
 781 GARDEN VIEW CT STE
 100
 ENCINITAS, CA 92024
 *Phone: (760) 783-0441*
Fax: (760) 635-5972

 *After Hours Phone: (760)
783-0441*
Provider Gender: Male
NPI: 1629117643

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
*Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS*


Medi-Cal Open Panel: Y
Min/Max Age: 0\999
*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

GASTROENTEROLOGY

DILAURO, STEVEN

Provider ID: 302998
Board Certified Specialty: No
 781 GARDEN VIEW CT STE
 100
 ENCINITAS, CA 92024
 *Phone: (760) 783-0441*
Fax: (760) 635-5972

 *After Hours Phone: (760)
783-0441*
Provider Gender: Male

NPI: 1629117643

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL
ENCINITAS

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

GASTROENTEROLOGY

DILAURO, STEVEN

Provider ID: 66036

Board Certified Specialty: No

700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024

Phone: (760) 783-0441

Fax: (760) 635-5972

After Hours Phone: (760)
783-0441

Provider Gender: Male

NPI: 1629117643

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL
ENCINITAS

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**HOSPICE AND PALLIATIVE
MEDICINE**

RUBENSIK, TAMARA

Provider ID: 282127

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**HOSPICE AND PALLIATIVE
MEDICINE**

RUBENSIK, TAMARA

Provider ID: 245575

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**MATERNAL AND FETAL
MEDICINE**

BALLAS, JERASIMOS

Provider ID: 209562

Board Certified Specialty: No

781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024

Phone: (858) 657-7200




After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1871767384





Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,

EISENHOWER MEDICAL CTR N
 Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**MATERNAL AND FETAL
 MEDICINE**

HULL, ANDREW

Provider ID: 209483
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A








**MATERNAL AND FETAL
 MEDICINE**

LAURENT, LOUISE

Provider ID: 208641
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A





**MATERNAL AND FETAL
 MEDICINE**

MOORE, THOMAS

Provider ID: 208645
 Board Certified Specialty: No
 781 GARDEN VIEW CT STE
 200
 ENCINITAS, CA 92024
 Phone: (858) 657-7200
 After Hours Phone: (858)
 657-7200
 Provider Gender: Male
 NPI: 1184682379
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, SCRIPPS
 MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**MATERNAL AND FETAL
 MEDICINE**

RICHARDSON, ALVIE

Provider ID: 277315
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

**MATERNAL AND FETAL
MEDICINE**


WOELKERS, DOUGLAS


Provider ID: 209384

Board Certified Specialty: No

 781 GARDEN VIEW CT STE
200


ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1013965748

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, PALOMAR

MEDICAL CENTER, UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, UCSD MEDICAL CTR

Medi-Cal Open Panel: Y

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

**MATERNAL AND FETAL
MEDICINE**


WOLF, RICHARD

Provider ID: 209254

Board Certified Specialty: No

 781 GARDEN VIEW CT STE
200


ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1497713846

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, PALOMAR

MEDICAL CENTER, UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,


UCSD LA JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

**NEONATAL / PERINATAL
MEDICINE**


BAI-TONG, SHIYU


Provider ID: 283286

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

**NEONATAL / PERINATAL
MEDICINE**

NYMAN, KATHERINE

Provider ID: 301821

Board Certified Specialty: No

 354 SANTA FE DR

ENCINITAS, CA 92024

Phone: (760) 633-6120
 Fax: (760) 633-7385
 After Hours Phone: (760) 633-6120
 Provider Gender: Female
 NPI: 1003260951
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES
 Provider ID: 303905
 Board Certified Specialty: No
 354 SANTA FE DR
 ENCINITAS, CA 92024
 Phone: (760) 633-6120
 Fax: (760) 633-7385
 After Hours Phone: (760) 633-6120
 Provider Gender: Male
 NPI: 1538388988
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER,

SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEUROLOGY

BUI, JONATHAN
 Provider ID: 269966
 Board Certified Specialty: No
 477 N EL CAMINO REAL STE 302
 ENCINITAS, CA 92024
 Phone: (760) 944-6377
 Fax: (760) 944-3927
 After Hours Phone: (760) 944-6377
 Provider Gender: Male
 NPI: 1730247974
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEUROLOGY
JINDAL, ANUJA

Provider ID: 206264
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEUROLOGY
SCHORR, EMILY

Provider ID: 305022
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

NEUROLOGY CHILD

KIM MCMANUS, OLIVIA

Provider ID: 206258

Board Certified Specialty: No

📍 477 N EL CAMINO REAL
BLDG D STE 302
ENCINITAS, CA 92024

☎ Phone: (760) 944-5545
Fax: (760) 944-3927

☎ After Hours Phone: (760) 944-5545

Provider Gender: Female

NPI: 1174870067

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, CHILDRENS
HOSPITAL OF ORANGE
COUNTY, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEUROLOGY CHILD

SAHAGIAN, MICHELLE

Provider ID: 206073

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA

Provider ID: 282167

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

DEL CORE, LAURA

Provider ID: 291325

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 16\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 293447

Board Certified Specialty: No

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: Y

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 293448

Board Certified Specialty: No

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: Y

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291336

Board Certified Specialty: No

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: Y

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH

Provider ID: 208682

Board Certified Specialty: No

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: Y

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN

Provider ID: 303061

Board Certified Specialty: No

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: Y

Min/Max Age: 16\999

American Sign Language (ASL): **OPHTHALMOLOGY**

N

 Accessibility: CONTACT PROVIDER


 Website: N/A


OBSTETRICS / GYNECOLOGY

SHAH, NEMI

Provider ID: 272578

Board Certified Specialty: No

 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: 1558715268

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL,

TEMECULA VALLEY HOSPITAL
INC

Medi-Cal Open Panel: Y

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F


8:00AM-5:00PM


 Website: N/A

BANSAL, PREETI


Provider ID: 205617

Board Certified Specialty: No

 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

 Phone: (858) 309-7702

Fax: (760) 944-3927

 After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1871664631

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT

HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN

AND NEWBORNS, SCRIPPS
MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL
HOSPITAL, TRI CITY MEDICAL
CTR


Medi-Cal Open Panel: Y


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

OPHTHALMOLOGY


BHATIA, SHAGUN

Provider ID: 267315


Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

OPHTHALMOLOGY


HENNEIN, LAUREN

Provider ID: 297012

Board Certified Specialty: No

 477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024


 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1699216010

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

MOLL, ANGELA


Provider ID: 205507

Board Certified Specialty: No

 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: Y


Min/Max Age: 0\19


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OPHTHALMOLOGY


MOVAGHAR, MANSOOR

Provider ID: 216413

Board Certified Specialty: No

 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
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

OHALLORAN, HENRY

Provider ID: 205886

Board Certified Specialty: No

 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)

944-5545

Provider Gender: Male

NPI: 1235287947

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPTOMETRIST

AOTO, KIM

Provider ID: 296797

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):




N

 Accessibility: CONTACT

PROVIDER
 Hours: M 9:00AM-5:00PM
 TU 8:30AM-4:30PM
 W 7:30AM-4:30PM
 TH 9:30AM-5:00PM
 F 8:30AM-4:00PM
 Website: N/A

OTOLARYNGOLOGY

BLISS, MORGAN

Provider ID: 206085
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A




OTOLARYNGOLOGY

FRIESEN, TZYYNONG

Provider ID: 244900
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N




 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY

LEUIN, SHELBY




Provider ID: 206112
 Board Certified Specialty: No
 477 N EL CAMINO REAL
 STE D302
 ENCINITAS, CA 92024
 Phone: (760) 944-5545
 Fax: (760) 944-3927
 After Hours Phone: (760)
 944-5545


Provider Gender: Female
 NPI: 1124230909
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, UCSF BENIOFF
 CHILDREN'S HOSPITAL
 OAKLAND
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N




 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY

PATEL, VIJAY

Provider ID: 297035
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**PEDIATRIC ALLERGY /
 IMMUNOLOGY**





GREINER, ALEXANDER



Provider ID: 205696
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC CARDIOLOGY







HALEY, JESSICA

Provider ID: 205688
 Board Certified Specialty: No
 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024
 Phone: (760) 944-5545
 Fax: (760) 944-3927
 After Hours Phone: (760) 944-5545
 Provider Gender: Female
 NPI: 1023329885
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC CARDIOLOGY








NARAYAN, HARI

Provider ID: 239115
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC CARDIOLOGY

SILVA SEPULVEDA, JOSE






Provider ID: 206299




Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC






GASTROENTEROLOGY



CHU, CHRISTOPHER

Provider ID: 301641
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A





PEDIATRIC
GASTROENTEROLOGY
YOUNG, JOCELYN

Provider ID: 294676
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER


 Hours: M-F
 8:00AM-5:00PM
 Website: N/A







PEDIATRIC PULMONOLOGY
CERNELC KOHAN, MATEJKA

Provider ID: 243043
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRIC PULMONOLOGY
**LENHART-PENDERGRASS,
 PATRICIA**

Provider ID: 294642
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A


PEDIATRIC RHEUMATOLOGY
CHANG, JOHANNA



Provider ID: 246395
 Board Certified Specialty: No
 477 N EL CAMINO REAL
 STE D302
 ENCINITAS, CA 92024
 Phone: (760) 944-5545
 After Hours Phone: (760)
 944-5545
 Provider Gender: Female
 NPI: 1821242199
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PHYSICAL MEDICINE / REHABILITATION

LEE, HAEWON


Provider ID: 256227
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):



N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PHYSICIANS ASSISTANT DOUGHERTY, CLARA

Provider ID: 269171
Board Certified Specialty: No
 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: 1609987619

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PHYSICIANS ASSISTANT DOUGHERTY, CLARA




Provider ID: 295926
Board Certified Specialty: No
 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: 1609987619


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS




MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Y
Min/Max Age: 18\999
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PHYSICIANS ASSISTANT HIGGINS, JOSHUA

Provider ID: 287134
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PHYSICIANS ASSISTANT

KIVIAT, ANNETTE

Provider ID: 302454
 Board Certified Specialty: No
 477 N EL CAMINO REAL
 STE D302
 ENCINITAS, CA 92024
 Phone: (760) 944-5545
 Fax: (760) 944-5545
 After Hours Phone: (760)
 944-5545

Provider Gender: Female
 NPI: 1205381845
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, SCRIPPS MEMORIAL
 HOSPITAL, SHARP MEMORIAL
 HOSPITAL
 Medi-Cal Open Panel: N
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

PELIO, DARREN

Provider ID: 293443
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

PHYSICIANS ASSISTANT

SUTTON, BRIAN

Provider ID: 272241
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

VANETSKY, GARY

Provider ID: 269152
 Board Certified Specialty: No

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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PODIATRIST

DUSTIN, ADAM

Provider ID: 275800
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

GOMEZ, JUANITA

Provider ID: 291423

Board Certified Specialty: No

1505 ENCINITAS BLVD
ENCINITAS, CA 92024

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790915759

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

PULMONARY DISEASES

BAUTISTA, JENNIFER

Provider ID: 297958

Board Certified Specialty: No

354 SANTA FE DR
ENCINITAS, CA 92024

Phone: (760) 943-8806
Fax: (760) 944-1309

After Hours Phone: (760)
943-8806

Provider Gender: Female

NPI: 1770727034

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, COMMUNITY

HOSPITAL OF THE MONTEREY

PENINSULA, NATIVIDAD

MEDICAL CENTER

Medi-Cal Open Panel: Y

Min/Max Age: 21\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PULMONARY DISEASES

BAUTISTA, JENNIFER

Provider ID: 300863

Board Certified Specialty: No

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Phone: (760) 230-8994
Fax: (760) 944-1309

After Hours Phone: (760)
230-8994

Provider Gender: Female

NPI: 1770727034

Provider English Spoken: Y
 Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, COMMUNITY

HOSPITAL OF THE MONTEREY

PENINSULA, NATIVIDAD

MEDICAL CENTER

Medi-Cal Open Panel: Y

Min/Max Age: 21\199

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PULMONARY DISEASES

BAUTISTA, JENNIFER

Provider ID: 297957

Board Certified Specialty: No

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Phone: (760) 230-8994
Fax: (760) 944-1309

After Hours Phone: (760)
230-8994

Provider Gender: Female

NPI: 1770727034

Provider English Spoken: Y
 Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, COMMUNITY

HOSPITAL OF THE MONTEREY

PENINSULA, NATIVIDAD

MEDICAL CENTER

Medi-Cal Open Panel: Y

Min/Max Age: 21\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM
 Website: N/A


SURGERY COLON SURGERY

PARRY, LISA

Provider ID: 278552

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL

ARMANI, AVA

Provider ID: 282143

Board Certified Specialty: No

 1200 GARDEN VIEW RD
 STE 200
 ENCINITAS, CA 92024

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
 926-8273

Provider Gender: Female

NPI: 1861759383

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: MEDICAL
 CTR AT UCSF, UCSF Medical
 Center At Mission Bay, UCSF
 MEDICAL CENTER AT MOUNT
 ZION, UCSD LA JOLLA JOHN
 SALLY THORNTON, UCSD
 MEDICAL CTR


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL


JACOBSEN, GARTH

Provider ID: 201730

Board Certified Specialty: No

 1200 GARDEN VIEW RD
 ENCINITAS, CA 92024

 Phone: (858) 657-8860

 After Hours Phone: (858)
 657-8860

Provider Gender: Male

NPI: 1265649966

 Provider English Spoken: Y
 Cultural Competency: N


Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

SURGERY NEUROLOGICAL


RHOTEN, REX LLOYD

Provider ID: 301724

Board Certified Specialty: No

 477 N EL CAMINO REAL
 STE C204

ENCINITAS, CA 92024

 Phone: (760) 230-2256

Fax: (833) 986-0104

 After Hours Phone: (760)
 230-2256

Provider Gender: Male

NPI: 1083792220

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: CEDARS
 SINAI MEDICAL CENTER,
 ALVARADO COMMUNITY
 HOSPITAL


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 9:00AM-4:00PM

 Website: N/A

SURGERY PEDIATRIC

FAIRBANKS, TIMOTHY

Provider ID: 205497

Board Certified Specialty: No

 477 N EL CAMINO REAL

STE D302
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Male
NPI: 1407010556
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

SURGERY PEDIATRIC

KLING, KAREN

Provider ID: 206128
Board Certified Specialty: No
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: Y
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

SURGERY PLASTIC

REID, CHRISTOPHER

Provider ID: 238130
Board Certified Specialty: No
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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

Hours: M-F 8:00AM-5:00PM
Website: N/A

ESCONDIDO

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON

Provider ID: 300090
Board Certified Specialty: No
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: Y
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON

Provider ID: 299881
Board Certified Specialty: No

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: Y

Min/Max Age: 18\100

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY PAIN

MANAGEMENT

ROBINSON, COLE

Provider ID: 300171

Board Certified Specialty: No

160 N DATE ST
ESCONDIDO, CA 92025

Phone: (888) 873-6220

Fax: (888) 873-6220

After Hours Phone: (888)
873-6220

Provider Gender: Male

NPI: 1871799528

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 21\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
7:00AM-4:00PM
SA 7:00AM-4:00PM

Website: N/A

CARDIOLOGY

BAYAT, HAMED

Provider ID: 296843

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CARDIOLOGY

BAYAT, HAMED

Provider ID: 296842

Board Certified Specialty: No

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: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CARDIOLOGY

CHEN, ANDREW

Provider ID: 296830

Board Certified Specialty: No

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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

CARDIOLOGY

GILBERT, CHRISTOPHER

Provider ID: 296839
 Board Certified Specialty: No
 2130 CITRACADO PKWYSTE
 220
 ESCONDIDO, CA 92029
 Phone: (760) 430-0546
 Fax: (760) 743-8837
 After Hours Phone: (760)
 430-0546

Provider Gender: Male
 NPI: 1487657243
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N
 Hospital Affiliation: PALOMAR
 MEDICAL CENTER, PALOMAR
 HEALTH
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

CARDIOLOGY

MALEK, MIKHAIL

Provider ID: 296831
 Board Certified Specialty: No

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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

CARDIOLOGY

SAWHNEY, NAVINDER

Provider ID: 304784
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

CARDIOLOGY

SERRY, ROD

Provider ID: 304765
 Board Certified Specialty: No
 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: 1912945130
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Portuguese,
 Spanish

Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL,
 PALOMAR HEALTH, PALOMAR
 MEDICAL CENTER
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 295845

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

CARDIOVASCULAR DISEASE

SERRY, ROD

Provider ID: 296811

Board Certified Specialty: No

2130 CITRACADO PKWY STE 200

ESCONDIDO, CA 92029

Phone: (760) 743-0546

Fax: (760) 317-9769

After Hours Phone: (760) 743-0546

Provider Gender: Male

NPI: 1912945130

Provider English Spoken: Y

Provider Language(s) Spoken: Farsi, Portuguese, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, PALOMAR HEALTH, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HEAD, KRISTIN

Provider ID: 277866

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

JANNESARI, ROYA

Provider ID: 302339

Board Certified Specialty: No

625 CITRACADO PKWY STE 108

ESCONDIDO, CA 92025

Phone: (760) 743-1431

Fax: (760) 743-6455

After Hours Phone: (760) 743-1431

Provider Gender: Male

NPI: 1063585099

Provider English Spoken: Y

Provider Language(s) Spoken: Farsi

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MCCARTHY, KATHRYN

Provider ID: 298143

Board Certified Specialty: No

488 E VALLEY PKWY STE 404

ESCONDIDO, CA 92025

Phone: (760) 466-9800

Fax: (360) 462-2741

☎ After Hours Phone: (760) 466-9800

Provider Gender: Female

NPI: 1700850781

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

STONE, JENINE

Provider ID: 302343

Board Certified Specialty: No

📍 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: 1801262332

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

WALDRUP, LA'RHONDA

Provider ID: 299259

Board Certified Specialty: No

📍 2185 CITRACADO PKWY
ESCONDIDO, CA 92029

☎ Phone: (442) 281-3193

Fax: (442) 281-3197

☎ After Hours Phone: (442) 281-3193

Provider Gender: Female

NPI: 1831627181

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER, RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

WILSON, HAYLEE

Provider ID: 303145

Board Certified Specialty: No

📍 2185 CITRACADO PKWY
ESCONDIDO, CA 92029

☎ Phone: (442) 281-3193

Fax: (442) 281-3197

☎ After Hours Phone: (442) 281-3193

Provider Gender: Female

NPI: 1154040665

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS

Medi-Cal Open Panel: N

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

SEILNACHT-BERNARD, KAREN

Provider ID: 269203

Board Certified Specialty: No

📍 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: Y




Min/Max Age: 0\999

American Sign Language (ASL):
N



 Accessibility: CONTACT PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A

CHIROPRACTOR




ZECHA, RONALD

Provider ID: 303984
 Board Certified Specialty: No
 460 N ELM ST
 ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 Fax: (360) 462-2745
 After Hours Phone: (760)
 520-8100

Provider Gender: Male
 NPI: 1427252121




 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish



Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N




 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-6:00PM
 Website: N/A

CHIROPRACTOR

ZECHA, RONALD




Provider ID: 303985
 Board Certified Specialty: No
 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: Male
 NPI: 1427252121
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N



 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CHIROPRACTOR




ZECHA, RONALD

Provider ID: 290679
 Board Certified Specialty: No
 460 N ELM ST
 ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 Fax: (360) 462-2745
 After Hours Phone: (760)
 520-8100

Provider Gender: Male
 NPI: 1427252121

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish


Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-6:00PM
 Website: N/A



EMERGENCY MEDICINE

PHAM, LILY




Provider ID: 304936
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM
 M-F 4:00PM-10:00PM
 SA 1:00PM-10:00PM
 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

REDDY, NAVYA

Provider ID: 302350
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

FAMILY PRACTICE

ORTIZ, KENNETH

Provider ID: 301799

Board Certified Specialty: No

📍 704 E GRAND AVE
ESCONDIDO, CA 92025

☎ Phone: (619) 662-4100

Fax: (619) 662-4196

☎ After Hours Phone: (619) 662-4100

Provider Gender: Male

NPI: 1356761571

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

GASTROENTEROLOGY

CHELMILLA, HARITHA

Provider ID: 269204

Board Certified Specialty: No

📍 735 E OHIO AVE STE 204
ESCONDIDO, CA 92025

☎ Phone: (760) 294-7600

Fax: (760) 294-7603

☎ After Hours Phone: (760) 294-7600

Provider Gender: Female

NPI: 1528235892

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Hindi, Telugu

Cultural Competency: N

Hospital Affiliation: Hemet

Global Medical Center,
PALOMAR MEDICAL CENTER,

KINDRED HOSPITAL

RIVERSIDE, KINDRED

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

GASTROENTEROLOGY

GARA, NAVEEN

Provider ID: 269145

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

HEARING AID DEALER /

SUPPLIER

ANDERSON, ELAINE

Provider ID: 268690

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999




American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE




MELBER, DORA

Provider ID: 296996
 Board Certified Specialty: No
 2125 CITRACADO PKWY
 STE 200
 ESCONDIDO, CA 92029
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858)
 966-6710
 Provider Gender: Female
 NPI: 1124413026

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Hungarian, Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY




THORNTON, UCSD MEDICAL
 CTR, RADY CHILDRENS
 HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A




MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294655
 Board Certified Specialty: No
 2125 CITRACADO PKWY
 STE 200
 ESCONDIDO, CA 92029
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858)
 966-6710


Provider Gender: Female
 NPI: 1801207634
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A




NEONATAL / PERINATAL MEDICINE

LE, CRYSTAL

Provider ID: 283707
 Board Certified Specialty: No
 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029
 Phone: (442) 281-3193
 Fax: (442) 281-3197
 After Hours Phone: (442)
 281-3193




Provider Gender: Female
 NPI: 1003028416
 Provider English Spoken: Y
 Cultural Competency: N


Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, SOUTHWEST
 HEALTHCARE INLAND VALLEY
 HOSPITAL, SOUTHWEST
 HEALTHCARE RANCHO
 SPRINGS HOSPITAL, SCRIPPS
 MEMORIAL HOSPITAL,
 SCRIPPS MEMORIAL
 HOSPITAL ENCINITAS
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):


N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE





SAUER, CHARLES




Provider ID: 206163
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A




NEONATAL / PERINATAL MEDICINE

SUTTNER, DENISE
 Provider ID: 206137
 Board Certified Specialty: No
 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 N HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

SWEENEY, NATHALY
 Provider ID: 283801
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEPHROLOGY

AL-DAHMAN, ZAID
 Provider ID: 297898
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM
 Website: N/A





NEPHROLOGY




KAYAL, ANAS
 Provider ID: 262156
 Board Certified Specialty: No
 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: 1851376917
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic
 Cultural Competency: N
 Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER, TEMECULA VALLEY HOSPITAL INC, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEUROLOGY






GOLD, JEFFREY



Provider ID: 277870
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEUROLOGY





JINDAL, ANUJA




Provider ID: 277838
 Board Certified Specialty: No
 2125 CITRACADO PKWY STE 100 ESCONDIDO, CA 92029
 Phone: (760) 294-9260
 Fax: (760) 294-9274
 After Hours Phone: (760) 294-9260
 Provider Gender: Female
 NPI: 1194046581
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEUROLOGY

KIM MCMANUS, OLIVIA




Provider ID: 277873
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEUROLOGY

NELSON, JAMES






Provider ID: 277849
 Board Certified Specialty: No
 2125 CITRACADO PKWY STE 100 ESCONDIDO, CA 92029




 Phone: (858) 966-5819
 After Hours Phone: (858) 966-5819
 Provider Gender: Male
 NPI: 1568434546
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: VALLEY CHILDRENS HOSPITAL, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEUROLOGY





ZIMBRIC, MICHAEL

Provider ID: 277891
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEUROLOGY CHILD
SAHAGIAN, MICHELLE

Provider ID: 206076
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A



OBSTETRICS / GYNECOLOGY
BULLOCH, EDGAR

Provider ID: 298657
 Board Certified Specialty: No
 460 N ELM ST ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 Fax: (619) 401-0522
 After Hours Phone: (760) 520-8100
 Provider Gender: Male
 NPI: 1508046376
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: GROSSMONT HOSPITAL, Sharp Grossmont Hospital
 Medi-Cal Open Panel: Y
 Min/Max Age: 12\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM SA 8:00AM-0:00PM
 Website: N/A








OBSTETRICS / GYNECOLOGY

HINSHAW, PAUL




Provider ID: 277041
 Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-TH 9:00AM-4:30PM F 9:00AM-2:00PM*
 *Website: N/A*

OBSTETRICS / GYNECOLOGY
HINSHAW, PAUL





Provider ID: 285629
Board Certified Specialty: No
 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: Y
Min/Max Age: 16\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-TH 9:00AM-4:30PM F 9:00AM-2:00PM*
 *Website: N/A*

OBSTETRICS / GYNECOLOGY

HINSHAW, PAUL
Provider ID: 285628
Board Certified Specialty: No
 1955 CITRACADO PKWY STE 302
 ESCONDIDO, CA 92029
 *Phone: (760) 233-1896*
 *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: Y
Min/Max Age: 16\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-TH 9:00AM-4:30PM F 9:00AM-2:00PM*
 *Website: N/A*

OBSTETRICS / GYNECOLOGY
HINSHAW, PAUL

Provider ID: 277040
Board Certified Specialty: No
 1955 CITRACADO PKWY STE 302
 ESCONDIDO, CA 92029
 *Phone: (760) 233-1896*
 *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: Y
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-TH 9:00AM-4:30PM F 9:00AM-2:00PM*
 *Website: N/A*

OBSTETRICS / GYNECOLOGY
LAMALE-SMITH, LEAH

Provider ID: 285518
Board Certified Specialty: No
 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: Y
Min/Max Age: 16\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*


 Website: N/A

OBSTETRICS / GYNECOLOGY
SHORT, ABIADÉ


Provider ID: 290595

Board Certified Specialty: No

 255 N ASH ST STE 101
ESCONDIDO, CA 92027


 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Male

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

Medi-Cal Open Panel: Y

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


OPHTHALMOLOGY

BANSAL, PREETI

Provider ID: 277883

Board Certified Specialty: No

 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1871664631

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MARY

BIRCH HOSP FOR WOMEN
AND NEWBORNS, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL


HOSPITAL, TRI CITY MEDICAL
CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OPHTHALMOLOGY

BHATIA, SHAGUN

Provider ID: 277877

Board Certified Specialty: No

 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600


Provider Gender: Female

NPI: 1104237353

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OPHTHALMOLOGY

HENNEIN, LAUREN

Provider ID: 297014

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


MOLL, ANGELA


Provider ID: 205895

Board Certified Specialty: No

 625 CITRACADO PKWY STE 206

ESCONDIDO, CA 92025

 Phone: (760) 755-7600

 After Hours Phone: (760) 755-7600

Provider Gender: Female

NPI: 1861648602

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL


OAKLAND, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


MOLL, ANGELA

Provider ID: 277824

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


MOVAGHAR, MANSOOR

Provider ID: 277833

Board Certified Specialty: No

 2125 CITRACADO PKWY STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760) 755-7600

Provider Gender: Male

NPI: 1497792220

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OPHTHALMOLOGY

OHALLORAN, HENRY

Provider ID: 277869

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OPTOMETRIST

AOTO, KIM

Provider ID: 296796
Board Certified Specialty: No
📍 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M 9:00AM-5:00PM
TU 8:30AM-4:30PM
W 7:30AM-4:30PM
TH 9:30AM-5:00PM
F 8:30AM-4:00PM
🌐 Website: N/A

OPTOMETRIST

AOTO, KIM

Provider ID: 268719
Board Certified Specialty: No
📍 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OTOLARYNGOLOGY

BLISS, MORGAN

Provider ID: 277537
Board Certified Specialty: No
📍 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OTOLARYNGOLOGY
FRIESEN, TZYYNONG

Provider ID: 277853
Board Certified Specialty: No
📍 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OTOLARYNGOLOGY






JIANG, WEN



Provider ID: 277860
Board Certified Specialty: No
📍 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY




PATEL, VIJAY

Provider ID: 297038
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC CARDIOLOGY

DAVIS, CHRISTOPHER



Provider ID: 277811
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC CARDIOLOGY

HALEY, JESSICA





Provider ID: 277867
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC CARDIOLOGY

HALEY, JESSICA

Provider ID: 205689
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC CARDIOLOGY

NARAYAN, HARI

Provider ID: 277846

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC CARDIOLOGY

SAH, SERENA

Provider ID: 301737

Board Certified Specialty: No

📍 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

☎ Phone: (760) 294-9260

Fax: (760) 294-9274

📞 After Hours Phone: (760)
294-9260

Provider Gender: Female

NPI: 1295042653

📄 Provider English Spoken: Y

📄 Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC CARDIOLOGY

SILVA SEPULVEDA, JOSE

Provider ID: 206298

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC DERMATOLOGY

BOIKO, SUSAN

Provider ID: 277158

Board Certified Specialty: No

📍 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

☎ Phone: (760) 755-7600

Fax: (760) 755-7699

📞 After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1053488981

📄 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

AGHILI, ROXANA

Provider ID: 303783

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1851927883

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: KAISER
FOUNDATION HOSPITAL SAN
DIEGO, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

BELLOMO, THOMAS

Provider ID: 277865

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760)
739-1543

Provider Gender: Male

NPI: 1700926698

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

BETTY, MARYANN

Provider ID: 277914

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1285014498

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

GORHAM, LAURA

Provider ID: 277851

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

GROSS, MATTHEW

Provider ID: 297178

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

JOSHI, WEENA

Provider ID: 277907

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1376862177

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR HEALTH

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

LOVEJOY, AMY

Provider ID: 277884

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1790856557

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, CHILDRENS HOSPITAL

OF ORANGE COUNTY

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

MENDES, CHANTAL

Provider ID: 295670

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1134681265

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY




MEDICINE




MINKA, GENEVIEVE

Provider ID: 277859

Board Certified Specialty: No


2125 CITRACADO PKWY

STE 100
 ESCONDIDO, CA 92029
 Phone: (760) 739-1543
 Fax: (760) 294-9274
 After Hours Phone: (760) 739-1543
 Provider Gender: Female
 NPI: 1689646689
 Provider English Spoken: Y
 Provider Language(s) Spoken: French
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19





American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM M-F 4:00PM-10:00PM SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

OZAKI, YOSHIHIRO
 Provider ID: 277902
 Board Certified Specialty: No
 2125 CITRACADO PKWY STE 100
 ESCONDIDO, CA 92029
 Phone: (760) 739-1543
 Fax: (760) 294-9274
 After Hours Phone: (760) 739-1543
 Provider Gender: Male
 NPI: 1467898239
 Provider English Spoken: Y








 Provider Language(s) Spoken: Japanese
 Cultural Competency: N
 Hospital Affiliation: VALLEY CHILDRENS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM M-F 4:00PM-10:00PM SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

PARKER, SHERINE
 Provider ID: 277872
 Board Certified Specialty: No
 2125 CITRACADO PKWY STE 100
 ESCONDIDO, CA 92029
 Phone: (760) 739-1543
 Fax: (760) 294-9274
 After Hours Phone: (760) 739-1543
 Provider Gender: Female
 NPI: 1477626513
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS

HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM M-F 4:00PM-10:00PM SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE
QUINONES-PEREZ, BIANCA

Provider ID: 277810
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM M-F 4:00PM-10:00PM SA 1:00PM-10:00PM


 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

TODD, SARAH


Provider ID: 302802

Board Certified Specialty: No

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 739-1543

Fax: (760) 294-9274

 After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1407299787

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


TYGART, MELISSA

Provider ID: 295046


Board Certified Specialty: No

 625 CITRACADO PKWY STE

200
ESCONDIDO, CA 92025

 Phone: (760) 746-2641

Fax: (760) 740-2178

 After Hours Phone: (760)
746-2641

Provider Gender: Female

NPI: 1336602507

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:30AM-0:00PM


 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

TYGART, MELISSA


Provider ID: 294099

Board Certified Specialty: No

 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: 1336602507

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN


DIEGO

Medi-Cal Open Panel: N

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM


 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA

Provider ID: 289412

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA

Provider ID: 205812

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

WANG, EMILY

Provider ID: 277868

Board Certified Specialty: No

2125 CITRACADO PKWY STE 100

ESCONDIDO, CA 92029

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760) 739-1543

Provider Gender: Female

NPI: 1427142363

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC

GASTROENTEROLOGY

CHU, CHRISTOPHER

Provider ID: 301643

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

PEDIATRIC

GASTROENTEROLOGY

PATHAK, SAGAR

Provider ID: 301826

Board Certified Specialty: No

2125 CITRACADO PKWY STE 100

ESCONDIDO, CA 92029

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760) 294-9260

Provider Gender: Male

NPI: 1700318292

Provider English Spoken: Y

Provider Language(s)

Spoken: Gujarati, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

PEDIATRICS

CAMERON, MELISSA

Provider ID: 205966

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**PHYSICAL MEDICINE /
REHABILITATION**

RICHARDSON, HENRY

Provider ID: 295277

Board Certified Specialty: No

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: Y

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**PHYSICAL MEDICINE /
REHABILITATION**

RYAN, KYLE

Provider ID: 275660

Board Certified Specialty: No

625 CITRACADO PKWY
ESCONDIDO, CA 92025

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760)
294-9260

Provider Gender: Male

NPI: 1447645742

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

BEITTER, KEERSTIN

Provider ID: 300094

Board Certified Specialty: No

1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029

Phone: (760) 738-5533

Fax: (760) 738-3835

After Hours Phone: (760)
738-5533

Provider Gender: Female

NPI: 1477129302

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

CHATFIELD, ALEXANDRA

Provider ID: 276716

Board Certified Specialty: No

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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*




PHYSICIANS ASSISTANT

CORVINI, NICOLAS

Provider ID: 296999
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

PHYSICIANS ASSISTANT



CUTCHON, SYDNEY

Provider ID: 302306
Board Certified Specialty: No
 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: 1659914240


 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Tagalog

Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 18\999

American Sign Language (ASL):
N



 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


PHYSICIANS ASSISTANT

FUNARI, CHRISTOPHER

Provider ID: 301993
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999


American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*



PHYSICIANS ASSISTANT

GANGJI, SHAZMIN

Provider ID: 298110
Board Certified Specialty: No
 460 N ELM ST
 ESCONDIDO, CA 92025
 *Phone: (760) 520-8100*
Fax: (360) 462-2745

 *After Hours Phone: (760)*
520-8100


Provider Gender: Female
NPI: 1346763638

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 14\999

American Sign Language (ASL):
N



 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

PHYSICIANS ASSISTANT


KIVIAT, ANNETTE

Provider ID: 302456
Board Certified Specialty: No
 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: N

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM



 Website: N/A

PHYSICIANS ASSISTANT

MEHTA, NOOPUR

Provider ID: 297093

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100

Fax: (760) 466-1373

 After Hours Phone: (760)
520-8100

Provider Gender: Female


NPI: 1417682931


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

MONTES, VIVIAN

Provider ID: 298090

Board Certified Specialty: No

 728 E VALLEY PKWY
ESCONDIDO, CA 92025


 Phone: (760) 737-6900

Fax: (360) 462-2741

 After Hours Phone: (760)
737-6900

Provider Gender: Female

NPI: 1881358026

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

NIAKAMAL, EVAN

Provider ID: 291250

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


WALSH, JOHN

Provider ID: 301971

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


WILE, KIMBERLY

Provider ID: 302351

Board Certified Specialty: No

 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: 1174194641

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

WRIGHT, DEREK

Provider ID: 302390

Board Certified Specialty: No

📍 1955 CITRACADO PKWY ESCONDIDO, CA 92029

☎ Phone: (760) 738-5533

Fax: (760) 738-3835

☎ After Hours Phone: (760) 738-5533

Provider Gender: Male

NPI: 1629674858

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

PODIATRIST

ALGHURAIBI, OHOUD

Provider ID: 295998

Board Certified Specialty: No

📍 460 N ELM ST ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100

Fax: (760) 466-1373

☎ After Hours Phone: (760) 520-8100

Provider Gender: Female

NPI: 1669842357

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

PODIATRIST

LARKINS, PHILIP

Provider ID: 297044

Board Certified Specialty: No

📍 460 N ELM ST ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100

Fax: (360) 462-2745

☎ After Hours Phone: (760) 520-8100

Provider Gender: Male

NPI: 1659375103

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: CLOVIS COMMUNITY HOSPITAL, ST

AGNES MEDICAL CENTER, MADERA COMMUNITY

HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM SA 8:00AM-0:00PM

🌐 Website: N/A

PODIATRIST

NEGRON, RICARDO

Provider ID: 290470

Board Certified Specialty: No

📍 728 E VALLEY PKWY ESCONDIDO, CA 92025

☎ Phone: (760) 737-6900

Fax: (858) 633-4694

☎ After Hours Phone: (760) 737-6900

Provider Gender: Male

NPI: 1932548393

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: Providence St Joseph Hospital

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A



PODIATRIST

NEGRON, RICARDO

Provider ID: 274646

Board Certified Specialty: No


📍 1001 E GRAND AVE ESCONDIDO, CA 92025

 Phone: (760) 520-8200
 Fax: (858) 633-4693

 After Hours Phone: (760) 520-8200

Provider Gender: Male

NPI: 1932548393

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: Providence


St Joseph Hospital


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A


PODIATRIST

READ, TRENTON

Provider ID: 300882

Board Certified Specialty: No

 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: Y


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A


PODIATRIST

READ, TRENTON


Provider ID: 296654

Board Certified Specialty: No

 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: Y


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

CARLTON PENN, CORNELIA

Provider ID: 290406

Board Certified Specialty: No

 425 N DATE ST ESCONDIDO, CA 92025

 Phone: (760) 520-8340

Fax: (360) 462-2752

 After Hours Phone: (760) 520-8340

Provider Gender: Female

NPI: 1891720611

 Provider English Spoken: Y

 Provider Language(s) Spoken: German

Cultural Competency: N


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

ESTRADA PATINO, ANGELA

Provider ID: 296605

Board Certified Specialty: No

 460 N ELM ST ESCONDIDO, CA 92025

 Phone: (760) 520-8100

Fax: (760) 466-1373

 After Hours Phone: (760) 520-8100

Provider Gender: Female

NPI: 1629339015

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Y

Min/Max Age: 14\999


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

 Website: N/A

PSYCHOLOGIST

SCHEUBER, TIMOTHY

Provider ID: 290956

Board Certified Specialty: No

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8340

Fax: (360) 462-2752

After Hours Phone: (760)
520-8340

Provider Gender: Male

NPI: 1083017396

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 7:00AM-7:30PM

TU 7:00AM-4:30PM

W 7:00AM-7:30PM

TH-F 7:00AM-4:30PM

Website: N/A

PSYCHOLOGIST

SUOZZO, JOSEPH

Provider ID: 290758

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PSYCHOLOGIST

TEETER-WITT, ALYSSA

Provider ID: 290891

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PSYCHOLOGIST

TEETER-WITT, ALYSSA

Provider ID: 290779

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PSYCHOLOGIST

VALLEZ-BARLAM, ANDREA

Provider ID: 290631

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A



PSYCHOLOGIST

VALLEZ-BARLAM, ANDREA

Provider ID: 290630



Board Certified Specialty: No

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: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A



PSYCHOLOGIST

VAQUERO, JUANA

Provider ID: 290762

Board Certified Specialty: No

 425 N DATE ST
 ESCONDIDO, CA 92025

 Phone: (760) 520-8300
 Fax: (858) 633-4698


 After Hours Phone: (760) 520-8300


Provider Gender: Female
 NPI: 1023459708

 Provider English Spoken: Y
 Cultural Competency: N

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A



PSYCHOLOGIST

WOODWORTH, JENNIFER

Provider ID: 290634

Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PULMONARY DISEASES


BENDER, FRANK

Provider ID: 304863

Board Certified Specialty: No



 2125 CITRACADO PKWY
 STE 230

ESCONDIDO, CA 92029
 Phone: (760) 489-1458

 Fax: (760) 489-1246

 After Hours Phone: (760) 489-1458

Provider Gender: Male
 NPI: 1912015363

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
 Cultural Competency: N


Hospital Affiliation: PALOMAR
 MEDICAL CENTER, PALOMAR

HEALTH

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PULMONARY DISEASES


QUAN, MICHELE

Provider ID: 287097

Board Certified Specialty: No

 2125 CITRACADO PKWY
 STE 230

ESCONDIDO, CA 92029
 Phone: (760) 489-1458

 Fax: (760) 489-1246

 After Hours Phone: (760) 489-1458


Provider Gender: Female
 NPI: 1629462882


 Provider English Spoken: Y
 Cultural Competency: N


Hospital Affiliation: REDLANDS
 COMMUNITY HOSP

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A


RADIATION ONCOLOGY


COLEMAN, LORI

Provider ID: 221090

Board Certified Specialty: No

 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: Y

Min/Max Age: 19\100

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

RADIATION ONCOLOGY

VOLPP, PAUL

Provider ID: 221103

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 19\100

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-4:00PM

🌐 Website: N/A

RADIATION ONCOLOGY

WEINSTEIN, GEOFFREY

Provider ID: 220041

Board Certified Specialty: No

📍 2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029

☎ Phone: (760) 739-3371

Fax: (760) 739-3779

☎ After Hours Phone: (760) 739-3371

Provider Gender: Male

NPI: 1841233947

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SHARP CHULA VISTA MED CTR

Medi-Cal Open Panel: Y

Min/Max Age: 19\100

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH

Provider ID: 283206

Board Certified Specialty: No

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025

☎ Phone: (760) 839-7370

Fax: (858) 429-7938

☎ After Hours Phone: (760) 839-7370

Provider Gender: Male

NPI: 1427456151

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

MCGEE, JACQUELINE

Provider ID: 252473

Board Certified Specialty: No

📍 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: Y
Min/Max Age: 8\999
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
 Hours: M-F
7:00AM-6:00PM
 Website: N/A

SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS

Provider ID: 296931

Board Certified Specialty: No

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: Y
Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
 Website: N/A

SPEECH PATHOLOGIST

CLARK, MELISSA

Provider ID: 296924

Board Certified Specialty: No

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: Y
Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: SU 7:00AM-7:00PM
M-F 7:00AM-7:00PM

Website: N/A

SPEECH PATHOLOGIST

MADERA RIVERA, PAULA

Provider ID: 296577

Board Certified Specialty: No

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: 1205443769

Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish

Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 7:00AM-7:00PM

Website: N/A

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO

Provider ID: 304606

Board Certified Specialty: No

1045 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025

Phone: (760) 884-4500
Fax: (619) 483-3997

After Hours Phone: (760) 884-4500

Provider Gender: Male
NPI: 1437470762

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL, PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

GROVE, JAY

Provider ID: 245226
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM
 Website: N/A

SURGERY ORTHOPEDIC
EDMONDS, ERIC

Provider ID: 277831
 Board Certified Specialty: No
 2125 CITRACADO PKWY
 STE 100
 ESCONDIDO, CA 92029
 Phone: (760) 480-8770
 Fax: (760) 480-8811
 After Hours Phone: (760)

480-8770
 Provider Gender: Male
 NPI: 1013048412
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

SURGERY ORTHOPEDIC
KNUTSON, THOMAS

Provider ID: 296851
 Board Certified Specialty: No
 2130 CITRACADO PKWY STE 200
 ESCONDIDO, CA 92029
 Phone: (760) 743-4789
 Fax: (760) 743-4779
 After Hours Phone: (760) 743-4789
 Provider Gender: Male
 NPI: 1962409938
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: PALOMAR MEDICAL CENTER
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Website: N/A

SURGERY ORTHOPEDIC
SHARP, LORRA

Provider ID: 304761
 Board Certified Specialty: No
 2130 CITRACADO PKWY STE 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A





SURGERY ORTHOPEDIC
SHARP, LORRA




Provider ID: 296808
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

SURGERY PEDIATRIC

KLING, KAREN

Provider ID: 206130
 Board Certified Specialty: No
 625 CITRACADO PKWY STE
 206
 ESCONDIDO, CA 92025
 Phone: (760) 755-7600
 Fax: (760) 755-7699
 After Hours Phone: (760)
 755-7600
 Provider Gender: Female
 NPI: 1982775144
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, UCSD MEDICAL CTR,
 SHARP MARY BIRCH HOSP
 FOR WOMEN AND
 NEWBORNS, NATIONAL
 NAVAL MED CTR, SHARP
 MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19



American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A




FALLBROOK

CERTIFIED ACUPUNCTURIST

CRAFT, KEVIN

Provider ID: 290943
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: TU-F
 8:00AM-5:00PM
 Website: N/A




CERTIFIED NURSE

PRACTITIONER

HAMED, JACQUELYN

Provider ID: 302366
 Board Certified Specialty: No
 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: 1578260758



 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 299775
 Board Certified Specialty: No
 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: N
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM*
 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 298086
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999


American Sign Language (ASL): N




 *Accessibility: CONTACT PROVIDER*
 *Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM*
 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

STOJANOVSKA, JOVANA

Provider ID: 301367
Board Certified Specialty: No
 1328 S MISSION RD
 FALLBROOK, CA 92028
 *Phone: (760) 451-4730*
Fax: (760) 451-4700
 *After Hours Phone: (760) 451-4730*


Provider Gender: Female
NPI: 1215638499
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*



CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 302118
Board Certified Specialty: No
 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: N
Min/Max Age: 0\19
American Sign Language (ASL): N


 *Accessibility: CONTACT*




PROVIDER
 *Hours: M-TH
8:00AM-4:00PM*
 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 299407
Board Certified Specialty: No
 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: Y
Min/Max Age: 5\100
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-TH
8:00AM-4:00PM*
 *Website: N/A*

CERTIFIED REGISTERED NURSE MIDWIFE

GUIDI, CASEY

Provider ID: 296010
Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

CHIROPRACTOR

FARSHLER, ANTHONY

Provider ID: 290306
 Board Certified Specialty: No

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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Website: N/A

CHIROPRACTOR

HALVORSON, PAULA

Provider ID: 298338
 Board Certified Specialty: No

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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Hours: TU 8:00AM-5:00PM
 TH-F 8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

CHRISTIE, PATRICIA

Provider ID: 299526
 Board Certified Specialty: No

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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Hours: M-F
 8:00AM-5:30PM

Website: N/A

OPTOMETRIST

BULLUM, ANTHONY

Provider ID: 290329
 Board Certified Specialty: No

1328 S MISSION RD
 FALLBROOK, CA 92028

Phone: (760) 451-4730
 Fax: (760) 457-4700

After Hours Phone: (760)
 451-4730

Provider Gender: Male

NPI: 1992773956

Provider English Spoken: Y
 Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Website: N/A

PEDIATRICS

ROBINSON, DAISY

Provider ID: 298311
 Board Certified Specialty: No

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: Y




Min/Max Age: 0\18


American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH
 8:00AM-4:00PM
 Website: N/A

PHYSICIANS ASSISTANT

SERING, MALIA

Provider ID: 269279
 Board Certified Specialty: No
 1309 S MISSION RD STE A
 FALLBROOK, CA 92028
 Phone: (760) 757-7546
 Fax: (760) 828-9138
 After Hours Phone: (760)
 757-7546
 Provider Gender: Female
 NPI: 1013198720

 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):




N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

SERING, MALIA

Provider ID: 297121
 Board Certified Specialty: No
 1309 S MISSION RD STE A
 FALLBROOK, CA 92028
 Phone: (760) 757-7546
 Fax: (760) 828-9138
 After Hours Phone: (760)
 757-7546
 Provider Gender: Female



NPI: 1013198720
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PODIATRIST

NEGRON, RICARDO

Provider ID: 290469
 Board Certified Specialty: No
 1309 S MISSION RD
 FALLBROOK, CA 92028
 Phone: (760) 690-5900
 Fax: (360) 462-2745
 After Hours Phone: (760)
 690-5900
 Provider Gender: Male
 NPI: 1932548393


 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: Providence
 St Joseph Hospital
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):



N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A




CERTIFIED NURSE

PRACTITIONER

SHARTZER, ANNA

Provider ID: 293203
 Board Certified Specialty: No
 903 E DEVONSHIRE AVE
 STE D
 HEMET, CA 92543
 Phone: (951) 216-6100
 Fax: (951) 765-3075
 After Hours Phone: (951)
 216-6100
 Provider Gender: Female
 NPI: 1235807975




 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Tagalog
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):





N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER


SHARTZER, ANNA

Provider ID: 293202
 Board Certified Specialty: No
 422 N SAN JACINTO ST
 HEMET, CA 92543
 Phone: (951) 652-8700
 Fax: (888) 696-2590
 After Hours Phone: (951)
 652-8700
 Provider Gender: Female
 NPI: 1235807975

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Tagalog
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

SMITH, KELLI






Provider ID: 272953
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

IMPERIAL BEACH

CERTIFIED NURSE





PRACTITIONER



ALBARRAN-SLOVIN, MELODY
 Provider ID: 299329
 Board Certified Specialty: No
 949 PALM AVE
 IMPERIAL BEACH, CA 91932
 Phone: (619) 429-3733
 Fax: (619) 628-5550
 After Hours Phone: (619)
 429-3733
 Provider Gender: Female
 NPI: 1740953249




 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

BORRAJERO, OBEL
 Provider ID: 303242
 Board Certified Specialty: No
 949 PALM AVE
 IMPERIAL BEACH, CA 91932
 Phone: (619) 429-3733
 Fax: (619) 628-5550
 After Hours Phone: (619)
 429-3733
 Provider Gender: Male
 NPI: 1093280588




 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N


Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A




CERTIFIED NURSE

PRACTITIONER

CUNNINGHAM, STEPHANIE

Provider ID: 301310
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\18
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

O'CONNELL, STEFANY

Provider ID: 296845
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

THYGERSEN, ALAYSA

Provider ID: 297909

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

FAMILY PRACTICE

BROWNING, ELIZABETH

Provider ID: 298122

Board Certified Specialty: No

📍 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: 1821431057

🗉 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

FAMILY PRACTICE

SUMMERS-DAY, COURTNEY

Provider ID: 290977

Board Certified Specialty: No

📍 949 PALM AVE
IMPERIAL BEACH, CA 91932

☎ Phone: (619) 429-3733

Fax: (619) 628-5550

🕒 After Hours Phone: (619) 429-3733

Provider Gender: Female

NPI: 1124288873

🗉 Provider English Spoken: Y

🗉 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

INTERNAL MEDICINE

RYAN, DANA

Provider ID: 298099

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 18\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8:30AM-8:00PM

TU-W 8:30AM-5:00PM

TH 8:30AM-8:00PM

F 8:30AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON

Provider ID: 304530
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH
 7:00AM-7:00PM
 F 7:00AM-5:00PM
 SA 8:00AM-1:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA

Provider ID: 299890
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA

Provider ID: 301973
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI

Provider ID: 287101
 Board Certified Specialty: No

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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F
 7:00AM-6:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA

Provider ID: 305015
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-TH

7:00AM-7:00PM
F 7:00AM-4:00PM
Website: N/A

**REGISTERED PHYSICAL
THERAPIST
NGUYEN, TIA**

Provider ID: 305016
Board Certified Specialty: No
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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-TH
7:00AM-7:00PM
F 7:00AM-4:00PM
Website: N/A

**REGISTERED PHYSICAL
THERAPIST
NOVENCIDO, ANDREW**

Provider ID: 301995
Board Certified Specialty: No
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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**REGISTERED PHYSICAL
THERAPIST
NOVENCIDO, ANDREW**

Provider ID: 286783
Board Certified Specialty: No
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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**REGISTERED PHYSICAL
THERAPIST
SPARKS, TODD**

Provider ID: 301109


Board Certified Specialty: No
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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M 7:00AM-7:00PM
TU 7:00AM-0:00PM
W-TH 7:00AM-7:00PM
F 7:00AM-0:00PM
Website: N/A

**REGISTERED PHYSICAL
THERAPIST
SUGGS, SARAH**

Provider ID: 301429
Board Certified Specialty: No
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: Y
Min/Max Age: 0\999

American Sign Language (ASL): Provider Gender: Male
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7:00AM-7:00PM

 Website: N/A

REGISTERED PHYSICAL


THERAPIST

SUGGS, SARAH

Provider ID: 298365

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7:00AM-7:00PM

 Website: N/A

REGISTERED PHYSICAL


THERAPIST

VILLANUEVA, GIOVANNI

Provider ID: 301531

Board Certified Specialty: No


 600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

 Phone: (619) 482-3000

Fax: (619) 332-4220

 After Hours Phone: (619)
482-3000

NPI: 1063046878

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
7:00AM-7:00PM

F 7:00AM-5:00PM

 Website: N/A

LA JOLLA


ANESTHESIOLOGY


ALEXANDER, BRENTON

Provider ID: 242302

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA

Provider ID: 300067

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265938724

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


ANESTHESIOLOGY


BRUNO, KELLY

Provider ID: 238904

Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY

CURRAN, BRIAN

Provider ID: 239003
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1710373642
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY






FEJLEH, ASHLEY

Provider ID: 269503
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037

 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1609353465
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY

FUNDINGSLAND, BRENT










Provider ID: 280469
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

 9300 CAMPUS POINT DR

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A


ANESTHESIOLOGY

HOSALKAR, HETAL

Provider ID: 243370
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY





HYLTON, DIANA




Provider ID: 241736
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY






MEYER, MEGAN

Provider ID: 239608
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY

NGUYEN, QUOC SY




Provider ID: 242189
 Board Certified Specialty: No
 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

THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A





ANESTHESIOLOGY

OKAMOTO, VINCENT

Provider ID: 245952
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A








ANESTHESIOLOGY

OSWALD, JESSICA








Provider ID: 239601
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A






ANESTHESIOLOGY

SHAW, SUSANNA
 Provider ID: 255317
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY





SORIA, CLAIRE
 Provider ID: 243295
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A




ANESTHESIOLOGY

SUYDAM, STEVEN
 Provider ID: 286570
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1386856821
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N

Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL,
 GROSSMONT HOSPITAL,
 SHARP MEMORIAL HOSPITAL,
 SCRIPPS MERCY HOSPITAL,
 TRI CITY MEDICAL CTR, SHARP
 MARY BIRCH HOSP FOR
 WOMEN AND NEWBORNS,
 SHARP CHULA VISTA MED
 CTR, SHARP CHULA VISTA
 MED CTR, SHARP CORONADO
 HOSP AND HEALTHCARE CTR,
 RADY CHILDRENS HOSPITAL
 SAN DIEGO, SCRIPPS GREEN
 HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY

TRIVEDI, SURAJ
 Provider ID: 246750
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY



TSUDA, PAIGE

Provider ID: 271683
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1003261595
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY





TULLY, JEFFREY




Provider ID: 283690
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY

TZENG, ERIC



Provider ID: 284578
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY

WANG, MICHELLE

Provider ID: 286139
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1659802965
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY

YODER, ANDREA

Provider ID: 272805
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273

Provider Gender: Female
 NPI: 1629463104

Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY
YOUNAN, LAWRENCE

Provider ID: 240871
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY PAIN
MANAGEMENT
CASTELLANOS, JOEL

Provider ID: 243554
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CARDIOLOGY
AL KHIAMI, BELAL

Provider ID: 275993
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CARDIOLOGY
CRUZ RODRIGUEZ, JOSE


Provider ID: 300062
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CARDIOLOGY

DAMANI, SAMIR

Provider ID: 303097
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F

8:00AM-5:00PM
 SA 9:00AM-4:00PM
 Website: N/A





CARDIOLOGY


GOVEA, ALAYN

Provider ID: 300030
 Board Certified Specialty: No
 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
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CARDIOLOGY

MIZZELL, ANNA

Provider ID: 214021
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CARDIOLOGY

PHREANER, NICHOLAS

Provider ID: 224864
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CARDIOLOGY

TAUB, PAM

Provider ID: 277682
 Board Certified Specialty: No

9434 MEDICAL CENTER DR CTR
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CARDIOLOGY

TAUB, PAM

Provider ID: 277681
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1346355161
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD MEDICAL

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CARDIOLOGY

WETTERSTEN, NICHOLAS

Provider ID: 210604
 Board Certified Specialty: No
 9434 MEDICAL CENTER DR
 FL 1
 LA JOLLA, CA 92037
 Phone: (858) 657-8630
 Fax: (858) 657-8814
 After Hours Phone: (858) 657-8630
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CARDIOVASCULAR DISEASE

KEEN, WILLIAM

Provider ID: 291303

Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CARDIOVASCULAR DISEASE

SHAPIRO, HILARY

Provider ID: 300000
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304140
 Board Certified Specialty: No
 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
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CERTIFIED ACUPUNCTURIST ARELLANO, JACQUELINE

Provider ID: 304136
 Board Certified Specialty: No
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1104129485
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304141
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1104129485
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304135
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304130
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304134
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

AGYEMANG, ALBERTA
 Provider ID: 265131
 Board Certified Specialty: No
 📍 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: Y

Min/Max Age: 0\999
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8:00AM-5:00PM
 🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

AGYEMANG, ALBERTA
 Provider ID: 265130
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8:00AM-5:00PM
 🌐 Website: N/A



CERTIFIED NURSE PRACTITIONER

BOUTELLE, AMY

Provider ID: 243485
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8:00AM-5:00PM
 🌐 Website: N/A


CERTIFIED NURSE PRACTITIONER


BRADY, KATELYN
 Provider ID: 209017
 Board Certified Specialty: No
 📍 9300 CAMPUS POINT DR LA JOLLA, CA 92037
 ☎ Phone: (800) 926-8273
 📞 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1952797540
 🗒 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

BUENROSTRO, CHRISTINA


Provider ID: 243717
Board Certified Specialty: No
 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
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM



 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

CAPOZZI, JENNIFER

Provider ID: 241030
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**CERTIFIED NURSE
PRACTITIONER**

CONNER, PAMELA

Provider ID: 299932
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999



American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER
 Website: N/A


**CERTIFIED NURSE
PRACTITIONER**

CONNER, PAMELA

Provider ID: 299931
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1770558967

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):


N
 Accessibility: CONTACT
PROVIDER


 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**





CONNOR, CAROLINE

Provider ID: 279834
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

CERTIFIED NURSE
PRACTITIONER

CZYPULL, MONICA
Provider ID: 284662
Board Certified Specialty: No
 **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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

CERTIFIED NURSE
PRACTITIONER

DAVIES, SUMMER
Provider ID: 238922
Board Certified Specialty: No
 **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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

CERTIFIED NURSE
PRACTITIONER

DAVIES, SUMMER
Provider ID: 253691
Board Certified Specialty: No
 **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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

CERTIFIED NURSE
PRACTITIONER

DE DIOS, SARAH
Provider ID: 300052
Board Certified Specialty: No
 **9300 CAMPUS POINT DR**
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273
Provider Gender: Female
NPI: 1528632742
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER

DIMAIRA, FRANCESCA

Provider ID: 245580

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

DIMAIRA, FRANCESCA

Provider ID: 245579

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

DRISCOLL, KARRIE

Provider ID: 286376

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

GARTH, MELISSA

Provider ID: 268992

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

GARTH, MELISSA

Provider ID: 268991

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037





Phone: (800) 926-8273

Fax: (888) 539-8781




After Hours Phone: (800) 926-8273

Provider Gender: Female


NPI: 1689232977

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

GIOVANNETTI, ERIN
 Provider ID: 276002
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F





8:00AM-5:00PM
 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**
GOMEZ, LESLIE

Provider ID: 299464
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**
GOMEZ, LESLIE

Provider ID: 299465
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**
GOMEZ, LESLIE

Provider ID: 299469
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**
GOMEZ, LESLIE

Provider ID: 299470
 Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528578713

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HANNA, LINDSAY

Provider ID: 284967

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HARKNESS, RUMIKO

Provider ID: 208840

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

IYER, VICTORIA

Provider ID: 265624

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

JONES, CHRISTA

Provider ID: 275564

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N




Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER


KORMANIK, PATRICIA


Provider ID: 282070
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

LANE, KIMBERLY


Provider ID: 301604
Board Certified Specialty: No
 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: Y
Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE



PRACTITIONER

LEE, HEE

Provider ID: 274644
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1497275705


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Korean

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MATTHESS, JANETTE


Provider ID: 287645
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MATTHESS, JANETTE

Provider ID: 287644
Board Certified Specialty: No
 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273
 Fax: (888) 539-8781
 ☎ After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1457694549
 ☐ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8:00AM-5:00PM
 🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER
MICK, SHARON

Provider ID: 299651
 Board Certified Specialty: No
 📍 9300 CAMPUS POINT DR LA JOLLA, CA 92037
 ☎ Phone: (800) 926-8273
 Fax: (888) 539-8781
 ☎ After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1891061966
 ☐ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Y

Min/Max Age: 0\999
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER
MICK, SHARON

Provider ID: 299645
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
 🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER
MICK, SHARON

Provider ID: 299646
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🌐 Website: N/A


CERTIFIED NURSE PRACTITIONER
MICK, SHARON

Provider ID: 299650
 Board Certified Specialty: No
 📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MOHEBBI, ATHENA

Provider ID: 282231

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1952627176

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


MULVEY, CAOILFHIONN

Provider ID: 291420

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


NACOSTE, LAKEISHA


Provider ID: 272935

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


PAULSON, KERRY

Provider ID: 201269

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


RALEIGH, DEBORAH


Provider ID: 215016

Board Certified Specialty: No

 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
 N
 ♿ *Accessibility: CONTACT*
 PROVIDER
 ⌚ *Hours: M-F*
 8:00AM-5:00PM
 🌐 *Website: N/A*

CERTIFIED NURSE
PRACTITIONER

ROCHE, CHELSEA
Provider ID: 270706
Board Certified Specialty: No
 📍 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 ☎ *Phone: (800) 926-8273*
Fax: (888) 539-8781
 📞 *After Hours Phone: (800)*
 926-8273

Provider Gender: Female
NPI: 1063040384
 ☑ *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
 N
 ♿ *Accessibility: CONTACT*
 PROVIDER

⌚ *Hours: M-F*
 8:00AM-5:00PM
 🌐 *Website: N/A*

CERTIFIED NURSE
PRACTITIONER

ROSSI, CATHERINE
Provider ID: 291446
Board Certified Specialty: No
 📍 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
 N
 ♿ *Accessibility: CONTACT*
 PROVIDER
 🌐 *Website: N/A*

CERTIFIED NURSE
PRACTITIONER

SRILASAK, MICHELE
Provider ID: 281855
Board Certified Specialty: No
 📍 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
 N
 ♿ *Accessibility: CONTACT*
 PROVIDER
 ⌚ *Hours: M-F*
 8:00AM-5:00PM
 🌐 *Website: N/A*

CERTIFIED NURSE
PRACTITIONER

STEVENSON, REHEIA
Provider ID: 210795
Board Certified Specialty: No
 📍 9434 MEDICAL CENTER DR
 FL 1
 LA JOLLA, CA 92037
 ☎ *Phone: (800) 926-8273*
Fax: (888) 539-8781
 📞 *After Hours Phone: (800)*
 926-8273

Provider Gender: Female
NPI: 1346696044
 ☑ *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
 N
 ♿ *Accessibility: CONTACT*
 PROVIDER
 ⌚ *Hours: M-F*


8:00AM-5:00PM
 Website: N/A


**CERTIFIED NURSE
PRACTITIONER**


TOPPEN, LAURA

Provider ID: 215475

Board Certified Specialty: No


 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1326563495

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM


 Website: N/A


**CERTIFIED NURSE
PRACTITIONER**


TOPPEN, LAURA

Provider ID: 215476

Board Certified Specialty: No


 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1326563495

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


**CERTIFIED NURSE
PRACTITIONER**

TRUJILLO, DALE

Provider ID: 278428

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


**CERTIFIED NURSE
PRACTITIONER**

YEO, ALEXANDRIA

Provider ID: 299942

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


**CERTIFIED REGISTERED
NURSE ANESTHETIST**


ALFONSO, ALVIN

Provider ID: 256375

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): NPI: 1568980472

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE ANESTHETIST

AMADOR, LINDSAY

Provider ID: 291387

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1003556184

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED REGISTERED


NURSE ANESTHETIST


APPLEGET, JOSEPH

Provider ID: 239603

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE ANESTHETIST

BAYLIS, CHRISTOPHER

Provider ID: 240764

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1174893358

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Y


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE ANESTHETIST

BURROWS, TERENCE

Provider ID: 256695

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1023194560

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE ANESTHETIST

DOLLAND, STEVEN

Provider ID: 280553

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**CERTIFIED REGISTERED
NURSE ANESTHETIST**

FERRITER, STACY

Provider ID: 265296

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780725556

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**CERTIFIED REGISTERED
NURSE ANESTHETIST**

GARCIA, CALVIN

Provider ID: 217366

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1427419944


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**CERTIFIED REGISTERED
NURSE ANESTHETIST**

GONZALEZ, LISA

Provider ID: 299906

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083254205

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:


UNIVERSITY OF CALIFORNIA

IRVINE MED CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


**CERTIFIED REGISTERED
NURSE ANESTHETIST**

POLIKOWSKI, SAMANTHA

Provider ID: 291443

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1194134114

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: KAISER


FOUNDATION HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A



**CERTIFIED REGISTERED
NURSE ANESTHETIST**

RAMIREZ, NICOLE


Provider ID: 291403

Board Certified Specialty: No


 9300 CAMPUS POINT DR

LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

Provider Gender: Female
 NPI: 1487213500

 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

SACKS, BRENT

Provider ID: 278004
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

Provider Gender: 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N




 Accessibility: CONTACT

PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A


CERTIFIED REGISTERED

NURSE MIDWIFE

CHOI, NATHALIE

Provider ID: 301713
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

Provider Gender: Female
 NPI: 1073241618

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: PALOMAR

MEDICAL CENTER, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER



 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

GOODWIN, RACHEL


Provider ID: 210017
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER




 Hours: M-F
 8:00AM-5:00PM

 Website: N/A


CERTIFIED REGISTERED

NURSE MIDWIFE

GREAR MANN, MELISSA



Provider ID: 210051
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A


**CERTIFIED REGISTERED
NURSE MIDWIFE**
GUNTHER, HOPE

Provider ID: 210040
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU
8:00AM-5:00PM
W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM



 Website: N/A

**CERTIFIED REGISTERED
NURSE MIDWIFE**
HIRSCH, JENNIFER

Provider ID: 210056
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 657-8745
 After Hours Phone: (858)
657-8745


Provider Gender: Female

NPI: 1891752069

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Hours: M-F
8:00AM-5:00PM

 Website: N/A

**CERTIFIED REGISTERED
NURSE MIDWIFE**
HIRSCH, JENNIFER


Provider ID: 210057
Board Certified Specialty: No
 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
 Phone: (858) 657-8745
 After Hours Phone: (858)
657-8745

Provider Gender: Female
NPI: 1891752069

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU
8:00AM-5:00PM
W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM


 Website: N/A

**CERTIFIED REGISTERED
NURSE MIDWIFE**
NATHAN, CARLY

Provider ID: 301046
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1235670977

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


 Website: N/A

**CERTIFIED REGISTERED
NURSE MIDWIFE**
PERDION, KAREN

Provider ID: 210136
Board Certified Specialty: No
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273




Provider Gender: Female
NPI: 1518916857

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED REGISTERED NURSE MIDWIFE



PERDION, KAREN



Provider ID: 210135
 Board Certified Specialty: No
 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: 1518916857

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A

EMERGENCY MEDICINE

AMANN, CHRISTOPHER




Provider ID: 270914
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (858) 657-7000




Fax: (888) 539-8781
 After Hours Phone: (858)
 657-7000
 Provider Gender: Male
 NPI: 1134326895
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON, USC
 KENNETH NORRIS JR CANCER
 HOSPITAL, KECK HOSPITAL OF
 USC, USC VERDUGO HILLS
 HOSPITAL

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE








AUSTIN, ANDREA

Provider ID: 269292
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

BAGBY, JESSICA

Provider ID: 271138
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1093161473
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

BAGBY, JESSICA

Provider ID: 271135

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

BARRY, JEFFREY

Provider ID: 271131

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY

Provider ID: 270335

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 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: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

BLACK, NICHOLAS

Provider ID: 284415

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM

Website: N/A

EMERGENCY MEDICINE




CASTELLANO, TIFFANY

Provider ID: 271611

Board Certified Specialty: No


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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

CHEN, ALICE

Provider ID: 287427
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

CHEN, ALICE

Provider ID: 287429
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE






GALUST, HENRIK



Provider ID: 300053
 Board Certified Specialty: No
 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
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

EMERGENCY MEDICINE




GOODRICH, ANDREW



Provider ID: 271625
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

GUITTARD, JESSE


Provider ID: 239880
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

EMERGENCY MEDICINE

HERNANDEZ, CRISTINA

Provider ID: 242545
Board Certified Specialty: No
 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 N

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

HERNANDEZ, CRISTINA

Provider ID: 278988
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

HOGUE, BRENNIA

Provider ID: 301710
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1043705296


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

EMERGENCY MEDICINE

HOGUE, BRENNIA

Provider ID: 300006
Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A




EMERGENCY MEDICINE

HORNBEAK, KIRSTEN

Provider ID: 240023
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A





EMERGENCY MEDICINE




KRESHAK, ALLYSON

Provider ID: 257564
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE







KUTZ, CRAIG

Provider ID: 283846
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

KUTZ, CRAIG

Provider ID: 283844
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

LI, JINGHONG

Provider ID: 255937

Board Certified Specialty: No

 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: Y

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

LI, JINGHONG


Provider ID: 255938

Board Certified Specialty: No

 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: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

LIOTTA, BENJAMIN


Provider ID: 283150

Board Certified Specialty: No

 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: Y


Min/Max Age: 0\999

American Sign Language (ASL):
N

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-8:00PM

 Website: N/A


EMERGENCY MEDICINE


MCDANIEL, MICHELE

Provider ID: 246900

Board Certified Specialty: No

 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: Y


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

EMERGENCY MEDICINE

MUELLER, MATTHEW

Provider ID: 280658

Board Certified Specialty: No


 9300 CAMPUS POINT DR

LA JOLLA, CA 92037
 Phone: (800) 539-8781
 Fax: (888) 539-8781
 After Hours Phone: (800) 539-8781
 Provider Gender: Male
 NPI: 1003355629
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON, EL
 CENTRO REGIONAL MEDICAL
 CENTER
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

MUELLER, MATTHEW

Provider ID: 280660
 Board Certified Specialty: No
 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: 1003355629
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON, EL

CENTRO REGIONAL MEDICAL
 CENTER
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: SU 8:00AM-8:00PM
 M-F 8:00AM-5:00PM
 SA 8:00AM-8:00PM
 Website: N/A







EMERGENCY MEDICINE

NOSTE, ERIN

Provider ID: 239796
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A





EMERGENCY MEDICINE

PARK, JAY

Provider ID: 285609
 Board Certified Specialty: No
 8910 VILLA LA JOLLA DR
 STE 100
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1366478372
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

EMERGENCY MEDICINE

PARK, JAY

Provider ID: 285608
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1366478372
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA RUDOLF, FRANCES

JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

QUENZER, FAITH

Provider ID: 243284

Board Certified Specialty: No

8910 VILLA LA JOLLA DR STE 100

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1295112670

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UNIVERSITY HSP OF SAN DIEGO CO

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: SU 8:00AM-8:00PM M-F 8:00AM-5:00PM SA 8:00AM-8:00PM

Website: N/A

EMERGENCY MEDICINE

Provider ID: 240160

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

SABHA, MAHMOUD

Provider ID: 240450

Board Certified Specialty: No

8910 VILLA LA JOLLA DR STE 100

LA JOLLA, CA 92037

Phone: (858) 249-6800

After Hours Phone: (858) 249-6800

Provider Gender: Male

NPI: 1457747883

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: SU 8:00AM-8:00PM M-F 8:00AM-5:00PM SA 8:00AM-8:00PM

Website: N/A

EMERGENCY MEDICINE

SELTZER, JUSTIN

Provider ID: 283135

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

SMITH, CASEY

Provider ID: 300008

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

EMERGENCY MEDICINE

SUPAT, BENJAMIN

Provider ID: 299907

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

EMERGENCY MEDICINE

WINKLER, GARRET

Provider ID: 271416

Board Certified Specialty: No

8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037
Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1336502095

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

YOU, ALAN

Provider ID: 269938

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

YOU, ALAN

Provider ID: 269937

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

YU, ELAINE

Provider ID: 301707

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1528564150

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

EMERGENCY MEDICINE


YU, ELAINE

Provider ID: 299985

Board Certified Specialty: No

 8910 VILLA LA JOLLA DR
STE A

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528564150


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

ENDOCRINOLOGY


METABOLISM DIABETES

BOEDER, SCHAFFER

Provider ID: 255612

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1477808285

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY


METABOLISM DIABETES

GUERIN, CHRIS

Provider ID: 284645

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1275648875

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, UCSD MEDICAL


CTR, UCSD LA JOLLA JOHN
SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY


METABOLISM DIABETES

JUANG, PATRICIA

Provider ID: 255606

Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ENDOCRINOLOGY
METABOLISM DIABETES
KULASA, KRISTEN

Provider ID: 255623
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A



ENDOCRINOLOGY
METABOLISM DIABETES
NAGELBERG, JODI

Provider ID: 287778








Board Certified Specialty: No
 8939 VILLA LA JOLLA DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1720474141
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ENDOCRINOLOGY
METABOLISM DIABETES
PETTUS, JEREMY

Provider ID: 303286
 Board Certified Specialty: No
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1225234982
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N





 Accessibility: CONTACT PROVIDER
 Website: N/A

ENDOCRINOLOGY
METABOLISM DIABETES
SANTOS CAVAIOLA, TRICIA

Provider ID: 256092
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

FAMILY PRACTICE
CHEN, ALICE

Provider ID: 207165
 Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

FAMILY PRACTICE
JOLICOEUR, MEGAN





Provider ID: 300056
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1114366192
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*



GASTROENTEROLOGY
ANAND, GOBIND

Provider ID: 272836
Board Certified Specialty: No








 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

GASTROENTEROLOGY
DAVE, SHRAVAN

Provider ID: 270449
Board Certified Specialty: No
 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: Y
Min/Max Age: 18\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*

PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

GASTROENTEROLOGY
DAVE, SHRAVAN

Provider ID: 270448
Board Certified Specialty: No
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 925-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 925-8273*
Provider Gender: Male
NPI: 1588081814
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 18\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*







GASTROENTEROLOGY
DILAURO, STEVEN


Provider ID: 269298
Board Certified Specialty: No
 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
 *Phone: (858) 373-0211*
Fax: (760) 635-5972
 *After Hours Phone: (858) 373-0211*
Provider Gender: Male
NPI: 1629117643

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

GASTROENTEROLOGY








FEJLEH, MOHAMMAD

Provider ID: 271042
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

GASTROENTEROLOGY




FEJLEH, MOHAMMAD

Provider ID: 271043
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

GASTROENTEROLOGY


HASAN, AWS

Provider ID: 299953
 Board Certified Specialty: No
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1780047597

 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A




GASTROENTEROLOGY

HASAN, AWS


Provider ID: 299952
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1780047597
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A




GASTROENTEROLOGY

HOLMER, ARIELA

Provider ID: 273216
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273


Provider Gender: Female
NPI: 1083032544

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 18\999
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A



GASTROENTEROLOGY

SHAH, SHAILJA

Provider ID: 283898
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1073803243


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Y
Min/Max Age: 18\999
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

GASTROENTEROLOGY




SHAH, SHAILJA

Provider ID: 283897
Board Certified Specialty: No
 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: Y
Min/Max Age: 18\999
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

GASTROENTEROLOGY




TSAI, MATTHEW

Provider ID: 252369
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




GASTROENTEROLOGY

TSAI, MATTHEW

Provider ID: 252368
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

GASTROENTEROLOGY

YOUSSEF, FADY

Provider ID: 300025

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

GASTROENTEROLOGY

YOUSSEF, FADY

Provider ID: 300023

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265887723

🗣 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

HEMATOLOGY / ONCOLOGY

ASIMAKOPOULOS, FOTIOS

Provider ID: 246594

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

HEMATOLOGY / ONCOLOGY

CHEN, YU-WEI

Provider ID: 303058

Board Certified Specialty: No

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1245694801

🗣 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

HEMATOLOGY / ONCOLOGY

CHEN, YU-WEI

Provider ID: 303057

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1245694801

🗣 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

HEMATOLOGY / ONCOLOGY

HAMDAN, AYAD

Provider ID: 241429

Board Certified Specialty: No

📍 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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*








HEMATOLOGY / ONCOLOGY

HEYMAN, BENJAMIN

Provider ID: 202663
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*





HEMATOLOGY / ONCOLOGY

HEYMAN, BENJAMIN

Provider ID: 202662
Board Certified Specialty: No
 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982995809
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: SU-SA 8:00AM-5:00PM*
 *Website: N/A*

HEMATOLOGY / ONCOLOGY








HEYMAN, BENJAMIN

Provider ID: 202664
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

HEMATOLOGY / ONCOLOGY

PARK, SOO

Provider ID: 257202
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

HEMATOLOGY / ONCOLOGY

RICHARDSON, ANGELIQUE

Provider ID: 215010
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

HEMATOLOGY / ONCOLOGY

STEWART, TYLER

Provider ID: 243920
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

HEMATOLOGY / ONCOLOGY

VU, PETER

Provider ID: 272717
 Board Certified Specialty: No
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1861810830
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

HOSPICE AND PALLIATIVE

MEDICINE

RUBENZIK, TAMARA

Provider ID: 245574
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

INFECTIOUS DISEASE

KUPPALLI, KRUTIKA

Provider ID: 301057
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Website: N/A

INFECTIOUS DISEASE

KUPPALLI, KRUTIKA




Provider ID: 301059
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

INFECTIOUS DISEASE

RAMIREZ SANCHEZ, CLAUDIA

Provider ID: 299947
 Board Certified Specialty: No


 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

INFECTIOUS DISEASE

TANG, MICHAEL




Provider ID: 300063
 Board Certified Specialty: No
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1982018545


 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Website: N/A


INTERNAL MEDICINE

BORDIN-WOSK, TALYA

Provider ID: 273984
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

BORDIN-WOSK, TALYA


Provider ID: 273985
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

CHENG, GEORGE





Provider ID: 247640
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

DJEKIC, KRISTINA






Provider ID: 286669
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1417343732

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

GELBERG, ANNA

Provider ID: 285639
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1104004258

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Russian
 Cultural Competency: N
 Hospital Affiliation: PALOMAR
 HEALTH, PALOMAR MEDICAL
 CENTER, HOAG MEMORIAL
 HOSPITAL PRESBYTERIAN,
 UCSD MEDICAL CTR, UCSD LA
 JOLLA JOHN SALLY
 THORNTON
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

HOGARTH, MICHAEL

Provider ID: 214385
 Board Certified Specialty: No
 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: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

IVANOV, MARGARET

Provider ID: 272876

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

JABBOUR, MOUSSA

Provider ID: 256658

Board Certified Specialty: No

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: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

KATZ, YISRAEL

Provider ID: 272937

Board Certified Specialty: No

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: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

KVIATKOVSKY, MILLA

Provider ID: 274002

Board Certified Specialty: No

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: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE


KVIATKOVSKY, MILLA

Provider ID: 274004

Board Certified Specialty: No

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: Y
 Min/Max Age: 18\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

LAGO HERNANDEZ, CARLOS
 Provider ID: 238623

Board Certified Specialty: No
 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: Y

Min/Max Age: 18\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

LAGO HERNANDEZ, CARLOS
 Provider ID: 238624




Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A


INTERNAL MEDICINE

LAM, MICHAEL
 Provider ID: 274409

Board Certified Specialty: No
 9300 CAMPUS POINT DR

LA JOLLA, CA 92037




 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1578974259

Provider English Spoken: Y
 Provider Language(s) Spoken: Mandarin

Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

MAJITHIA, AMIT
 Provider ID: 255881

Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

MARTINEZ, ARMANDO

Provider ID: 291422

Board Certified Specialty: No

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: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Website: N/A

INTERNAL MEDICINE

NOKES, BRANDON

Provider ID: 287581

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: 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: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

SEBASKY, MEGHAN

Provider ID: 273963

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (619) 471-9186

After Hours Phone: (619)
471-9186

Provider Gender: Female

NPI: 1538351408

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

SEBASKY, MEGHAN

Provider ID: 273964

Board Certified Specialty: No

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: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

SMITH, CHELSEY

Provider ID: 239921

Board Certified Specialty: No

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: Y
Min/Max Age: 18\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

INTERNAL MEDICINE





TAYLOR, DAVID




Provider ID: 274470
Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: 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: Y
Min/Max Age: 18\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

INTERNAL MEDICINE








WANG, ANGELA
Provider ID: 259536
Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1730133976
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Y
Min/Max Age: 18\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

INTERNAL MEDICINE

YADLAPATI, RENA
Provider ID: 238587
Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1548597784
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON
Medi-Cal Open Panel: Y
Min/Max Age: 18\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

INTERNAL MEDICINE

YADLAPATI, RENA
Provider ID: 238586
Board Certified Specialty: No
 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: Y
Min/Max Age: 18\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

INTERNAL MEDICINE

YANG, JENNY
Provider ID: 283025
Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 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: Y
Min/Max Age: 18\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE

ZHANG, SHERRY

Provider ID: 272658
Board Certified Specialty: No
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: Y
Min/Max Age: 18\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**MATERNAL AND FETAL
MEDICINE**

BALLAS, JERASIMOS

Provider ID: 209561
Board Certified Specialty: No
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: Y
Min/Max Age: 16\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**MATERNAL AND FETAL
MEDICINE**

EMERUWA, UKACHI

Provider ID: 300009
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1245627421
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A

**MATERNAL AND FETAL
MEDICINE**

HULL, ANDREW

Provider ID: 209482
Board Certified Specialty: No
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: Y

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE


LAURENT, LOUISE

Provider ID: 208639

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE


MELBER, DORA

Provider ID: 240599

Board Certified Specialty: No


 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: Y

Min/Max Age: 16\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE


MOORE, THOMAS

Provider ID: 208642

Board Certified Specialty: No

 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: Y

Min/Max Age: 16\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE


WOELKERS, DOUGLAS

Provider ID: 209383

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1013965748




 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N




Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, PALOMAR
MEDICAL CENTER, UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, UCSD MEDICAL CTR
Medi-Cal Open Panel: Y
Min/Max Age: 16\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

**MATERNAL AND FETAL
MEDICINE**

WOLF, RICHARD

Provider ID: 209252
Board Certified Specialty: No
 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: Y
Min/Max Age: 16\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




**NEONATAL / PERINATAL
MEDICINE**

BAI-TONG, SHIYU

Provider ID: 283287
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




**NEONATAL / PERINATAL
MEDICINE**

DEL ROSARIO, PAMELA

Provider ID: 295001
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

**NEONATAL / PERINATAL
MEDICINE**

HIETALATI, SAMANTHA

Provider ID: 294252
Board Certified Specialty: No
 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**NEONATAL / PERINATAL
MEDICINE**

MARC AURELE, KRISHELLE


Provider ID: 206207

Board Certified Specialty: No

 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: Y


Min/Max Age: 0\19

American Sign Language (ASL): **MEDICINE**

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**NEONATAL / PERINATAL
MEDICINE**

MARC AURELE, KRISHELLE


Provider ID: 206209

Board Certified Specialty: No

 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: Y


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEONATAL / PERINATAL


MATOBA, NANA

Provider ID: 297977

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


**NEONATAL / PERINATAL
MEDICINE**

MATOBA, NANA

Provider ID: 299893

Board Certified Specialty: No

 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: Y
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*




NEONATAL / PERINATAL MEDICINE





MESTAN, KAREN
Provider ID: 285931
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*




8:00AM-5:00PM
 *Website: N/A*

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE
Provider ID: 301824
Board Certified Specialty: No
 9888 GENESEE AVE
 LA JOLLA, CA 92037
 *Phone: (858) 626-4123*
Fax: (760) 633-7998
 *After Hours Phone: (858) 626-4123*
Provider Gender: Female
NPI: 1003260951




 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

NEONATAL / PERINATAL MEDICINE





RAMOS, CARLOS
Provider ID: 206062
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*


NEONATAL / PERINATAL MEDICINE


SAJTI, ENIKO
Provider ID: 206170
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

**NEONATAL / PERINATAL
MEDICINE**


SAUER, CHARLES

Provider ID: 303908

Board Certified Specialty: No

 9300 CAMPUS POINT DR
FL 8

LA JOLLA, CA 92037

 Phone: (858) 249-5800

Fax: (858) 249-5839

 After Hours Phone: (858)
249-5800

Provider Gender: Male

NPI: 1538388988

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL

Medi-Cal Open Panel: Y
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


**NEONATAL / PERINATAL
MEDICINE**

SAUER, CHARLES


Provider ID: 303907

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY

BEVINS, ELIZABETH

Provider ID: 277726

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1013395151

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY

COUGHLIN, DAVID

Provider ID: 240950

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1740543784

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

IRAGUIMADOZ, VICENTE

Provider ID: 246701

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

LEE, DAVID

Provider ID: 246264

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

LEGER, GABRIEL

Provider ID: 247609

Board Certified Specialty: No

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1720367899

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

QAYOUMI, WALI

Provider ID: 284369

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999



American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

NEUROLOGY



QAYOUMI, WALI

Provider ID: 284371
Board Certified Specialty: No

 9350 CAMPUS POINT DR
 STE LLB
 LA JOLLA, CA 92037
 *Phone: (619) 284-3746*
Fax: (888) 579-8781




 *After Hours Phone: (619) 284-3746*

Provider Gender: Male
NPI: 1093178220

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: French*

Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*


NEUROLOGY

SCHULTE, JESSICA




Provider ID: 284819
Board Certified Specialty: No

 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: Y
Min/Max Age: 0\999




American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*


OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA




Provider ID: 273225
Board Certified Specialty: No

 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: Y
Min/Max Age: 16\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

OBSTETRICS / GYNECOLOGY


BONDRE, IOANA

Provider ID: 284310
Board Certified Specialty: No




 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1326579863

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Y
Min/Max Age: 16\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

OBSTETRICS / GYNECOLOGY

BONDRE, IOANA

Provider ID: 284311

Board Certified Specialty: No

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1326579863

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291323

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1790128759

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291324

Board Certified Specialty: No

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: Y

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291335

Board Certified Specialty: No

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: Y

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291334

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1730507567

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

GUPTA, PRATIMA

Provider ID: 257546

Board Certified Specialty: No

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1891749842
Provider English Spoken: Y
Provider Language(s)
Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Y
Min/Max Age: 16\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT

Provider ID: 278916
Board Certified Specialty: No
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: Y
Min/Max Age: 16\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT

Provider ID: 278918
Board Certified Specialty: No
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: Y
Min/Max Age: 16\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY

HOANG, MAI

Provider ID: 208295

Board Certified Specialty: No
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: Y
Min/Max Age: 16\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY

HOM-TEDLA, MARIANNE


Provider ID: 242752
Board Certified Specialty: No
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: Y
Min/Max Age: 16\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY


KLEIN, DAVID

Provider ID: 271558

Board Certified Specialty: No


 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: Y

Min/Max Age: 16\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


KLEIN, DAVID


Provider ID: 271559

Board Certified Specialty: No

 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: Y

Min/Max Age: 16\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


LAMALE-SMITH, LEAH

Provider ID: 286230

Board Certified Specialty: No

 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1396904876

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EISENHOWER MEDICAL CTR


Medi-Cal Open Panel: Y

Min/Max Age: 16\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


MACKAY, GILLIAN


Provider ID: 200964

Board Certified Specialty: No

 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: Y

Min/Max Age: 16\999

American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN

Provider ID: 303062
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1770702177


 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Website: N/A




OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA

Provider ID: 285739
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A




OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA

Provider ID: 285740
 Board Certified Specialty: No
 8910 VILLA LA JOLLA DR
 STE 200
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1467585521

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY





MELLENDEZ, ARIANA


Provider ID: 299920
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1295232973

 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A




OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299976
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1447530696
 Provider English Spoken: Y
 Cultural Competency: N





Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OBSTETRICS / GYNECOLOGY
PICKETT, CHARLOTTE






Provider ID: 299977
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A



OBSTETRICS / GYNECOLOGY
PINSON, KELSEY

Provider ID: 284285
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1841722485








 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON,
 UNIVERSITY HSP OF SAN
 DIEGO CO
 Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY
RIVAS, RENEE

Provider ID: 284295
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1295263861
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY
RIVAS, RENEE



Provider ID: 284296
 Board Certified Specialty: No
 9333 GENESEE AVE STE
 340
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1295263861
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A



OBSTETRICS / GYNECOLOGY
RIVAS, RENEE

Provider ID: 284297
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A



OBSTETRICS / GYNECOLOGY

SUYAMA, JULIE
 Provider ID: 284289
 Board Certified Specialty: No
 9300 CAMPUS POINT DR LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 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: Y
 Min/Max Age: 16\999

American Sign Language (ASL):  N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA
 Provider ID: 285173
 Board Certified Specialty: No
 9300 CAMPUS POINT DR LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 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: Y
 Min/Max Age: 16\999

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A





OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA
 Provider ID: 285175
 Board Certified Specialty: No

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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

OCCUPATIONAL THERAPIST

AMARAL, MARGARET
 Provider ID: 258303
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N
 After Hours Phone: (858) 657-6879

Accessibility: CONTACT PROVIDER

Hours: M-F
 8:00AM-5:00PM

Website: N/A

OCCUPATIONAL THERAPIST
COLLINS, RESENIA

Provider ID: 258356

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
 8:00AM-5:00PM

Website: N/A

OCCUPATIONAL THERAPIST
HARRIS, LISA

Provider ID: 258362

Board Certified Specialty: No

9350 CAMPUS POINT DR
 STE LLD
 LA JOLLA, CA 92037

Phone: (858) 657-6879

Fax: (858) 657-6873

Provider Gender: Female

NPI: 1336445063

Provider English Spoken: Y
 Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
 8:00AM-5:00PM

Website: N/A

OCCUPATIONAL THERAPIST
MUNCADA, CAESAR

Provider ID: 288724

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
 8:00AM-5:00PM

Website: N/A

OCCUPATIONAL THERAPIST
SMITH, EMILY

Provider ID: 258537

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
 8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY
BAXTER, SALLY

Provider ID: 272787

Board Certified Specialty: No

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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N




 Accessibility: CONTACT PROVIDER
 Hours: M-F
 7:00AM-5:00PM
 SA 7:45AM-2:00PM
 Website: N/A

OPHTHALMOLOGY

BEAZER, ALEX




Provider ID: 272802
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A




OPHTHALMOLOGY

CHIU, STEPHAN

Provider ID: 297586
 Board Certified Specialty: No
 9850 GENESEE AVE STE
 310
 LA JOLLA, CA 92037
 Phone: (858) 457-3010
 Fax: (858) 457-0028
 After Hours Phone: (858)
 457-3010
 Provider Gender: Male
 NPI: 1053846956

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Mandarin, Spanish
 Cultural Competency: N
 Hospital Affiliation: RONALD
 REAGAN UCLA MED CTR,
 SANTA MONICA UCLA MED
 CTR, SCRIPPS MEMORIAL
 HOSPITAL

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A



OPHTHALMOLOGY

JIN, MAN

Provider ID: 299956
 Board Certified Specialty: No
 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: 1073010120


 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N



 Accessibility: CONTACT PROVIDER
 Website: N/A

OPHTHALMOLOGY

JIN, MAN

Provider ID: 299954
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1073010120


 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Website: N/A

OPHTHALMOLOGY


MOVAGHAR, MANSOOR



Provider ID: 215055
 Board Certified Specialty: No
 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
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY







PUIG LLANO, MANUEL

Provider ID: 299965
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A





OPHTHALMOLOGY

RAHMATNEJAD, KAMRAN

Provider ID: 300041
 Board Certified Specialty: No
 9415 CAMPUS POINT DR LA JOLLA, CA 92093
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1699268292
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OPHTHALMOLOGY

RAHMATNEJAD, KAMRAN




Provider ID: 300039
 Board Certified Specialty: No
 9300 CAMPUS POINT DR LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1699268292
 Provider English Spoken: Y

Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OPHTHALMOLOGY



SCHONBACH, ETIENNE

Provider ID: 284432
 Board Certified Specialty: No
 9415 CAMPUS POINT DR LA JOLLA, CA 92093
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1073040580
 Provider English Spoken: Y
 Provider Language(s) Spoken: German
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 299937
 Board Certified Specialty: No
 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: 1932605649

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 299935

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1932605649

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OPHTHALMOLOGY

SONG, DELU

Provider ID: 284425

Board Certified Specialty: No

📍 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, UCSD MEDICAL

CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OPTOMETRIST

AOTO, KIM

Provider ID: 296798

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 9:00AM-5:00PM
TU 8:30AM-4:30PM

W 7:30AM-4:15PM

TH 9:30AM-5:00PM

F 8:30AM-4:00PM

🌐 Website: N/A

OPTOMETRIST

HOO, PAMELA

Provider ID: 269621

Board Certified Specialty: No

📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (858) 534-6290

Fax: (858) 822-4438

☎ After Hours Phone: (858) 534-6290

Provider Gender: Female

NPI: 1275566010

☑ Provider English Spoken: Y
☑ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999







American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A




OPTOMETRIST



JOMOC, CAITLIN

Provider ID: 299914
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OPTOMETRIST



JOMOC, CAITLIN

Provider ID: 299915
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OPTOMETRIST

KIM, PHILIP

Provider ID: 287909
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPTOMETRIST






MCCLEAN, ESMERALDA

Provider ID: 269907
Board Certified Specialty: No
 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (858) 534-6290
Fax: (858) 534-8293
 After Hours Phone: (858)
534-6290
Provider Gender: Female
NPI: 1962817981

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A








OPTOMETRIST

VO, ANDREW

Provider ID: 304148
Board Certified Specialty: No
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1790291565
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OPTOMETRIST

VO, ANDREW

Provider ID: 201311
 Board Certified Specialty: No
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093
 Phone: (858) 534-6290
 After Hours Phone: (858)
 534-6290
 Provider Gender: Male
 NPI: 1790291565
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OPTOMETRIST





YU, CAROL



Provider ID: 301681
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1639697451
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT

PROVIDER
 Website: N/A

OPTOMETRIST





YU, CAROL



Provider ID: 258078
 Board Certified Specialty: No
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1639697451
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OPTOMETRIST





YU, CAROL



Provider ID: 301682
 Board Certified Specialty: No
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1639697451
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y

Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

OTOLARYNGOLOGY

BRUMUND, KEVIN

Provider ID: 299633
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Website: N/A

OTOLARYNGOLOGY

BRUMUND, KEVIN

Provider ID: 299637
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)

926-8273
 Provider Gender: 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

OTOLARYNGOLOGY

BRUMUND, KEVIN

Provider ID: 299636
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F

8:00AM-5:00PM
 Website: N/A
OTOLARYNGOLOGY
CALIFANO, JOSEPH
 Provider ID: 299463
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1881652972

Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299459
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299460
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

OTOLARYNGOLOGY



CALIFANO, JOSEPH

Provider ID: 299458
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A


OTOLARYNGOLOGY

COFFEY, CHARLES

Provider ID: 299581
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OTOLARYNGOLOGY

COFFEY, CHARLES

Provider ID: 299580
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OTOLARYNGOLOGY

COFFEY, CHARLES

Provider ID: 299585
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male
 NPI: 1932297330

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, SCRIPPS
 GREEN HOSPITAL

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999


American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER


 Website: N/A

OTOLARYNGOLOGY


COFFEY, CHARLES

Provider ID: 299584
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

DECONDE, ADAM



Provider ID: 299570
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037

 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273








Provider Gender: Male
 NPI: 1588988919

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: UCSD
 MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A


OTOLARYNGOLOGY







DECONDE, ADAM

Provider ID: 299565
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY






DECONDE, ADAM

Provider ID: 299564
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY







DECONDE, ADAM

Provider ID: 299566
 Board Certified Specialty: Yes
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

 Website: N/A

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299528
 Board Certified Specialty: No
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1982708558
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: PIH
 HEALTH GOOD SAMARITAN
 HOSPITAL, CHILDRENS HOSP
 OF LOS ANGELES, SOUTH
 COAST GLOBAL MEDICAL
 CENTER INC, ANAHEIM
 GLOBAL MEDICAL CENTER,
 ORANGE COUNTY GLOBAL
 MEDICAL CENTER INC,
 CHAPMAN GLOBAL MEDICAL
 CENTER INC, UCSD LA JOLLA
 JOHN SALLY THORNTON,
 UCSD LA JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299529

Board Certified Specialty: No

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982708558

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN
HOSPITAL, CHILDRENS HOSP
OF LOS ANGELES, SOUTH
COAST GLOBAL MEDICAL
CENTER INC, ANAHEIM
GLOBAL MEDICAL CENTER,
ORANGE COUNTY GLOBAL
MEDICAL CENTER INC,
CHAPMAN GLOBAL MEDICAL
CENTER INC, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299534

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982708558

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN
HOSPITAL, CHILDRENS HOSP
OF LOS ANGELES, SOUTH
COAST GLOBAL MEDICAL
CENTER INC, ANAHEIM
GLOBAL MEDICAL CENTER,
ORANGE COUNTY GLOBAL
MEDICAL CENTER INC,
CHAPMAN GLOBAL MEDICAL
CENTER INC, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299533

Board Certified Specialty: No

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
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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299557

Board Certified Specialty: Yes

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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299562
Board Certified Specialty: No
 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1003825571
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299558
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299563
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1003825571
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

GREENE, JACQUELINE

Provider ID: 298394
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

GREENE, JACQUELINE

Provider ID: 298398
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OTOLARYNGOLOGY

GREENE, JACQUELINE

Provider ID: 298395
Board Certified Specialty: No
📍 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OTOLARYNGOLOGY

GREENE, JACQUELINE

Provider ID: 272958
Board Certified Specialty: No
📍 9300 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1144583931

☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OTOLARYNGOLOGY

HARRIS, JEFFREY

Provider ID: 299577
Board Certified Specialty: No
📍 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OTOLARYNGOLOGY

HARRIS, JEFFREY

Provider ID: 299578
Board Certified Specialty: No
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1417988783
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OTOLARYNGOLOGY



HARRIS, JEFFREY

Provider ID: 299574
Board Certified Specialty: No
📍 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY

HARRIS, JEFFREY

Provider ID: 299573
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY





HOM, DAVID



Provider ID: 299512
 Board Certified Specialty: No
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093
 Phone: (800) 926-8273

Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1659305027
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY







HOM, DAVID

Provider ID: 299517
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Website: N/A




OTOLARYNGOLOGY

HOM, DAVID


Provider ID: 299513
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299516
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

HUSSEMAN, JACOB

Provider ID: 301051

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY


KARI, ELINA

Provider ID: 299442

Board Certified Specialty: No

 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: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY

KARI, ELINA


Provider ID: 299444

Board Certified Specialty: No

 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: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


OTOLARYNGOLOGY

KARI, ELINA


Provider ID: 299448

Board Certified Specialty: No


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A




OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299447
Board Certified Specialty: No
 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1780860536
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY



Provider ID: 299484
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1891858379


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299483
Board Certified Specialty: No
 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273




Provider Gender: Male
NPI: 1891858379

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY


Provider ID: 299478
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299479
Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY
MATSUOKA, AKIHIRO



Provider ID: 299589
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY
MATSUOKA, AKIHIRO





Provider ID: 299588
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY
MATSUOKA, AKIHIRO






Provider ID: 299593
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY
MATSUOKA, AKIHIRO

Provider ID: 299594
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1669630653
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A








OTOLARYNGOLOGY
NGUYEN, QUYEN

Provider ID: 299604
 Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A








OTOLARYNGOLOGY

NGUYEN, QUYEN

Provider ID: 299609
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A






OTOLARYNGOLOGY

NGUYEN, QUYEN

Provider ID: 299605
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

NGUYEN, QUYEN






Provider ID: 299608
Board Certified Specialty: No
 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1477524452
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH,

ANDREW

Provider ID: 299504
Board Certified Specialty: No
 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
 Phone: (858) 822-6197
 After Hours Phone: (858)
822-6197
Provider Gender: Male
NPI: 1346506920
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED
CTR, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299510

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299506

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299505

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299643

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299644

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female
 NPI: 1346270816
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 GREEN HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299638
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY

WATSON, DEBORAH
 Provider ID: 299640
 Board Certified Specialty: Yes
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299616
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1366590853
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, SCRIPPS
 GREEN HOSPITAL
 Medi-Cal Open Panel: Y

Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299612
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY






WEISSBROD, PHILIP

Provider ID: 299611
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299613
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

 Website: N/A

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298415
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A






OTOLARYNGOLOGY

YAN, CAROL
 Provider ID: 298416
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298416
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298411
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 242138

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

**OTOLARYNGOLOGY /
OTOLOGY / LARYNGOLOGY /
RHINOLOGY**

KARI, ELINA

Provider ID: 294828

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

**PATHOLOGY ANATOMIC
CLINICAL**

AISAGBONHI, OMONIGHO

Provider ID: 275750

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

**PATHOLOGY ANATOMIC
CLINICAL**

AISAGBONHI, OMONIGHO

Provider ID: 201304

Board Certified Specialty: No

9300 CAMPUS POINT DR LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female
 NPI: 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 ⌚ Hours: M-F
 8:00AM-5:00PM
 🌐 Website: N/A

**PATHOLOGY ANATOMIC
 CLINICAL**

ALLEN, ELIZABETH
 Provider ID: 275757
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 ⌚ Hours: M-F
 8:00AM-5:00PM
 🌐 Website: N/A

**PATHOLOGY ANATOMIC
 CLINICAL**

BROOME, HELEN
 Provider ID: 275722
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 ⌚ Hours: M-F
 8:00AM-5:00PM
 🌐 Website: N/A

**PATHOLOGY ANATOMIC
 CLINICAL**

BUI, JACK
 Provider ID: 275746
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 ⌚ Hours: M-F
 8:00AM-5:00PM
 🌐 Website: N/A

**PATHOLOGY ANATOMIC
 CLINICAL**

DON, MICHELLE

Provider ID: 275816
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PATHOLOGY ANATOMIC CLINICAL

DON, MICHELLE

Provider ID: 247149
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (858) 249-4410
 After Hours Phone: (858) 249-4410
 Provider Gender: Female
 NPI: 1205288396
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PATHOLOGY ANATOMIC CLINICAL

ELKIND, JAE

Provider ID: 284903
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1922497700
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PATHOLOGY ANATOMIC CLINICAL

HU, JINGJING

Provider ID: 243965
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PATHOLOGY ANATOMIC CLINICAL

HU, JINGJING

Provider ID: 243966
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**PATHOLOGY ANATOMIC
CLINICAL**

ROMA, ANDRES

Provider ID: 275827
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**PATHOLOGY ANATOMIC
CLINICAL**

SHABAIK, AHMED

Provider ID: 275782
 Board Certified Specialty: No
 9444 MEDICAL CENTER DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1679521579

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic
 Cultural Competency: N

Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**PATHOLOGY ANATOMIC
CLINICAL**

VAVINSKAYA, VERA

Provider ID: 275840
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**PATHOLOGY ANATOMIC
CLINICAL**

ZARE, SOMAYE

Provider ID: 275814
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

ZARE, SOMAYE

Provider ID: 203172

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

ZHANG, HAIYAN

Provider ID: 203176

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

ZHANG, HAIYAN

Provider ID: 275841

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

AINSWORTH, DELISSA

Provider ID: 243366

Board Certified Specialty: No

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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

ALBRIGHT, KELSEY

Provider ID: 284764
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

ALLERS, JENNA

Provider ID: 301037
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female

NPI: 1730605486

Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SALINAS
 VALLEY MEMORIAL HOSP
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

PHYSICIANS ASSISTANT

ARMEEN, GARY

Provider ID: 247036
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

BOYD, LISA

Provider ID: 217650
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Hours: M-F

8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

BRUECKNER, TAMMIE


Provider ID: 255557
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N




 Accessibility: CONTACT
 PROVIDER


 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

CHERRY, REENA


Provider ID: 243349
 Board Certified Specialty: No
 3855 HEALTH SCIENCES
 DR
 LA JOLLA, CA 92093
 Phone: (800) 926-8273
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1689729683


 Provider English Spoken: Y

Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N




 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

CHERRY, REENA

Provider ID: 269494
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N


 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

COOKISH, DAVID

Provider ID: 286591
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273


Provider Gender: Male
 NPI: 1215338884

 Provider English Spoken: Y
 Cultural Competency: N

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

CRIFE, TAYLOR

Provider ID: 210983
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273

Provider Gender: Female
 NPI: 1659827087

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

DEMASCO, MICHAEL

Provider ID: 278969

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1467926295


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


DEMOOR, PATRICIA

Provider ID: 212879

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


DOUGHERTY, CLARA

Provider ID: 269170

Board Certified Specialty: No

 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: 1609987619

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL


MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


DOUGHERTY, CLARA

Provider ID: 295925

Board Certified Specialty: No

 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: 1609987619

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

HASEGAWA, CHRIS

Provider ID: 247205
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

HIGGINS, JOSHUA

Provider ID: 287135
 Board Certified Specialty: No
 8910 VILLA LA JOLLA DR
 STE 200
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1861624181
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

HIGGINS, JOSHUA

Provider ID: 287136
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298431
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

Provider ID: 298431
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298432
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1114459765
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 279334

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 287450

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298429

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

LIN, JOYCE

Provider ID: 265146

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

LIN, JOYCE

Provider ID: 265147

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N




Accessibility: CONTACT

PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT




LUONG, TRAN






Provider ID: 279014
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1821532292

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish,
 Vietnamese
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

LUONG, TRAN

Provider ID: 279015
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT







MARTIN, HALEY

Provider ID: 305027
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

PHYSICIANS ASSISTANT



MARTIN, HALEY

Provider ID: 305025
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

PHYSICIANS ASSISTANT

MARTIN, HALEY

Provider ID: 305024
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

PHYSICIANS ASSISTANT

MCADAMS, JOSEPH

Provider ID: 280612

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1104371251

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

MERRILL, COREY

Provider ID: 258039

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

OKADA, MICHELLE

Provider ID: 278016

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

OKADA, MICHELLE

Provider ID: 278017

Board Certified Specialty: No

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1497129860

Provider English Spoken: Y
Provider Language(s)
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

PELIO, DARREN

Provider ID: 293442

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

N

Accessibility: CONTACT
PROVIDER

 Website: N/A


PHYSICIANS ASSISTANT

PELIO, DARREN

Provider ID: 293440

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PHYSICIANS ASSISTANT


PERREAULT, MARK

Provider ID: 283583

Board Certified Specialty: No


 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: Y


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


PERREAULT, MARK

Provider ID: 283584

Board Certified Specialty: No


 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1356749451

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


ROBERTS, AUDREY

Provider ID: 253255

Board Certified Specialty: No


 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


ROBERTS, AUDREY

Provider ID: 253254

Board Certified Specialty: No

 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: Y


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

SAIKHON, TALIA

Provider ID: 293439

Board Certified Specialty: No

 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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

PHYSICIANS ASSISTANT

SANCHEZ, MICHAEL

Provider ID: 206907
Board Certified Specialty: No
📍 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: Y

Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
⌚ Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

SCHWARTZEL, KEVIN

Provider ID: 214276
Board Certified Specialty: No
📍 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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
⌚ Hours: SU 8:00AM-8:00PM
M-F 8:00AM-5:00PM
SA 8:00AM-8:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

SHAUL, SHERA

Provider ID: 247976
Board Certified Specialty: No
📍 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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
⌚ Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

SHAUL, SHERA

Provider ID: 247975
Board Certified Specialty: No
📍 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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
⌚ Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

SPEH, BRIAN

Provider ID: 305010

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

TESFAI, HELEN

Provider ID: 277072

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299597

Board Certified Specialty: No

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: 1083823322

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299596

Board Certified Specialty: No

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083823322

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299601

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299602

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083823322

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

PHYSICIANS ASSISTANT







WEIR, JACQUELINE

Provider ID: 278202
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST








BAILIS, JESSICA

Provider ID: 300043
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A








PSYCHOLOGIST

BOOTH, CHRISTOPHER

Provider ID: 209117
 Board Certified Specialty: No
 8950 VILLA LA JOLLA DR
 STE C101
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1568893162
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A


PSYCHOLOGIST

BOOTH, CHRISTOPHER

Provider ID: 209118
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST


BOUTELLE, KERRI

Provider ID: 302876
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PSYCHOLOGIST


BOUTELLE, KERRI


Provider ID: 240034

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST

BOUTELLE, KERRI

Provider ID: 258988

Board Certified Specialty: No

 8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037



Phone: (858) 246-1654



After Hours Phone: (858)
246-1654

Provider Gender: Male

NPI: 1780620906

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

CHESHER, NICHOLAS

Provider ID: 273812

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: 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: Y


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

CLAUDAT, KIMBERLY

Provider ID: 285237

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1699200949

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST

CRANDAL, BRENT

Provider ID: 291463

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PSYCHOLOGIST

DUARTE, KRISTEN

Provider ID: 255480

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

📞 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1093119364

🗪 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PSYCHOLOGIST

DUARTE, KRISTEN

Provider ID: 255479

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PSYCHOLOGIST

EICHEN, DAWN

Provider ID: 259524

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PSYCHOLOGIST

EICHEN, DAWN

Provider ID: 245715

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A


PSYCHOLOGIST

EICHEN, DAWN

Provider ID: 302888
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST

LASSWELL, EVE

Provider ID: 208260
Board Certified Specialty: No
 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037


 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1013483635

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

LINKE, SARAH

Provider ID: 273640
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PSYCHOLOGIST

MAGINOT-CHESHER, TAMARA


Provider ID: 273224
Board Certified Specialty: No

 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: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST



MENDEZ, ANDRES




Provider ID: 279058
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
 N
 *Accessibility: CONTACT*
 PROVIDER
 *Hours: M-F*
 8:00AM-5:00PM
 *Website: N/A*

PSYCHOLOGIST





REED, KRISTIE

Provider ID: 302867
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
 N
 *Accessibility: CONTACT*
 PROVIDER
 *Website: N/A*

PSYCHOLOGIST

REED, KRISTIE

Provider ID: 291395
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
 N
 *Accessibility: CONTACT*
 PROVIDER
 *Website: N/A*


PSYCHOLOGIST

TARLE, STEPHANIE

Provider ID: 303116
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
 N
 *Accessibility: CONTACT*
 PROVIDER
 *Website: N/A*





PSYCHOLOGIST

ZLATAR, ZVINKA

Provider ID: 272712
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
 N
 *Accessibility: CONTACT*
 PROVIDER
 *Hours: M-F*
 8:00AM-5:00PM
 *Website: N/A*

PULMONARY DISEASES

BAILEY, JACOB

Provider ID: 299925
Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
 926-8273
Provider Gender: Male
NPI: 1598150039
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Website: N/A

PULMONARY DISEASES

JOSHUA, JISHA

Provider ID: 238060

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PULMONARY DISEASES

MCGUIRE, WILLIAM

Provider ID: 299987

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Website: N/A

PULMONARY DISEASES

PEARCE, ALEX

Provider ID: 300054

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1265896856

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

BERMAN, ZACHARY

Provider ID: 269319

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1033521190

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

BRANCH, CODY

Provider ID: 283676

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037


Phone: (800) 926-8273

Fax: (888) 539-8781


After Hours Phone: (800) 926-8273


Provider Gender: 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: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

CARSWELL, AIMEE


Provider ID: 303056

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 283227

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427430511

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

FAZELI, SOUDABEH

Provider ID: 299993

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639553613

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

FORCIER, NANCY

Provider ID: 286955

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1497721724

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

Providence Mission Hospital

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC


FOWLER, KATHRYN

Provider ID: 201290

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)

926-8273
 Provider Gender: Female
 NPI: 1255457941
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

RADIOLOGY DIAGNOSTIC

HANNSUN, GEMMY
 Provider ID: 282790
 Board Certified Specialty: No
 9300 CAMPUS POINT DR LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

RADIOLOGY DIAGNOSTIC

HORKY, LAURA
 Provider ID: 241855
 Board Certified Specialty: No
 9400 CAMPUS POINT DR LA JOLLA, CA 92093
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1598967812

Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

RADIOLOGY DIAGNOSTIC

HORKY, LAURA
 Provider ID: 241854
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL
 Provider ID: 299959
 Board Certified Specialty: No
 9300 CAMPUS POINT DR LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1275700999
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: Los Angeles General Medical Center
 Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER

Provider ID: 271128

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: 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


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER

Provider ID: 283144

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699125450

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:


EISENHOWER MEDICAL CTR


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

MARKS, ROBERT

Provider ID: 300066

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952389934

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ST MARY
MEDICAL CENTER

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

RITCHIE, DAVID

Provider ID: 300033

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1407201916


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC


SADAT, SAYED

Provider ID: 299967

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Website: N/A




RADIOLOGY DIAGNOSTIC
SCHULTZ, HEATHER

Provider ID: 240343
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273

Provider Gender: Female
 NPI: 1871910810

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

RADIOLOGY DIAGNOSTIC
SEARLEMAN, ADAM

Provider ID: 299950
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781


 After Hours Phone: (800) 926-8273

Provider Gender: Male
 NPI: 1134570641

 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Website: N/A

RADIOLOGY DIAGNOSTIC
SLATER, JERRY

Provider ID: 283311
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781




 After Hours Phone: (800) 926-8273

Provider Gender: 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: Y
 Min/Max Age: 0\999


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

RADIOLOGY DIAGNOSTIC
SPENGLER, NATHAN

Provider ID: 303050
 Board Certified Specialty: No

 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037

 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male
 NPI: 1992919666

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 UNIVERSITY OF CALIFORNIA
 IRVINE MED CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC
TADDONIO, MICHAEL

Provider ID: 240406
 Board Certified Specialty: No

 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037

 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273

Provider Gender: Male
 NPI: 1386987261


 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

TADROS, ANTHONY

Provider ID: 268545

Board Certified Specialty: No


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

THOMPSON, COLE

Provider ID: 299990

Board Certified Specialty: No


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1700315264

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

UNSDORFER, KYLE

Provider ID: 300036

Board Certified Specialty: No


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285165183

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A



RADIOLOGY DIAGNOSTIC

VAHDOT, NOUSHIN

Provider ID: 300069

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
 After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1396700852


 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

YORK, VINCENT

Provider ID: 283518

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790146611


 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL THERAPIST


BERGERON, PATRICK

Provider ID: 258296

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


REGISTERED PHYSICAL THERAPIST


BERGERON, PATRICK

Provider ID: 206533

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL THERAPIST


BUNOSKY, ABIGAIL

Provider ID: 246021

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


REGISTERED PHYSICAL THERAPIST


CHIEN, PEI

Provider ID: 214699

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL THERAPIST


CHIEN, PEI

Provider ID: 258324

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


REGISTERED PHYSICAL THERAPIST

HOUSELY, ALEXIS

Provider ID: 299971

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


REGISTERED PHYSICAL THERAPIST

MAROLLA, ALICE

Provider ID: 241145

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL THERAPIST

NUTHALL, KAITLIN

Provider ID: 258431

Board Certified Specialty: No

 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: 1992210090

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, UCSD


LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


REGISTERED PHYSICAL THERAPIST


NUTHALL, KAITLIN

Provider ID: 202327

Board Certified Specialty: No


 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1992210090

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, UCSD


LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL THERAPIST

RUDD, CHRISTOPHER

Provider ID: 258372

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

RUDD, CHRISTOPHER

Provider ID: 207559

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

SKINNER, NICOLE

Provider ID: 206546

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

TRIMM, CASSIDY

Provider ID: 258442

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

TRIMM, CASSIDY

Provider ID: 258443

Board Certified Specialty: No

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: Y
Min/Max Age: 0\999
American Sign Language (ASL):*

*N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A*

**REGISTERED PHYSICAL
THERAPIST**

VASQUEZ, BENJAMIN

*Provider ID: 258480
Board Certified Specialty: No
9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037
Phone: (858) 657-6879
Fax: (858) 657-6873
After Hours Phone: (858)
657-6879
Provider Gender: Male
NPI: 1568938413*

*Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):*

*N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A*

**REGISTERED PHYSICAL
THERAPIST**

VASQUEZ, BENJAMIN

*Provider ID: 200968
Board Certified Specialty: No
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: Y
Min/Max Age: 0\999*

*American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A*

**REGISTERED PHYSICAL
THERAPIST**

WILLIAMS, STACY

*Provider ID: 258496
Board Certified Specialty: No
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: Y
Min/Max Age: 0\999
American Sign Language (ASL):*

*N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A*

**REGISTERED PHYSICAL
THERAPIST**

YU, AUDRINE

*Provider ID: 258481
Board Certified Specialty: No
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: Y
Min/Max Age: 0\999
American Sign Language (ASL):*

*N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A*

**SPEECH PATHOLOGIST
SCHIEDERMAYER, BENJAMIN**

Provider ID: 288938
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SPEECH PATHOLOGIST

SCHIEDERMAYER, BENJAMIN

Provider ID: 288939
 Board Certified Specialty: No
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1164979837
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SPEECH PATHOLOGIST

UNGER, LINDSEY

Provider ID: 265338
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY CARDIOVASCULAR

BOYS, JOSHUA


Provider ID: 243533
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (858) 657-7777
 After Hours Phone: (858)

657-7777
 Provider Gender: Male
 NPI: 1114368990
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY CARDIOVASCULAR








GRAMINS, DANIEL

Provider ID: 210047
 Board Certified Specialty: Yes
 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: 1164495750
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: TRI CITY MEDICAL CTR, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY CARDIOVASCULAR

POLLEMA, TRAVIS

Provider ID: 210576
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A


SURGERY COLON SURGERY

LIU, SHANGLEI

Provider ID: 273364
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781


 After Hours Phone: (800)
 926-8273


Provider Gender: Male
 NPI: 1043558653

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UNIVERSITY HSP
 OF SAN DIEGO CO

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N




 Accessibility: CONTACT
 PROVIDER


 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

SURGERY COLON SURGERY

LOPEZ, NICOLE

Provider ID: 286388
 Board Certified Specialty: No
 3855 HEALTH SCIENCES
 DR
 LA JOLLA, CA 92093
 Phone: (858) 822-6100
 After Hours Phone: (858)
 822-6100
 Provider Gender: Female
 NPI: 1518163005

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON



Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Website: N/A


SURGERY COLON SURGERY

PARRY, LISA

Provider ID: 278551
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N


 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

SURGERY COLON SURGERY

RAMAMOORTHY, SONIA

Provider ID: 286371
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL

AL-NOURI, OMAR

Provider ID: 211904
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL

AL-NOURI, OMAR

Provider ID: 211905
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL

ARMANI, AVA

Provider ID: 282142
 Board Certified Specialty: No
 3855 HEALTH SCIENCES
 DR
 LA JOLLA, CA 92093
 Phone: (858) 822-6100

After Hours Phone: (858)
 822-6100

Provider Gender: Female
 NPI: 1861759383

Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: MEDICAL
 CTR AT UCSF, UCSF Medical
 Center At Mission Bay, UCSF
 MEDICAL CENTER AT MOUNT
 ZION, UCSD LA JOLLA JOHN
 SALLY THORNTON, UCSD
 MEDICAL CTR

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Hours: M-F
 8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

CLARY, BRYAN

Provider ID: 202568
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY GENERAL

HORGAN, SANTIAGO

Provider ID: 286380

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (619) 471-0755
📞 After Hours Phone: (619) 471-0755

Provider Gender: Male

NPI: 1932297231

📄 Provider English Spoken: Y
📄 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY GENERAL

JACOBSEN, GARTH

Provider ID: 201728

Board Certified Specialty: No

📍 9350 CAMPUS POINT DR

LA JOLLA, CA 92037

☎ Phone: (619) 471-0755
📞 After Hours Phone: (619) 471-0755

Provider Gender: Male

NPI: 1265649966

📄 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY GENERAL

RASCHKE, ERIC

Provider ID: 270298

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1316386659

📄 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY GENERAL

SANTORELLI, JARRETT

Provider ID: 272304

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273

Provider Gender: 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY GENERAL

VASCULAR

BARLEBEN, ANDREW

Provider ID: 275373

Board Certified Specialty: No

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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL

VASCULAR

BARLEBEN, ANDREW

Provider ID: 275371
Board Certified Specialty: Yes
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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL

VASCULAR

GAFFEY, ANN

Provider ID: 287012
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1316232010
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

Provider ID: 275678
Board Certified Specialty: No
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

SURGERY GENERAL

VASCULAR

HOWE, STEVEN

Provider ID: 206760
Board Certified Specialty: No

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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A







SURGERY NEUROLOGICAL










BARBA, DAVID





Provider ID: 275678
Board Certified Specialty: No
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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY NEUROLOGICAL
BEAUMONT, THOMAS









Provider ID: 214126
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

 Website: N/A
SURGERY NEUROLOGICAL
BEN-HAIM, SHARONA
Provider ID: 244070
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY NEUROLOGICAL
BLASKIEWICZ, DONALD
Provider ID: 270282
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY NEUROLOGICAL
MARSHALL, LAWRENCE

Provider ID: 244149
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY NEUROLOGICAL

MURTHY, NIKHIL

Provider ID: 299994

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1710371273

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY NEUROLOGICAL

MURTHY, NIKHIL

Provider ID: 299995

Board Certified Specialty: No

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1710371273

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Website: N/A

SURGERY NEUROLOGICAL

OSORIO, JOSEPH

Provider ID: 242005

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY NEUROLOGICAL

OSORIO, JOSEPH

Provider ID: 242006

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY NEUROLOGICAL

PHAM, MARTIN

Provider ID: 244159

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY NEUROLOGICAL

U, HOI

Provider ID: 244133

Board Certified Specialty: Yes

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

ANDRY, JAMES

Provider ID: 302085

Board Certified Specialty: No

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037

Phone: (858) 824-1703

Fax: (858) 455-6473

After Hours Phone: (858)
824-1703

Provider Gender: Male

NPI: 1679726103

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SHARP CORONADO HOSP
AND HEALTHCARE CTR, Sharp

Grossmont Hospital, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY ORTHOPEDIC

BLAIS, MICAH

Provider ID: 299944

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1972867562

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY ORTHOPEDIC

BLAIS, MICAH

Provider ID: 299945

Board Certified Specialty: No

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1972867562

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY ORTHOPEDIC

BUKATA, SUSAN

Provider ID: 277947

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC


CHIARAPPA, FRANK

Provider ID: 244460

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC

CHOI, JIHOON

Provider ID: 284787

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


SURGERY ORTHOPEDIC

CHOI, JIHOON

Provider ID: 284786

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC


FLINT, JAMES

Provider ID: 203177

Board Certified Specialty: No


 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC

GOEB, YANNICK

Provider ID: 284793

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273
 Provider Gender: 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8:00AM-5:00PM
 🌐 Website: N/A

SURGERY ORTHOPEDIC

GOEB, YANNICK

Provider ID: 284792
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8:00AM-5:00PM
 🌐 Website: N/A

SURGERY ORTHOPEDIC

KUSNEZOV, NICHOLAS

Provider ID: 303194
 Board Certified Specialty: No
 📍 9834 GENESEE AVE STE 228 LA JOLLA, CA 92037
 ☎ Phone: (858) 824-1703
 Fax: (858) 455-6473
 ☎ After Hours Phone: (858) 824-1703
 Provider Gender: Male
 NPI: 1396185161
 ☑ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: TWIN CITIES COMMUNITY HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🌐 Website: N/A

☑ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: TWIN CITIES COMMUNITY HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
 🌐 Website: N/A

SURGERY ORTHOPEDIC

MCKNIGHT, BRADEN




Provider ID: 303714
 Board Certified Specialty: No
 📍 9834 GENESEE AVE STE 228 LA JOLLA, CA 92037
 ☎ Phone: (858) 824-1703
 Fax: (858) 455-6473

☎ After Hours Phone: (858) 824-1703
 Provider Gender: Male
 NPI: 1366983587
 ☑ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, PARADISE VALLEY HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8:00AM-5:00PM
 🌐 Website: N/A






SURGERY ORTHOPEDIC

PALLIA, CHRISTOPHER

Provider ID: 302103
 Board Certified Specialty: No
 📍 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
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY ORTHOPEDIC





SULLIVAN, THOMAS
 Provider ID: 285246
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A



SURGERY ORTHOPEDIC

SULLIVAN, THOMAS







Provider ID: 285245
 Board Certified Specialty: No
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1437565488
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY ORTHOPEDIC





TAYLOR, MARIO
 Provider ID: 299910
 Board Certified Specialty: No
 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: 1407380512
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A




SURGERY ORTHOPEDIC

TAYLOR, MARIO
 Provider ID: 299908
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1407380512
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A

SURGERY PLASTIC


HINCHCLIFF, KATHARINE
 Provider ID: 277289
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1346674561
 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N




 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY PLASTIC
REID, CHRISTOPHER




Provider ID: 224796
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY THORACIC
KEARNS, MARK


Provider ID: 274297
 Board Certified Specialty: No
 9434 MEDICAL CENTER DR
 FL 1
 LA JOLLA, CA 92037
 Phone: (858) 647-8817
 Fax: (858) 853-9878
 After Hours Phone: (858)
 647-8817

Provider Gender: Male
 NPI: 1033683719
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: CEDARS
 SINAI MEDICAL CENTER,
 UCSD LA JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY THORACIC
KEARNS, MARK




Provider ID: 274296
 Board Certified Specialty: No
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (858) 657-8817
 Fax: (888) 539-8781
 After Hours Phone: (858)
 657-8817


Provider Gender: Male
 NPI: 1033683719
 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: CEDARS
 SINAI MEDICAL CENTER,
 UCSD LA JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N



 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY THORACIC
RAMIREZ, ALFREDO

Provider ID: 256390
 Board Certified Specialty: No
 9434 MEDICAL CENTER DR
 FL 1
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
 926-8273

Provider Gender: Male
 NPI: 1003829417
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:

UNIVERSITY HSP OF SAN
 DIEGO CO, UCSD MEDICAL
 CTR, UCSD LA JOLLA JOHN
 SALLY THORNTON
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F

8:00AM-5:00PM
 Website: N/A

SURGERY THORACIC


ZANDER, ASHLEY

Provider ID: 291382

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A


SURGERY THORACIC

ZANDER, ASHLEY

Provider ID: 291383

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

 Accessibility: CONTACT PROVIDER

 Website: N/A


SURGERY THORACIC

ZANDER, ASHLEY

Provider ID: 291381

Board Certified Specialty: No

 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1780940031


 Provider English Spoken: Y
 Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A


UROLOGY

CRAWFORD, ELWARD

Provider ID: 244131

Board Certified Specialty: No

 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093

 Phone: (858) 657-7876

Fax: (888) 539-8781

 After Hours Phone: (858) 657-7876

Provider Gender: Male

NPI: 1902814379

 Provider English Spoken: Y
 Cultural Competency: N

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


UROLOGY


HSIEH, TUNG CHIN

Provider ID: 294878

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

UROLOGY

KATZ, JONATHAN

Provider ID: 299917

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

UROLOGY

WANG, LUKE

Provider ID: 299934

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CARDIOLOGY

YELLEN, LAURENCE

Provider ID: 269173

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CARDIOVASCULAR DISEASE

KOTHA, PURUSHOTHAM

Provider ID: 32053

Board Certified Specialty: Yes

8860 CENTER DR STE 400
LA MESA, CA 91942

Phone: (619) 229-1995
Fax: (619) 229-1109

After Hours Phone: (619)
229-1995

Provider Gender: Male

NPI: 1093730814

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish,
Telugu

Cultural Competency: N

Hospital Affiliation: ALVARADO
HOSPITAL LLC, GROSSMONT
HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

CARDIOVASCULAR DISEASE

REDDY, REDDIWANDLA

Provider ID: 265393

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999






American Sign Language (ASL):

LA MESA

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:30AM-5:00PM
 Website: N/A

CARDIOVASCULAR DISEASE

SHEREV, DIMITRI




Provider ID: 290704
 Board Certified Specialty: Yes
 8851 CENTER DR STE 304
 LA MESA, CA 91942
 Phone: (619) 867-0557
 Fax: (619) 867-0558
 After Hours Phone: (619)
 867-0557
 Provider Gender: Male
 NPI: 1154323996
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Bulgarian, Russian,
 Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL,
 GROSSMONT HOSPITAL,
 ALVARADO COMMUNITY
 HOSPITAL, SHARP MEMORIAL
 HOSPITAL, SCRIPPS
 MEMORIAL HOSPITAL,
 ALVARADO HOSPITAL LLC,
 SHARP CHULA VISTA MED
 CTR, SHARP CHULA VISTA
 MED CTR, TRI CITY MEDICAL
 CTR, SCRIPPS MERCY
 HOSPITAL CHULA VISTA, Sharp
 Grossmont Hospital
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:30AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

LANE, KIMBERLY


Provider ID: 295955
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

RESELLI, LYNDSEY

Provider ID: 217692
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

RESELLI, LYNDSEY

Provider ID: 217693
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

BELLOMO, THOMAS

Provider ID: 205600
 Board Certified Specialty: No
 5565 GROSSMONT
 CENTER DR STE 2 STE 2
 LA MESA, CA 91942
 Phone: (619) 713-5375
 Fax: (619) 713-5379
 After Hours Phone: (619)
 713-5375

Provider Gender: Male
 NPI: 1700926698
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, UCSF BENIOFF
 CHILDREN'S HOSPITAL
 OAKLAND

Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: SU 1:00PM-10:00PM
 M-F 4:00PM-10:00PM
 SA 1:00PM-10:00PM
 Website: N/A

EMERGENCY MEDICINE

LOVEJOY, AMY

Provider ID: 206106
 Board Certified Specialty: No
 5565 GROSSMONT
 CENTER DR STE 2 STE 2
 LA MESA, CA 91942
 Phone: (619) 713-5375
 Fax: (619) 713-5379
 After Hours Phone: (619)
 713-5375

Provider Gender: Female
 NPI: 1790856557
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, CHILDRENS HOSPITAL
 OF ORANGE COUNTY
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

QUINONES-PEREZ, BIANCA

Provider ID: 206948
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER
 Hours: SU 1:00PM-10:00PM
 M-F 4:00PM-10:00PM
 SA 1:00PM-10:00PM
 Website: N/A

**HEARING AID DEALER /
 SUPPLIER**

ANDERSON, ELAINE

Provider ID: 268693
 Board Certified Specialty: No
 5565 GROSSMONT
 CENTER DR
 LA MESA, CA 91942
 Phone: (619) 589-5414
 Fax: (619) 589-7391
 After Hours Phone: (619)
 589-5414

Provider Gender: Female
 NPI: 1063558856
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

HEMATOLOGY / ONCOLOGY

BATRA, REEMA

Provider ID: 58612
 Board Certified Specialty: No
 5555 GROSSMONT
 CENTER DR
 LA MESA, CA 91942
 Phone: (619) 644-3030

Fax: (619) 644-3638

☎ After Hours Phone: (619) 644-3030

Provider Gender: Female

NPI: 1629286505

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Hindi, Mandarin

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:30AM-5:00PM

🌐 Website: N/A

HEMATOLOGY / ONCOLOGY

BATRA, REEMA

Provider ID: 295692

Board Certified Specialty: No

📍 5555 GROSSMONT CENTER DR LA MESA, CA 91942

☎ Phone: (619) 644-3030

Fax: (619) 644-3638

☎ After Hours Phone: (619) 644-3030

Provider Gender: Female

NPI: 1629286505

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Hindi, Mandarin

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL): Board Certified Specialty: No N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:30AM-5:00PM

🌐 Website: N/A

HEMATOLOGY / ONCOLOGY

MEDIC, IGOR

Provider ID: 119509

Board Certified Specialty: No

📍 5555 GROSSMONT CENTER DR LA MESA, CA 91942

☎ Phone: (619) 644-3030

Fax: (619) 644-3638

☎ After Hours Phone: (619) 644-3030

Provider Gender: Male

NPI: 1154618593

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Arabic, Serbian, Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

Sharp Grossmont Hospital

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): Board Certified Specialty: No N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:30AM-5:00PM

🌐 Website: N/A

HEMATOLOGY / ONCOLOGY

MEDIC, IGOR

Provider ID: 295654

📍 5555 GROSSMONT CENTER DR LA MESA, CA 91942

☎ Phone: (619) 644-3030

Fax: (619) 644-3638

☎ After Hours Phone: (619) 644-3030

Provider Gender: Male

NPI: 1154618593

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Arabic, Serbian, Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

Sharp Grossmont Hospital

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:30AM-5:00PM

🌐 Website: N/A

HEMATOLOGY / ONCOLOGY

ZU, KAI

Provider ID: 295711

Board Certified Specialty: No

📍 5555 GROSSMONT CENTER DR LA MESA, CA 91942

☎ Phone: (619) 644-3030

Fax: (619) 644-3638

☎ After Hours Phone: (619) 644-3030

Provider Gender: Male

NPI: 1164583639

☑ Provider English Spoken: Y

☐ *Provider Language(s)*
Spoken: Chinese, Mandarin,
Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Medi-Cal Open Panel: Y
Min/Max Age: 18\999
American Sign Language (ASL):
N
♿ *Accessibility: CONTACT
PROVIDER*
🕒 *Hours: M-F
8:30AM-5:00PM*
🌐 *Website: N/A*

**HEMATOLOGY / ONCOLOGY
ZU, KAI**

Provider ID: 43199
Board Certified Specialty: No
📍 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
☎ *Phone: (619) 644-3030*
Fax: (619) 644-3638
🕒 *After Hours Phone: (619)
644-3030*
Provider Gender: Male
NPI: 1164583639
☐ *Provider English Spoken: Y*
☐ *Provider Language(s)*
Spoken: Chinese, Mandarin,
Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ *Accessibility: CONTACT
PROVIDER*

🕒 *Hours: M-F
8:30AM-5:00PM*
🌐 *Website: N/A*

**INTERVENTIONAL
CARDIOLOGY**

TAGHIZADEH, BEHZAD
Provider ID: 269161
Board Certified Specialty: No
📍 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ *Accessibility: CONTACT
PROVIDER*
🕒 *Hours: M-F
8:00AM-5:00PM*
🌐 *Website: N/A*

**MATERNAL AND FETAL
MEDICINE**

ADAMI, REBECCA
Provider ID: 272676
Board Certified Specialty: No
📍 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ *Accessibility: CONTACT
PROVIDER*
🕒 *Hours: M-F
8:00AM-5:00PM*
🌐 *Website: N/A*

**MATERNAL AND FETAL
MEDICINE**

MCCULLOUGH, DEIRDRE
Provider ID: 244873
Board Certified Specialty: No
📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**MATERNAL AND FETAL
MEDICINE**

MELBER, DORA

Provider ID: 296997

Board Certified Specialty: No

 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: Y


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**MATERNAL AND FETAL
MEDICINE**

REIMERS, REBECCA

Provider ID: 294656

Board Certified Specialty: No

 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: Y


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

**MATERNAL AND FETAL
MEDICINE**

REIMERS, REBECCA

Provider ID: 294654

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**MATERNAL AND FETAL
MEDICINE**

RICHARDSON, ALVIE


Provider ID: 277317

Board Certified Specialty: No

 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: Y

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**MATERNAL AND FETAL
MEDICINE**

SCHWENDEMANN, WADE

Provider ID: 277305

Board Certified Specialty: No

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: Y
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**MATERNAL AND FETAL
MEDICINE**

WILLIAMS, KRISTIN

Provider ID: 277384

Board Certified Specialty: No

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Phone: (858) 966-6710
Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female
NPI: 1992847131

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

NEPHROLOGY

LEININGER, DANIEL

Provider ID: 295640

Board Certified Specialty: No

8851 CENTER DR STE 505
LA MESA, CA 91942

Phone: (619) 461-3880
Fax: (619) 461-3895

After Hours Phone: (619)
461-3880

Provider Gender: Male
NPI: 1164956264

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp
Grossmont Hospital,
GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC,
ALVARADO COMMUNITY
HOSPITAL

Medi-Cal Open Panel: Y
Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEPHROLOGY

LEININGER, DANIEL

Provider ID: 293480

Board Certified Specialty: No

8851 CENTER DR STE 505
LA MESA, CA 91942

Phone: (619) 461-3880
Fax: (619) 461-3895

☎ After Hours Phone: (619) 461-3880

Provider Gender: Male

NPI: 1164956264

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital,

GROSSMONT HOSPITAL,

ALVARADO HOSPITAL LLC,

ALVARADO COMMUNITY

HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

9:00AM-5:00PM

🌐 Website: N/A

NEUROLOGY

MOHAMMAD, AHMAD SHAH

Provider ID: 39868

Board Certified Specialty: No

📍 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, Pushto,

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

OPHTHALMOLOGY

CHIU, STEPHAN

Provider ID: 297585

Board Certified Specialty: No

📍 5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

☎ Phone: (619) 465-2020

Fax: (619) 698-1189

☎ After Hours Phone: (619) 465-2020

Provider Gender: Male

NPI: 1053846956

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Mandarin, Spanish

Cultural Competency: N

Hospital Affiliation: RONALD

REAGAN UCLA MED CTR,

SANTA MONICA UCLA MED

CTR, SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

OPHTHALMOLOGY

HAIGHT, BRUCE

Provider ID: 295984

Board Certified Specialty: No

📍 5565 GROSSMONT
CENTER DR STE 2-3
LA MESA, CA 91942

☎ Phone: (619) 463-0331

Fax: (619) 463-0138

☎ After Hours Phone: (619) 463-0331

Provider Gender: Male

NPI: 1427029628

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH

8:30AM-4:00PM

F 8:00AM-0:00PM

🌐 Website: N/A

OPHTHALMOLOGY

HAIGHT, BRUCE

Provider ID: 269112

Board Certified Specialty: No

📍 5565 GROSSMONT
CENTER DR BLDG 3 STE
551

LA MESA, CA 91942

☎ Phone: (800) 898-2020

Fax: (844) 897-3788

☎ After Hours Phone: (800) 898-2020

Provider Gender: Male

NPI: 1427029628

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8:00AM-4:00PM
TU-W 8:30AM-4:00PM
TH 8:00AM-4:00PM
F 8:00AM-0:00PM

🌐 Website: N/A

OPHTHALMOLOGY

HAIGHT, BRUCE

Provider ID: 288660

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OPHTHALMOLOGY

HUDSON, HENRY

Provider ID: 297577

Board Certified Specialty: Yes

📍 5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942

☎ Phone: (619) 465-2020

Fax: (619) 698-1189

☎ After Hours Phone: (619) 465-2020

Provider Gender: Male

NPI: 1851349195

☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-4:30PM

🌐 Website: N/A

OPHTHALMOLOGY

HUDSON, HENRY

Provider ID: 297578

Board Certified Specialty: No

📍 7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

☎ After Hours Phone: (619) 722-8460

Provider Gender: Male

NPI: 1851349195

☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-4:30PM

🌐 Website: N/A

OPTOMETRIST

AOTO, KIM

Provider ID: 288652

Board Certified Specialty: No

📍 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY

MOSHTAGHI, OMID

Provider ID: 302380
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F

8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY

SAEZ, NEIL

Provider ID: 302431
 Board Certified Specialty: No
 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
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

BETTY, MARYANN

Provider ID: 245753
 Board Certified Specialty: No
 5565 GROSSMONT
 CENTER DR STE 2
 LA MESA, CA 91942
 Phone: (619) 713-5375
 Fax: (619) 713-5379


After Hours Phone: (619)
 713-5375

Provider Gender: Female
 NPI: 1285014498
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY
MEDICINE

GROSS, MATTHEW




Provider ID: 297177
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):




N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM
 M-F 4:00PM-10:00PM
 SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

JOSHI, WEENA

Provider ID: 262233
 Board Certified Specialty: No






 5565 GROSSMONT CENTER DR STE 2 STE 2 LA MESA, CA 91942
 Phone: (619) 713-5375
 Fax: (619) 713-5379
 After Hours Phone: (619) 713-5375
 Provider Gender: Female
 NPI: 1376862177
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):



N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

MINKA, GENEVIEVE



Provider ID: 205335
 Board Certified Specialty: No



 5565 GROSSMONT CENTER DR STE 2 LA MESA, CA 91942
 Phone: (619) 713-5375
 Fax: (619) 713-5379
 After Hours Phone: (619) 713-5375
 Provider Gender: Female
 NPI: 1689646689
 Provider English Spoken: Y
 Provider Language(s) Spoken: French
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):




N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM
 M-F 4:00PM-10:00PM
 SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

OZAKI, YOSHIHIRO

Provider ID: 241925
 Board Certified Specialty: No
 5565 GROSSMONT CENTER DR STE 2 LA MESA, CA 91942
 Phone: (619) 713-5375
 Fax: (619) 713-5379
 After Hours Phone: (619) 713-5375
 Provider Gender: Male
 NPI: 1467898239

 Provider English Spoken: Y
 Provider Language(s) Spoken: Japanese
 Cultural Competency: N
 Hospital Affiliation: VALLEY CHILDRENS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

PARKER, SHERINE


Provider ID: 205786
 Board Certified Specialty: No
 5565 GROSSMONT CENTER DR STE 2 LA MESA, CA 91942
 Phone: (619) 713-5375
 Fax: (619) 713-5379
 After Hours Phone: (619) 713-5375
 Provider Gender: Female
 NPI: 1477626513
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS


HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY


MEDICINE

VARGAS, JACLYN

Provider ID: 285936

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY

MEDICINE

WANG, EMILY

Provider ID: 265955

 5565 GROSSMONT
CENTER DR STE 2 BLDG 2
LA MESA, CA 91942

 Phone: (619) 713-5375
Fax: (619) 713-5379

 After Hours Phone: (619)
713-5375

Provider Gender: Female

NPI: 1427142363

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRICS

CLAY, CORRIE

Provider ID: 278807

Board Certified Specialty: No
 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: Y

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-6:00PM
SA 11:30AM-3:30PM

 Website: N/A


PHYSICIANS ASSISTANT

DOUGHERTY, CLARA

Provider ID: 301590

Board Certified Specialty: No

 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: 1609987619

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

ELO, KRISTIN

Provider ID: 241862

Board Certified Specialty: No

5555 GROSSMONT
CENTER DR

LA MESA, CA 91942

Phone: (619) 644-3030

Fax: (619) 644-3083

After Hours Phone: (619)
644-3030

Provider Gender: Female

NPI: 1164664306

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital,

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 18\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

ELO, KRISTIN

Provider ID: 295736

Board Certified Specialty: No

5555 GROSSMONT
CENTER DR

LA MESA, CA 91942

Phone: (619) 644-3030

Fax: (619) 644-3083

After Hours Phone: (619)
644-3030

Provider Gender: Female

NPI: 1164664306

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital,

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

RAYMOND, ALAIN

Provider ID: 269057

Board Certified Specialty: No

8851 CENTER DR STE 505
LA MESA, CA 91942

Phone: (619) 461-3880

Fax: (619) 461-3895

After Hours Phone: (619)
461-3880

Provider Gender: Male

NPI: 1164729125

Provider English Spoken: Y
 Provider Language(s)
Spoken: French

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

VAWTER, ERIN

Provider ID: 295755

Board Certified Specialty: No

5555 GROSSMONT
CENTER DR

LA MESA, CA 91942

Phone: (619) 644-3030

Fax: (619) 644-3638

After Hours Phone: (619)
644-3030

Provider Gender: Female

NPI: 1376988691

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A



PHYSICIANS ASSISTANT

WHITE, KYLE

Provider ID: 302382

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A


RADIATION ONCOLOGY

CARMONA, RUBEN

Provider ID: 303099

Board Certified Specialty: No

 5555 GROSSMONT
 CENTER DR
 LA MESA, CA 91942

 Phone: (619) 740-4500

Fax: (619) 740-8499

 After Hours Phone: (619) 740-4500

Provider Gender: Male

NPI: 1275929242

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp
 Grossmont Hospital, SHARP
 MEMORIAL HOSPITAL


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A


RADIATION ONCOLOGY

COLEMAN, LORI

Provider ID: 221089

Board Certified Specialty: No

 5555 GROSSMONT
 CENTER DR
 LA MESA, CA 91942


 Phone: (619) 740-4500

Fax: (619) 740-8499

 After Hours Phone: (619) 740-4500

Provider Gender: Female

NPI: 1053348920

 Provider English Spoken: Y

 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
 SHARP MEMORIAL HOSPITAL,
 GROSSMONT HOSPITAL,
 PALOMAR MEDICAL CENTER,

Sharp Grossmont Hospital


Medi-Cal Open Panel: Y

Min/Max Age: 19\100

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A


RADIATION ONCOLOGY

VOLPP, PAUL

Provider ID: 221104

Board Certified Specialty: No

 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: Y

Min/Max Age: 19\100

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A


RADIATION ONCOLOGY

WEINSTEIN, GEOFFREY

Provider ID: 220040

Board Certified Specialty: No

 5555 GROSSMONT
 CENTER DR
 LA MESA, CA 91942

 Phone: (619) 740-4500

Fax: (619) 740-8499

 After Hours Phone: (619) 740-4500







Provider Gender: Male

NPI: 1841233947

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL,
 SHARP MEMORIAL HOSPITAL,
 SHARP CHULA VISTA MED CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 19\100
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

RADIOLOGY DIAGNOSTIC




MOORE, BRIAN


Provider ID: 243960
 Board Certified Specialty: No
 8860 CENTER DR STE 100
 LA MESA, CA 91942
 Phone: (619) 460-2770
 Fax: (619) 460-2774
 After Hours Phone: (619)
 460-2770
 Provider Gender: Male
 NPI: 1831144005
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 7:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC





MOORE, BRIAN




Provider ID: 243959
 Board Certified Specialty: No
 8881 FLETCHER PKWY STE
 102
 LA MESA, CA 91942
 Phone: (619) 460-2770
 Fax: (619) 460-2774
 After Hours Phone: (619)
 460-2770
 Provider Gender: Male
 NPI: 1831144005

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 7:00AM-5:00PM
 Website: N/A

RADIOLOGY DIAGNOSTIC

VENKATESH, VIJAY

Provider ID: 269659
 Board Certified Specialty: No
 8860 CENTER DR STE 100
 LA MESA, CA 91942
 Phone: (619) 460-2770
 Fax: (619) 460-2774
 After Hours Phone: (619)
 460-2770
 Provider Gender: Male
 NPI: 1689627085
 Provider English Spoken: Y

Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

RADIOLOGY DIAGNOSTIC

VENKATESH, VIJAY

Provider ID: 269660
 Board Certified Specialty: No
 8881 FLETCHER PKWY STE
 102
 LA MESA, CA 91942
 Phone: (619) 460-2770
 Fax: (619) 460-2774
 After Hours Phone: (619)
 460-2770
 Provider Gender: Male
 NPI: 1689627085
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

RHEUMATOLOGY

KOTHA, ROSHAN

Provider ID: 63454
 Board Certified Specialty: Yes
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-5:00PM
 Website: N/A

SURGERY ORTHOPEDIC

BALLARD, BROOKE

Provider ID: 262205
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A
 Email:
 tracy@alvaradoortho.com

UROLOGY

SALMASI, AMIRALI

Provider ID: 129643
 Board Certified Specialty: No
 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: Male
 NPI: 1609187962

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON,
 GROSSMONT HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

LAKE ELSINORE

**CERTIFIED REGISTERED
 NURSE MIDWIFE**

ZAMORA-FLYR, MARIA

Provider ID: 290645
 Board Certified Specialty: No
 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: 1194938647
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

OBSTETRICS / GYNECOLOGY

FRANCIS, LARRY

Provider ID: 290293
 Board Certified Specialty: No
 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: Y

Min/Max Age: 16\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

OPTOMETRIST

GEE, JENNIFER

Provider ID: 290211

Board Certified Specialty: No

📍 30195 FRASER DR
LAKE ELSINORE, CA 92530

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1336589332

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC

MEDICAL CENTER - D P APH

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OPTOMETRIST

MORA, WENDY

Provider ID: 290239

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OPTOMETRIST

TAM, EMILY

Provider ID: 290319

Board Certified Specialty: No

📍 30195 FRASER DR
LAKE ELSINORE, CA 92530

☎ Phone: (951) 525-2720

Fax: (760) 414-3892

☎ After Hours Phone: (951) 525-2720

Provider Gender: Female

NPI: 1497161236

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Mandarin

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

LAKESIDE

CHIROPRACTOR

FULKS, ZACKARY

Provider ID: 301145

Board Certified Specialty: No

📍 10039 VINE ST
LAKESIDE, CA 92040

☎ Phone: (619) 390-9975

Fax: (360) 462-2744

☎ After Hours Phone: (619) 390-9975

Provider Gender: Male

NPI: 1407562531

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER


🕒 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CHIROPRACTOR
FULKS, ZACKARY

Provider ID: 303813
Board Certified Specialty: No

 10039 VINE ST
LAKESIDE, CA 92040

 Phone: (619) 390-9975
Fax: (360) 462-2744


 After Hours Phone: (619)
390-9975


Provider Gender: Male
NPI: 1407562531

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CHIROPRACTOR
HOURIHAN, KEITH

Provider ID: 257549
Board Certified Specialty: No

 10039 VINE ST
LAKESIDE, CA 92040

 Phone: (619) 390-9975
Fax: (858) 633-4690

 After Hours Phone: (619)
390-9975


Provider Gender: Male
NPI: 1306916994

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL): Provider Gender: Male
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CHIROPRACTOR
MCCOWN, BARRY

Provider ID: 303816
Board Certified Specialty: No

 10039 VINE ST
LAKESIDE, CA 92040

 Phone: (619) 390-9975
Fax: (360) 462-2744

 After Hours Phone: (619)
390-9975


Provider Gender: Male
NPI: 1487781035


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL): Provider Gender: Male
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CHIROPRACTOR
MCCOWN, BARRY

Provider ID: 301344
Board Certified Specialty: No

 10039 VINE ST
LAKESIDE, CA 92040

 Phone: (619) 390-9975
Fax: (360) 462-2744


 After Hours Phone: (619)
390-9975

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CHIROPRACTOR
ZECHA, RONALD

Provider ID: 290677
Board Certified Specialty: No

 10039 VINE ST
LAKESIDE, CA 92040

 Phone: (619) 390-9975
Fax: (858) 633-4690

 After Hours Phone: (619)
390-9975

Provider Gender: Male
NPI: 1427252121


 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
Cultural Competency: N

Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PSYCHOLOGIST
BRUNETTO, HEIDI

Provider ID: 290407
Board Certified Specialty: No

10039 VINE ST
LAKESIDE, CA 92040
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619) 390-9975

Provider Gender: Female
NPI: 1023250453
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH
8:00AM-5:00PM
Website: N/A

MENIFEE

PHYSICIANS ASSISTANT

SMITH, KELLI

Provider ID: 272954
Board Certified Specialty: No
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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F

8:00AM-5:00PM

Website: N/A

MURRIETA

ANESTHESIOLOGY

HYLTON, DIANA

Provider ID: 241738
Board Certified Specialty: No
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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY

KRAUSE, MARTIN

Provider ID: 287655
Board Certified Specialty: No

25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (951) 696-6000
Fax: (951) 677-9757

After Hours Phone: (951) 696-6000
Provider Gender: Male
NPI: 1417243239
Provider English Spoken: Y
Provider Language(s) Spoken: German
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CARDIOLOGY

AL KHIAMI, BELAL

Provider ID: 275994
Board Certified Specialty: No
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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM


 Website: N/A


CARDIOLOGY

WETTERSTEN, NICHOLAS

Provider ID: 210605

Board Certified Specialty: No

 41011 CALIFORNIA OAKS RD STE 104 MURRIETA, CA 92562

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1063701068

 Provider English Spoken: Y Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

HEAD, KRISTIN


Provider ID: 268658

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

KLEMENCIC, TAHNEE


Provider ID: 302627

Board Certified Specialty: No

 25170 HANCOCK AVE FL 1 MURRIETA, CA 92562


 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951) 600-1640

Provider Gender: Female

NPI: 1134802283

 Provider English Spoken: Y Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: N

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MIRACLE, ANGELYN


Provider ID: 300259

Board Certified Specialty: No

 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: N

Min/Max Age: 0\19

American Sign Language (ASL):

N




 Accessibility: CONTACT PROVIDER
 Hours: SU 8:30AM-0:00PM
 M-F 8:00AM-5:00PM
 SA 8:30AM-0:00PM
 Website: N/A


CERTIFIED NURSE

PRACTITIONER




SNYDER, MICHELLE

Provider ID: 210676
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N




 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A


CERTIFIED NURSE

PRACTITIONER




STEVENSON, REHEIA

Provider ID: 210794
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A




EMERGENCY MEDICINE

LI, JINGHONG

Provider ID: 255941
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A



MATERNAL AND FETAL MEDICINE

MELBER, DORA


Provider ID: 296992
 Board Certified Specialty: No

 25500 MEDICAL CENTER DR MURRIETA, CA 92562
 Phone: (858) 966-6710
 Fax: (858) 966-6711

 After Hours Phone: (858) 966-6710
 Provider Gender: Female
 NPI: 1124413026

 Provider English Spoken: Y
 Provider Language(s) Spoken: Hungarian, Spanish
 Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

**MATERNAL AND FETAL
MEDICINE**

MELBER, DORA

Provider ID: 296988

Board Certified Specialty: No

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1124413026

Provider English Spoken: Y

Provider Language(s)
Spoken: Hungarian, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**MATERNAL AND FETAL
MEDICINE**

REIMERS, REBECCA

Provider ID: 294652

Board Certified Specialty: No

25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**MATERNAL AND FETAL
MEDICINE**

REIMERS, REBECCA

Provider ID: 294649

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**NEONATAL / PERINATAL
MEDICINE**

NYMAN, KATHERINE

Provider ID: 301820

Board Certified Specialty: No

25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

Phone: (951) 696-6000

Fax: (951) 696-6105

After Hours Phone: (951)
696-6000

Provider Gender: Female

NPI: 1003260951

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**NEONATAL / PERINATAL
MEDICINE**

WEISS, KATHERINE

Provider ID: 264676

Board Certified Specialty: Yes

25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (951) 696-6000
Fax: (951) 696-6105
After Hours Phone: (951) 696-6000
Provider Gender: Female
NPI: 1053541862

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

NEONATAL / PERINATAL MEDICINE

WEST, JULIE

Provider ID: 297071
Board Certified Specialty: No
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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

GOLD, JEFFREY

Provider ID: 283334
Board Certified Specialty: No
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: Y
Min/Max Age: 0\19
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEUROLOGY

JINDAL, ANUJA

Provider ID: 215521

Board Certified Specialty: No

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

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

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

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: Y
Min/Max Age: 0\19
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A




Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEUROLOGY

SAHAGIAN, MICHELLE




Provider ID: 283166
Board Certified Specialty: No
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1275604035

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO




Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A




NEUROLOGY CHILD
GOLD, JEFFREY

Provider ID: 215691
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

NEUROLOGY CHILD
GUIDO-ESTRADA, NATALIE

Provider ID: 215442
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

NEUROLOGY CHILD
KIM MCMANUS, OLIVIA

Provider ID: 215666
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

NEUROLOGY CHILD
NELSON, JAMES

Provider ID: 215634
 Board Certified Specialty: No
 25170 HANCOCK AVE
 MURRIETA, CA 92562
 Phone: (951) 600-1640
 After Hours Phone: (951)
 600-1640
 Provider Gender: Male
 NPI: 1568434546
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: VALLEY
 CHILDRENS HOSPITAL, UCSD
 MEDICAL CTR, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA

Provider ID: 273227
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

BANSAL, PREETI

Provider ID: 215606
 Board Certified Specialty: No
 25170 HANCOCK AVE MURRIETA, CA 92562
 Phone: (951) 600-1640
 After Hours Phone: (951) 600-1640
 Provider Gender: Female
 NPI: 1871664631
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

BHATIA, SHAGUN

Provider ID: 267317
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

HENNEIN, LAUREN

Provider ID: 297010
 Board Certified Specialty: No
 25170 HANCOCK AVE FL 1 MURRIETA, CA 92562
 Phone: (951) 600-1640
 Fax: (951) 600-1760
 After Hours Phone: (951) 600-1640
 Provider Gender: Female
 NPI: 1699216010
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY





MOLL, ANGELA




Provider ID: 215687
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY





MOVAGHAR, MANSOOR




Provider ID: 216415
 Board Certified Specialty: No
 25170 HANCOCK AVE FL 1
 MURRIETA, CA 92562
 Phone: (858) 309-7702
 After Hours Phone: (858)
 309-7702
 Provider Gender: Male
 NPI: 1497792220
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

OHALLORAN, HENRY







Provider ID: 215685
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY






BLISS, MORGAN

Provider ID: 215684
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY

CARVALHO, DANIELA

Provider ID: 215332
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

FRIESEN, TZYYNONG

Provider ID: 244898

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

JIANG, WEN

Provider ID: 215564

Board Certified Specialty: No

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1659305753

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 254089

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 254296

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

PATEL, VIJAY

Provider ID: 297034

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**PEDIATRIC ALLERGY /
IMMUNOLOGY**

COLLINS, CATHLEEN

Provider ID: 215733

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

BORQUEZ, ALEJANDRO

Provider ID: 284119

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

DAVIS, CHRISTOPHER

Provider ID: 215743

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

DUMMER, KIRSTEN

Provider ID: 215645

Board Certified Specialty: No





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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRIC CARDIOLOGY

MCCANDLESS, RACHEL

Provider ID: 215601
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

PEDIATRIC CARDIOLOGY

NARAYAN, HARI



Provider ID: 239114
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRIC CARDIOLOGY

SAH, SERENA

Provider ID: 215643
 Board Certified Specialty: No
 25170 HANCOCK AVE
 MURRIETA, CA 92562
 Phone: (858) 966-5855
 After Hours Phone: (858)
 966-5855
 Provider Gender: Female
 NPI: 1295042653





 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Chinese, Mandarin

Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRIC CARDIOLOGY

SILVA SEPULVEDA, JOSE

Provider ID: 215679
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRIC CARDIOLOGY

WILLIAMS, MATTHEW

Provider ID: 215678

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

DEVERA, GEMMIE

Provider ID: N/A

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

DO, STEPHANIE

Provider ID: 216969

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

GROSS, MATTHEW

Provider ID: 297173

Board Certified Specialty: No

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (858) 966-7800

Fax: (858) 966-8231

After Hours Phone: (858)
966-7800

Provider Gender: Male

NPI: 1942223664

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

INDRA, SEAN

Provider ID: 302626

Board Certified Specialty: No

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: N

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE


KINGDON, JOANNA

Provider ID: 302318

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N


 Accessibility: CONTACT

PROVIDER

 Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE


MESIWALA, ADNAN

Provider ID: 275655

Board Certified Specialty: No

 25500 MEDICAL CENTER
DR

MURRIETA, CA 92562


 Phone: (951) 696-6161

Fax: (951) 696-6105

 After Hours Phone: (951)
696-6161

Provider Gender: Male

NPI: 1528483955

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN


DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE


MILLS, DAVID

Provider ID: 302147


Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY

MEDICINE


OZCAN, ALI

Provider ID: 287924

Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

PARK, BRIAN

Provider ID: 302353
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A




PEDIATRIC EMERGENCY MEDICINE

RANASURIYA, DUNISHA

Provider ID: 216972



Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N




 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

SCHROTER, STEPHANIE




Provider ID: 243831
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


SHETH, SARIKA

Provider ID: 248172
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

SOUDER, CHRISTOPHER

Provider ID: 301634
 Board Certified Specialty: Yes
 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: N

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

SYED-UDDIN, SUMIYAH

Provider ID: 297771

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

TANG, ANDREW

Provider ID: 294678

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

TRAN, THERESA

Provider ID: 301835

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

TYGART, MELISSA

Provider ID: 294096

Board Certified Specialty: No

📍 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

☎ Phone: (858) 966-7800

Fax: (858) 966-8231

☎ After Hours Phone: (858)
966-7800

Provider Gender: Female

NPI: 1336602507


🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: N
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC ENDOCRINOLOGY

SINGH, PUJA


Provider ID: 302819

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC


GASTROENTEROLOGY

CHU, CHRISTOPHER


Provider ID: 301640

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC PULMONOLOGY

**LENHART-PENDERGRASS,
PATRICIA**

Provider ID: 294382

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC PULMONOLOGY

RAO, APARNA

Provider ID: 215528

Board Certified Specialty: No

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640


Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1649222340

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi

Cultural Competency: N



Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER




 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRICS

LOPEZ, XIMENA


Provider ID: 302857
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRICS

MARIETTI SHEPHERD, SARAH

Provider ID: 215657
Board Certified Specialty: No
 25170 HANCOCK AVE
MURRIETA, CA 92562
 Phone: (951) 600-1640
Fax: (951) 600-1760
 After Hours Phone: (951)
600-1640
Provider Gender: Female
NPI: 1801094115



 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRICS




NGO, MAI

Provider ID: 302112
Board Certified Specialty: No
 25170 HANCOCK AVE STE 1
MURRIETA, CA 92562
 Phone: (951) 600-1640
Fax: (951) 600-1760
 After Hours Phone: (951)
600-1640
Provider Gender: Female
NPI: 1508910787

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N

Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND,
MEDICAL CTR AT UCSF, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Y
Min/Max Age: 0\19


American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRICS

PATTERSON, MARY


Provider ID: 215677
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A





PEDIATRICS




VARGAS TRUJILLO, MARCELA

Provider ID: 215602
Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A




**PHYSICAL MEDICINE /
 REHABILITATION**

ALGRA, JEFFREY
 Provider ID: 215644
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A








**PHYSICAL MEDICINE /
 REHABILITATION**

DALAL, PRITHA
 Provider ID: 215665
 Board Certified Specialty: No
 25170 HANCOCK AVE
 MURRIETA, CA 92562
 Phone: (951) 600-1640
 Fax: (951) 600-1760
 After Hours Phone: (951)
 600-1640
 Provider Gender: Female
 NPI: 1609017532
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, UCSF BENIOFF
 CHILDREN'S HOSPITAL
 OAKLAND
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**PHYSICAL MEDICINE /
 REHABILITATION**

RYAN, KYLE
 Provider ID: 275662
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**PHYSICAL MEDICINE /
 REHABILITATION**


SCOTT-WYARD, PHOEBE
 Provider ID: 283086
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICAL MEDICINE / REHABILITATION

SKALSKY, ANDREW

Provider ID: 215522
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):



N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A




PHYSICIANS ASSISTANT

ANWAR, YASMIN

Provider ID: 300845
 Board Certified Specialty: Yes
 25495 MEDICAL CENTER
 DR STE 200
 MURRIETA, CA 92562


 Phone: (951) 304-7546
 Fax: (951) 696-5872
 After Hours Phone: (951)
 304-7546
 Provider Gender: Female
 NPI: 1588602247


 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Persian, Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

KIVIAT, ANNETTE




Provider ID: 302453
 Board Certified Specialty: No
 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: N
 Min/Max Age: 0\19
 American Sign Language (ASL):



N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

SERING, MALIA




Provider ID: 297123
 Board Certified Specialty: No
 25495 MEDICAL CENTER
 DR STE 200
 MURRIETA, CA 92562
 Phone: (951) 304-7546
 Fax: (951) 696-5872
 After Hours Phone: (951)
 304-7546
 Provider Gender: Female
 NPI: 1013198720

 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PULMONARY DISEASES

KUMAR, AVNEE

Provider ID: 300014
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PULMONARY DISEASES

SURI, RAJAT

Provider ID: 283350

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY CARDIOVASCULAR

GRAMINS, DANIEL

Provider ID: 210049

Board Certified Specialty: No

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: 1164495750

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY CARDIOVASCULAR

HOWE, STEVEN

Provider ID: 210169

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY CARDIOVASCULAR

POLLEMA, TRAVIS

Provider ID: 210577

Board Certified Specialty: No

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: 1871752956

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL


FAIRBANKS, TIMOTHY

Provider ID: 246979

Board Certified Specialty: No

 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: Y


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL


KLING, KAREN

Provider ID: 215583

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL


VASCULAR


HOWE, STEVEN

Provider ID: 206761

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC

CHENG, YU TSUN

Provider ID: 301902

Board Certified Specialty: No

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1992982854

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY


HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO

SPRINGS HOSPITAL
Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC

UPASANI, VIDYADHAR

Provider ID: 283160

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PEDIATRIC

THANGARAJAH, HARIHARAN

Provider ID: 215420

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NATIONAL CITY

CARDIOLOGY

CAMACHO, BENJAMIN

Provider ID: 290137

Board Certified Specialty: No

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: Y

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

CARDIOLOGY

DAMANI, SAMIR

Provider ID: 303098

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

CARDIOLOGY

PANDHI, JAY

Provider ID: 269087

Board Certified Specialty: No

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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CARDIOLOGY
ROUGH, STEVEN



Provider ID: 302044
Board Certified Specialty: No
 1415 E 8TH ST STE 6 NATIONAL CITY, CA 91950
 Phone: (619) 434-4288
Fax: (619) 434-4315
 After Hours Phone: (619) 434-4288
Provider Gender: Male
NPI: 1386821460




 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL, ALVARADO HOSP MED CTR
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A


CARDIOLOGY
ROUGH, STEVEN

Provider ID: 301320
Board Certified Specialty: No
 1415 E 8TH ST STE 6 NATIONAL CITY, CA 91950
 Phone: (619) 434-4288
Fax: (619) 434-4315
 After Hours Phone: (619) 434-4288
Provider Gender: Male
NPI: 1386821460



 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL, ALVARADO HOSP MED CTR
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N




 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CARDIOLOGY
ROUGH, STEVEN



Provider ID: 302043
Board Certified Specialty: No
 1415 E 8TH ST STE 6 NATIONAL CITY, CA 91950


 Phone: (619) 434-4288
Fax: (619) 434-4315
 After Hours Phone: (619) 434-4288
Provider Gender: Male
NPI: 1386821460

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL, ALVARADO HOSP MED CTR
Medi-Cal Open Panel: Y
Min/Max Age: 18\999
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE
PRACTITIONER
CUNNINGHAM, ISIS





Provider ID: 302115
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

DE CASTRO, SHARLENE


Provider ID: 299158
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):




N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-6:00PM F 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

DRISCOLL, SUSAN




Provider ID: 301775
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 12\999
 American Sign Language (ASL):



N
 Accessibility: CONTACT PROVIDER
 Hours: SU 10:00AM-4:00PM M-F 8:30AM-5:30PM SA 8:00AM-2:30PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

DRISCOLL, SUSAN

Provider ID: 301774
 Board Certified Specialty: No
 340 E 8TH ST NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 Fax: (619) 259-2807
 After Hours Phone: (619) 662-4100
 Provider Gender: Female
 NPI: 1477755684
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 12\999
 American Sign Language (ASL):


N
 Accessibility: CONTACT PROVIDER




 Hours: SU 10:00AM-4:00PM M-F 8:30AM-5:30PM SA 8:00AM-2:30PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

GULLY, MICHELLE

Provider ID: 299422
 Board Certified Specialty: No
 1428 HIGHLAND AVE NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
 Fax: (619) 434-1613
 After Hours Phone: (844) 200-2426
 Provider Gender: Female
 NPI: 1801557947

 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

LIM, IMELDA

Provider ID: 294308
 Board Certified Specialty: No
 2743 HIGHLAND AVE NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
 Fax: (619) 474-3919
 After Hours Phone: (844) 200-2426
 Provider Gender: Female

NPI: 1093130395
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Tagalog
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TU
 8:30AM-5:30PM
 W 10:00AM-7:00PM
 TH-F 8:30AM-5:30PM
 Website: N/A

**CERTIFIED NURSE
 PRACTITIONER**

MIDORO, ABEGAILLE
 Provider ID: 303830
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TU
 8:30AM-5:30PM
 W 10:00AM-7:00PM
 TH-F 8:30AM-5:30PM
 Website: N/A

W 10:00AM-7:00PM
 TH-F 8:30AM-5:30PM
 Website: N/A

**CERTIFIED NURSE
 PRACTITIONER**

MIDORO, ABEGAILLE
 Provider ID: 303827
 Board Certified Specialty: No
 2835 HIGHLAND AVE STE B
 NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
 Fax: (619) 477-2628
 After Hours Phone: (844)
 200-2426
 Provider Gender: Female
 NPI: 1952925851

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Tagalog
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TU
 8:30AM-5:30PM
 W 10:00AM-7:00PM
 TH-F 8:30AM-5:30PM
 Website: N/A

**CERTIFIED NURSE
 PRACTITIONER**

NOVENO, HILARIO
 Provider ID: 297836
 Board Certified Specialty: No
 2743 HIGHLAND AVE
 NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
 Fax: (619) 474-4008

After Hours Phone: (844)
 200-2426
 Provider Gender: Male
 NPI: 1124486865
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Tagalog
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-6:00PM
 Website: N/A

CHIROPRACTOR

GILIBERTO, JOSEPH
 Provider ID: 291548
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM

 Website: N/A


DERMATOLOGY

CHIANG, JENNIFER


Provider ID: 291162

Board Certified Specialty: No

 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950


 Phone: (619) 267-8303


Fax: (619) 267-4832

 After Hours Phone: (619)
267-8303

Provider Gender: Female

NPI: 1457656738

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Chinese, Mandarin,
Spanish


Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-4:30PM

 Website: N/A


DERMATOLOGY

CHIANG, JENNIFER


Provider ID: 299237

Board Certified Specialty: No

 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

 Phone: (619) 267-8303


Fax: (619) 267-4832

 After Hours Phone: (619)
267-8303

Provider Gender: Female

NPI: 1457656738

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Chinese, Mandarin,
Spanish


Cultural Competency: N


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-4:30PM

 Website: N/A


DERMATOLOGY

CHIANG, JENNIFER


Provider ID: 262273

Board Certified Specialty: No

 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950



 Phone: (619) 267-8303

Fax: (619) 267-4835

 After Hours Phone: (619)
267-8303

Provider Gender: Female

NPI: 1457656738

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin,
Spanish


Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-4:30PM

 Website: N/A


DERMATOLOGY

GONZALEZ, JOSE

Provider ID: 297731

Board Certified Specialty: No

 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: Male

NPI: 1437646288


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


DERMATOLOGY

NELSON, AISLYN

Provider ID: 291191

Board Certified Specialty: No

 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: 1154717288

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: PARADISE
VALLEY HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-4:30PM

 Website: N/A


DERMATOLOGY

TYAGI, ABHILASHA


Provider ID: 295774

Board Certified Specialty: No

 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: 1609262963


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-4:30PM

 Website: N/A


DERMATOLOGY

TYAGI, ABHILASHA

Provider ID: 293507

Board Certified Specialty: No

 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

 Phone: (619) 579-5115

Fax: (619) 749-6174

 After Hours Phone: (619)

579-5115

Provider Gender: Female


NPI: 1609262963


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-4:30PM

 Website: N/A


DERMATOLOGY

UEBELHOER, NATHAN

Provider ID: 269137

Board Certified Specialty: No

 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

 Phone: (619) 267-8303

Fax: (619) 267-4835

 After Hours Phone: (619)
267-8303

Provider Gender: Male

NPI: 1659344513

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: NAVAL


MEDICAL CTR SD RBE

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-4:30PM

 Website: N/A


DERMATOLOGY

UEBELHOER, NATHAN


Provider ID: 300141

Board Certified Specialty: No

 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: Male

NPI: 1659344513

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: NAVAL


MEDICAL CTR SD RBE

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-4:30PM

 Website: N/A


DERMATOLOGY

UEBELHOER, NATHAN


Provider ID: 125008

Board Certified Specialty: No

 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

 Phone: (619) 267-8303

Fax: (619) 267-4835

 After Hours Phone: (619)
267-8303

Provider Gender: Male

NPI: 1659344513

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: NAVAL

MEDICAL CTR SD RBE

Medi-Cal Open Panel: Y

Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-4:30PM
 Website: N/A

EMERGENCY MEDICINE







TOVAR, JUAN

Provider ID: 290084
 Board Certified Specialty: No
 1136 D AVE
 NATIONAL CITY, CA 91950
 Phone: (619) 622-4100
 After Hours Phone: (619)
 622-4100
 Provider Gender: Male
 NPI: 1508896333
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

FAMILY PRACTICE






NAVARRO, VANESSA


Provider ID: 301784
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

FAMILY PRACTICE






ROBERTS, POMAI

Provider ID: 301278
 Board Certified Specialty: No
 1136 D AVE
 NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 Fax: (619) 474-3722
 After Hours Phone: (619)
 662-4100
 Provider Gender: Female
 NPI: 1023278314
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Y

Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-5:30PM
 SA 8:00AM-2:30PM
 Website: N/A

NEPHROLOGY

COMUNALE, RODERICK

Provider ID: 290784
 Board Certified Specialty: No
 502 EUCLID AVE STE 205
 NATIONAL CITY, CA 91950
 Phone: (858) 551-0276
 Fax: (858) 454-8796
 After Hours Phone: (858)
 551-0276
 Provider Gender: Male
 NPI: 1568462109
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, PARADISE
 VALLEY HOSPITAL,
 ALVARADO HOSPITAL LLC,
 SCRIPPS MERCY HOSPITAL,
 ALVARADO HOSP MED CTR,
 KINDRED HOSPITAL SAN
 DIEGO, KINDRED HOSPITAL
 SAN DIEGO, SELECT
 SPECIALTY HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 21\999

American Sign Language (ASL): **CARSON, LATISA**

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM
 Website: N/A

Provider ID: 295917
 Board Certified Specialty: No
 502 EUCLID AVE STE 302 NATIONAL CITY, CA 91950
 Phone: (619) 475-9744
 Fax: (619) 475-4450
 After Hours Phone: (619) 475-9744

CHULA VISTA MED CTR, PARADISE VALLEY HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM
 Website: N/A
 Email: pquiroz_80@hotmail.com

OBSTETRICS / GYNECOLOGY

ASLIAN, AZITA

Provider ID: 301797
 Board Certified Specialty: No
 1136 D AVE NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 Fax: (619) 336-2323
 After Hours Phone: (619) 662-4100
 Provider Gender: Female
 NPI: 1851667661

Provider English Spoken: Y
 Provider Language(s) Spoken: Fataleka
 Cultural Competency: N
 Hospital Affiliation: Hemet

Global Medical Center, Menifee
 Global Medical Center, SCRIPPS MERCY HOSPITAL
 CHULA VISTA, SCRIPPS MERCY HOSPITAL

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: SU 10:00AM-4:00PM M-F 8:30AM-5:30PM SA 8:00AM-2:30PM
 Website: N/A

Provider Gender: Female
 NPI: 1245229129
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OBSTETRICS / GYNECOLOGY

DEL ROSARIO, GELEN

Provider ID: 206092
 Board Certified Specialty: No
 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

OBSTETRICS / GYNECOLOGY

DEL ROSARIO, GELEN

Provider ID: 269247
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

Email:
pquiroz_80@hotmail.com

OBSTETRICS / GYNECOLOGY

DEL ROSARIO, GELEN

Provider ID: 257478

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

Email:

pquiroz_80@hotmail.com

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 302451

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

HAIGHT, BRUCE

Provider ID: 269113

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

AOTO, KIM

Provider ID: 268722

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

KOO, ANITA

Provider ID: 304538

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PODIATRIST

ATMAR, AKMAL

Provider ID: 269784

Board Certified Specialty: No

2345 E 8TH ST STE 105
NATIONAL CITY, CA 91950

Phone: (929) 287-4511

Fax: (877) 671-6835

After Hours Phone: (929) 287-4511

Provider Gender: Male

NPI: 1558656637

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Urdu

Cultural Competency: N

Hospital Affiliation: PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT

PROVIDER

Hours: M-F

9:00AM-5:00PM

Website: N/A

PODIATRIST

DAVIDSON, JOHN

Provider ID: 129542

Board Certified Specialty: No

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

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
9:00AM-4:30PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

CHENG, BRANDON

Provider ID: 304531

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH
7:00AM-7:00PM
F 7:00AM-5:00PM
SA 8:00AM-1:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

JIMENEZ, ANDREA

Provider ID: 299888

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT

PROVIDER
 Hours: M-F 7:00AM-7:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI

Provider ID: 287102
 Board Certified Specialty: No
 3400 E 8TH ST STE 108
 NATIONAL CITY, CA 91950
 Phone: (619) 482-3000
 Fax: (619) 482-3001
 After Hours Phone: (619) 482-3000

Provider Gender: Female
 NPI: 1699357525
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 7:00AM-6:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA

Provider ID: 305011
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 7:00AM-7:00PM
 F 7:00AM-4:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA

Provider ID: 305012
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 7:00AM-7:00PM
 F 7:00AM-4:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW

Provider ID: 301996
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW









Provider ID: 286784
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A



REGISTERED PHYSICAL THERAPIST



SPARKS, TODD

Provider ID: 301110
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M 7:00AM-7:00PM
 TU 7:00AM-0:00PM
 W-TH 7:00AM-7:00PM
 F 7:00AM-0:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST





SUGGS, SARAH

Provider ID: 301430
 Board Certified Specialty: No
 3400 E 8TH ST STE 108
 NATIONAL CITY, CA 91950
 Phone: (619) 482-3000

Fax: (619) 695-0050
 After Hours Phone: (619)
 482-3000
 Provider Gender: Female
 NPI: 1083353650
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 7:00AM-7:00PM
 Website: N/A









REGISTERED PHYSICAL THERAPIST

SUGGS, SARAH

Provider ID: 298366
 Board Certified Specialty: No
 3400 E 8TH ST STE 108
 NATIONAL CITY, CA 91950
 Phone: (619) 482-3000
 Fax: (619) 695-0050
 After Hours Phone: (619)
 482-3000
 Provider Gender: Female
 NPI: 1083353650
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 7:00AM-7:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST





VILLANUEVA, GIOVANNI



Provider ID: 301533
 Board Certified Specialty: No
 3400 E 8TH ST STE 108
 NATIONAL CITY, CA 91950
 Phone: (619) 482-3000
 Fax: (619) 695-0050
 After Hours Phone: (619)
 482-3000
 Provider Gender: Male
 NPI: 1063046878
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 7:00AM-7:00PM
 Website: N/A

OCEANSIDE

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON

Provider ID: 299882
 Board Certified Specialty: No
 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: Y
Min/Max Age: 18\100
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A






**CERTIFIED NURSE
PRACTITIONER**



BAE, JINYI
Provider ID: 298197
Board Certified Specialty: No
 619 CROUCH ST STE 100
OCEANSIDE, CA 92054
 Phone: (760) 736-6767
Fax: (760) 736-8740
 After Hours Phone: (760)
736-6767
Provider Gender: Female
NPI: 1871154526
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 18\64
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:30PM
 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**
BALDWIN, ANDREA








Provider ID: 294937
Board Certified Specialty: No
 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: Y
Min/Max Age: 2\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TU
8:00AM-5:00PM
W 8:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-6:00PM
 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**


BINETTE, DONYA
Provider ID: 303861
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:30PM
 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

CARLSON, KATHLEEN
Provider ID: 300217
Board Certified Specialty: No
 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 736-6767
Fax: (760) 566-1501
 After Hours Phone: (760)
736-6767
Provider Gender: Female
NPI: 1629180161
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


**CERTIFIED NURSE
PRACTITIONER**

CHILAKA, SAMUEL
Provider ID: 301313
Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
 8:00AM-8:00PM
 F 8:00AM-5:00PM
 SA 9:00AM-4:00PM

 Website: N/A



CERTIFIED NURSE

PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 301315


Board Certified Specialty: No

 517 N HORNE ST
 OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 Fax: (760) 414-3892


 After Hours Phone: (760) 631-5000


Provider Gender: Male


NPI: 1679140644

 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
 8:00AM-8:00PM
 F 8:00AM-5:00PM
 SA 9:00AM-4:00PM

 Website: N/A



CERTIFIED NURSE

PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 301314


Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
 8:00AM-8:00PM
 F 8:00AM-5:00PM
 SA 9:00AM-4:00PM

 Website: N/A



CERTIFIED NURSE

PRACTITIONER

CHIRIBOGA, MEGAN ELISE

Provider ID: 295492


Board Certified Specialty: No

 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: 1942931589

 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A



CERTIFIED NURSE

PRACTITIONER

CHOI, JI

Provider ID: 299765



Board Certified Specialty: No

 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058
 Phone: (760) 736-6767
 Fax: (760) 566-1501

 After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1891207668


 Provider English Spoken: Y
 Provider Language(s) Spoken: Korean


Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

CHOI, JI

Provider ID: 299766

Board Certified Specialty: No

605 CROUCH ST STE C
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 566-1501

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1891207668

Provider English Spoken: Y

Provider Language(s)
Spoken: Korean

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

CHRISTY, TYLER

Provider ID: 303930

Board Certified Specialty: No

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: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

CHRISTY, TYLER

Provider ID: 303931

Board Certified Specialty: No

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: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

GENOVESE, KELLY

Provider ID: 301304

Board Certified Specialty: No

2210 MESA DR STE 5
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1326052457

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

HARRIS, PAMELA

Provider ID: 302289

Board Certified Specialty: No

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1407545221

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N




Accessibility: CONTACT
PROVIDER

Hours: M-F


8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER




HARRIS, PAMELA

Provider ID: 302290
 Board Certified Specialty: No
 517 N HORNE ST
 OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000

Provider Gender: Female
 NPI: 1407545221




 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

HEAD, KRISTIN




Provider ID: 268660
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER




HERNANDEZ, JESSICA

Provider ID: 302298
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER




HERNANDEZ, JESSICA

Provider ID: 302300
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER




HERNANDEZ, JESSICA

Provider ID: 302299
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999


American Sign Language (ASL):
 N




 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA




Provider ID: 304495
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N




 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA




Provider ID: 304494
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET




Provider ID: 298081
Board Certified Specialty: No
 517 N HORNE ST
 OCEANSIDE, CA 92054
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*



Provider Gender: Female
NPI: 1245695006
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*



CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 298082
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

CERTIFIED NURSE PRACTITIONER








KELLEHER, BRIDGET

Provider ID: 298084
Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CERTIFIED NURSE PRACTITIONER
KHUAT, LIEN







Provider ID: 297850
 Board Certified Specialty: No
 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: 1366558678
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH
 8:00AM-8:00PM
 F 8:00AM-5:00PM
 SA 9:00AM-4:00PM
 Website: N/A


CERTIFIED NURSE PRACTITIONER
KHUAT, LIEN

Provider ID: 297851
 Board Certified Specialty: No
 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: 1366558678
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH
 8:00AM-8:00PM
 F 8:00AM-5:00PM
 SA 9:00AM-4:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER
KHUAT, LIEN



Provider ID: 297849
 Board Certified Specialty: No
 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: 1366558678
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH

8:00AM-8:00PM
 F 8:00AM-5:00PM
 SA 9:00AM-4:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER
MONTGOMERY, KEITH ALLEN

Provider ID: 295285
 Board Certified Specialty: No
 517 N HORNE ST
 OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Provider Gender: Male
 NPI: 1790978617
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 6\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU
 8:00AM-5:00PM
 W 10:00AM-7:00PM
 TH-F 8:00AM-5:00PM
 SA 9:00AM-4:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER
MONTGOMERY, KEITH ALLEN

Provider ID: 295286
 Board Certified Specialty: No
 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: Y

Min/Max Age: 6\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TU

8:00AM-5:00PM

W 10:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MONTGOMERY, KEITH ALLEN

Provider ID: 295287

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 6\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TU

8:00AM-5:00PM

W 10:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

PRITZKER, JOELY

Provider ID: 239772

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 12\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

RAYTA, NICOLE

Provider ID: 304682

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

RONCAROLO DE VRIES, ROXANE

Provider ID: 298765

Board Certified Specialty: No

📍 2210 MESA DR STE 5

OCEANSIDE, CA 92054

☎ Phone: (760) 736-6767

Fax: (760) 736-8740

☎ After Hours Phone: (760)

736-6767

Provider Gender: Male

NPI: 1497402184

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

SANTIAGO, AMANDA

Provider ID: 242607

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

SHAHBAZ, LINNAE

Provider ID: 304822

Board Certified Specialty: No

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: 1427712215

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: TU-W
0:00PM-8:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

SHAHBAZ, LINNAE

Provider ID: 304821

Board Certified Specialty: No

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: 1427712215

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: TU-W
0:00PM-8:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

SIMMONS, SUZANNE

Provider ID: 296058

Board Certified Specialty: No

619 CROUCH ST
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1245733450

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295505

Board Certified Specialty: No

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: Y

Min/Max Age: 12\999

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER
 Hours: M-F
 8:00AM-2:00PM
 SA 9:00AM-4:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295503
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 12\999

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Hours: M-F
 8:00AM-2:00PM
 SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295506
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 12\999

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Hours: M-F
 8:00AM-2:00PM
 SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, JINA

Provider ID: 297182
 Board Certified Specialty: No
 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: 1225500259

Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Hours: M 8:00AM-5:00PM
 TU 10:30AM-7:30PM
 W-F 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

WINDHAM, SUZONNE

Provider ID: 303722
 Board Certified Specialty: No

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: 1679926208

Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 12\999

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Hours: M-F
 8:00AM-5:00PM
 SA 8:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

WINDHAM, SUZONNE

Provider ID: 303841
 Board Certified Specialty: No

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: 1679926208


Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y

Min/Max Age: 12\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

SA 8:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

WINDHAM, SUZONNE

Provider ID: 303723

Board Certified Specialty: No

 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: 1679926208

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Y

Min/Max Age: 12\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

SA 8:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


WINDHAM, SUZONNE

Provider ID: 303725

Board Certified Specialty: No

 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: 1679926208

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Y

Min/Max Age: 12\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

SA 8:00AM-4:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE MIDWIFE

ALSTON, VICKIE


Provider ID: 257566

Board Certified Specialty: No

 2210 MESA DR STE 5
OCEANSIDE, CA 92054

 Phone: (760) 757-5841

Fax: (760) 736-8740

 After Hours Phone: (760)
757-5841

Provider Gender: Female

NPI: 1932209905

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU

8:00AM-7:00PM

W-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE MIDWIFE

KELLY, KATHERINE

Provider ID: 290312

Board Certified Specialty: No

 2210 MESA DR STE 5
OCEANSIDE, CA 92054

 Phone: (760) 757-5841


Fax: (760) 736-8740

 After Hours Phone: (760)
757-5841

Provider Gender: Female

NPI: 1801134275

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED REGISTERED


NURSE MIDWIFE

PERLMAN, TAMARA

Provider ID: 290733

Board Certified Specialty: No

 2210 MESA DR STE 5
OCEANSIDE, CA 92054

 Phone: (760) 757-5841

Fax: (760) 736-8740

 After Hours Phone: (760)

757-5841
 Provider Gender: Female
 NPI: 1730274374
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: TRI CITY
 MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**CERTIFIED REGISTERED
 NURSE MIDWIFE**

SCHROEDER, MARY
 Provider ID: 290688
 Board Certified Specialty: No
 2210 MESA DR STE 5
 OCEANSIDE, CA 92054
 Phone: (760) 757-5841
 Fax: (760) 736-8740
 After Hours Phone: (760)
 757-5841
 Provider Gender: Female
 NPI: 1164431664
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: TRI CITY
 MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT

PROVIDER
 Website: N/A

**CERTIFIED REGISTERED
 NURSE MIDWIFE**

ZAMORA-FLYR, MARIA
 Provider ID: 290644
 Board Certified Specialty: No
 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: 1194938647
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

**CERTIFIED REGISTERED
 NURSE MIDWIFE**

ZAMORA-FLYR, MARIA
 Provider ID: 290643
 Board Certified Specialty: No
 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: 1194938647
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

**CERTIFIED REGISTERED
 NURSE MIDWIFE**

ZAMORA-FLYR, MARIA
 Provider ID: 290642
 Board Certified Specialty: No
 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: 1194938647
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

CHIROPRACTOR

ANDREWS, BRAD

Provider ID: 290542

Board Certified Specialty: No

619 CROUCH ST
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1750791745

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CHIROPRACTOR

JU, NATHANIEL

Provider ID: 290221

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Website: N/A

EMERGENCY MEDICINE

PHAM, LILY

Provider ID: 304934

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

FAMILY PRACTICE

MARTINEZ, LESLY

Provider ID: 298004

Board Certified Specialty: No

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (766) 315-0000

Fax: (760) 414-3892

After Hours Phone: (766)

315-0000

Provider Gender: Female

NPI: 1629509260

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

MARTINEZ, LESLY

Provider ID: 298005

Board Certified Specialty: No

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: 1629509260

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER



Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM

W-F 8:00AM-5:00PM
 Website: N/A




FAMILY PRACTICE

MARTINEZ, LESLY

Provider ID: 298006
 Board Certified Specialty: No
 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: 1629509260

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish



Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M 8:00AM-5:00PM
 TU 10:00AM-7:00PM
 W-F 8:00AM-5:00PM
 Website: N/A

FAMILY PRACTICE

SALAMANCA, OMAR


Provider ID: 295469
 Board Certified Specialty: No
 605 CROUCH ST
 OCEANSIDE, CA 92054
 Phone: (760) 736-6767
 Fax: (760) 736-8740
 After Hours Phone: (760)
 736-6767
 Provider Gender: Male
 NPI: 1083000947

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N
 Hospital Affiliation: KERN
 MEDICAL CENTER

Medi-Cal Open Panel: Y
 Min/Max Age: 14\999
 American Sign Language (ASL):
 N




 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM
 SA 8:00AM-4:30PM



 Website: N/A

FAMILY PRACTICE

VIDAL, MONICA

Provider ID: 293352
 Board Certified Specialty: No
 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: 1871791749

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N



 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A



FAMILY PRACTICE

VIDAL, MONICA

Provider ID: 293350
 Board Certified Specialty: No
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054
 Phone: (844) 308-5003
 Fax: (760) 414-3763

 After Hours Phone: (844)
 308-5003


Provider Gender: Female
 NPI: 1871791749

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N



 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A



FAMILY PRACTICE




VIDAL, MONICA

Provider ID: 293353
 Board Certified Specialty: No
 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: 1871791749

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A


FAMILY PRACTICE

ZAMPELLO, LISA

Provider ID: 298463
 Board Certified Specialty: No
 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: 1477933026
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 3\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A



MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 296991
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE








REIMERS, REBECCA

Provider ID: 294651
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE

Provider ID: 264686
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**MATERNAL AND FETAL
MEDICINE**

SCHWENDEMANN, WADE

Provider ID: 205437

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**MATERNAL AND FETAL
MEDICINE**

WESTERMANN, MELISSA

Provider ID: 255793

Board Certified Specialty: No

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: Y
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**MATERNAL AND FETAL
MEDICINE**

WILLIAMS, KRISTIN

Provider ID: 206230

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEPHROLOGY

LIU, ANDREW

Provider ID: 301573

Board Certified Specialty: No

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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A

NEUROLOGY

JINDAL, ANUJA





Provider ID: 206266
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

NEUROLOGY CHILD





SAHAGIAN, MICHELLE




Provider ID: 206075
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY







BINDER, PRATIBHA


Provider ID: 273226
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY




SCHWEIKERT, SUZANNE


Provider ID: 290422
 Board Certified Specialty: No
 2210 MESA DR STE 5
 OCEANSIDE, CA 92054
 Phone: (760) 736-6767
 Fax: (760) 967-4863
 After Hours Phone: (760)
 736-6767
 Provider Gender: Female
 NPI: 1477560142
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL, TRI
 CITY MEDICAL CTR, SHARP
 MARY BIRCH HOSP FOR
 WOMEN AND NEWBORNS,
 PALOMAR MEDICAL CENTER
 Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT




PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

BANSAL, PREETI



Provider ID: 205619
 Board Certified Specialty: No
 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
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A




OPHTHALMOLOGY

BHATIA, SHAGUN

Provider ID: 267318
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N


 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY




HENNEIN, LAUREN

Provider ID: 297013
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N


 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY




JACOBSEN, BRADLEY

Provider ID: 302868
 Board Certified Specialty: Yes
 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

Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

MOLL, ANGELA

Provider ID: 205509

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

MOVAGHAR, MANSOOR

Provider ID: 216416

Board Certified Specialty: No

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

After Hours Phone: (760)
547-1020

Provider Gender: Male

NPI: 1497792220

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

OHALLORAN, HENRY

Provider ID: 205887

Board Certified Specialty: No

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Male

NPI: 1235287947

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

SONG, DELU

Provider ID: 302871

Board Certified Specialty: No

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, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OPTOMETRIST

GEE, JENNIFER

Provider ID: 290210

Board Certified Specialty: No




517 N HORNE ST

OCEANSIDE, CA 92054

Phone: (951) 252-2720





Fax: (760) 414-3892



After Hours Phone: (951)

252-2720
 Provider Gender: Female
 NPI: 1336589332
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 COMMUNITY REGIONAL
 MEDICAL CENTER-FRESNO,
 CALIFORNIA PACIFIC
 MEDICAL CENTER - D P APH
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

OPTOMETRIST





GEE, JENNIFER

Provider ID: 290927
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Website: N/A





OPTOMETRIST



KASAI, SARAH

Provider ID: 302768
 Board Certified Specialty: No
 4700 N RIVER RD
 OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
 631-5000
 Provider Gender: Female
 NPI: 1023406238
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

OPTOMETRIST







KASAI, SARAH

Provider ID: 302769
 Board Certified Specialty: No
 517 N HORNE ST
 OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760)
 631-5000
 Provider Gender: Female
 NPI: 1023406238
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Website: N/A





OPTOMETRIST




KIM, MICHAEL

Provider ID: 290902
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: SU 8:00AM-5:00PM
 M-F 8:00AM-5:00PM
 Website: N/A

OPTOMETRIST

KIM, MICHAEL

Provider ID: 290904
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: SU 8:00AM-5:00PM
 M-F 8:00AM-5:00PM
 Website: N/A



OPTOMETRIST






MORA, WENDY

Provider ID: 290237
 Board Certified Specialty: No
 517 N HORNE ST
 OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Provider Gender: Female
 NPI: 1376958389
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OPTOMETRIST









MORA, WENDY

Provider ID: 290929
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OPTOMETRIST

RING, ROBERT

Provider ID: 269380
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M 10:00AM-7:00PM
 TU-TH 9:00AM-5:00PM
 F 9:00AM-0:00PM
 Website: N/A






OPTOMETRIST

TAM, EMILY

Provider ID: 290317
 Board Certified Specialty: No
 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: Mandarin
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OPTOMETRIST

TAM, EMILY

Provider ID: 290318
 Board Certified Specialty: No
 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: Mandarin
 Cultural Competency: N
 Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 303732

Board Certified Specialty: No

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1457922957

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 5\21

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 304887

Board Certified Specialty: No

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1457922957

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 304886

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 303731

Board Certified Specialty: No

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: Y

Min/Max Age: 5\21

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 303730

Board Certified Specialty: No

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: Y

Min/Max Age: 5\21

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

BLISS, MORGAN

Provider ID: 206086

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

FRIESEN, TZYYNONG

Provider ID: 244899

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

LEUIN, SHELBY

Provider ID: 206111

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

PATEL, VIJAY

Provider ID: 297036

Board Certified Specialty: No

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760) 547-1020

Provider Gender: Male

NPI: 1508250747

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

AGHILI, ROXANA

Provider ID: 303781

Board Certified Specialty: No

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: Y
Min/Max Age: 0\19



American Sign Language (ASL): N




 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM M-F 4:00PM-10:00PM SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

BELLOMO, THOMAS



Provider ID: 205603
Board Certified Specialty: No
 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: 1700926698



 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL): N




 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM M-F 4:00PM-10:00PM SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

BETTY, MARYANN

Provider ID: 245755
Board Certified Specialty: No
 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: 1285014498
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL): N




 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM M-F 4:00PM-10:00PM SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

CHOO, SUN

Provider ID: 296537
Board Certified Specialty: No
 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: N
Min/Max Age: 0\19
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM M-F 4:00PM-10:00PM SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

GROSS, MATTHEW

Provider ID: 297175
Board Certified Specialty: No
 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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

JOSHI, WEENA

Provider ID: 262236

Board Certified Specialty: No

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760) 547-1020

Provider Gender: Female

NPI: 1376862177

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR HEALTH

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

KINGDON, JOANNA

Provider ID: 302319

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

LOVEJOY, AMY

Provider ID: 206109

Board Certified Specialty: No

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760) 547-1020

Provider Gender: Female

NPI: 1790856557

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, CHILDRENS HOSPITAL
OF ORANGE COUNTY

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

PARK, RONALD

Provider ID: 295456

Board Certified Specialty: No

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: N

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

🕒 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
🌐 Website: N/A

PEDIATRIC EMERGENCY
MEDICINE

PARKER, SHERINE

Provider ID: 205787
Board Certified Specialty: No
📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
📞 Phone: (760) 547-1020
Fax: (760) 547-1021
🕒 After Hours Phone: (760) 547-1020
Provider Gender: Female
NPI: 1477626513
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GLENDALE
ADVENTIST MED CTR,
GLENDALE MEMORIAL HOSP
AND HEALTH CTR, TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL

Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC EMERGENCY
MEDICINE

QUINONES-PEREZ, BIANCA

Provider ID: 206951
Board Certified Specialty: No
📍 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
🌐 Website: N/A

PEDIATRIC EMERGENCY
MEDICINE

RUSSELL, SAMUEL

Provider ID: 301251
Board Certified Specialty: No
📍 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
🌐 Website: N/A


PEDIATRIC EMERGENCY
MEDICINE

SANACORA, RACHEL

Provider ID: 297730
Board Certified Specialty: No
📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
📞 Phone: (760) 547-1000
Fax: (760) 547-1021
🕒 After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1548987985



📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM
 Website: N/A

**PEDIATRIC EMERGENCY
 MEDICINE**

TODD, SARAH

Provider ID: 302801
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


 Hours: SU 1:00PM-10:00PM
 M-F 4:00PM-10:00PM
 SA 1:00PM-10:00PM

 Website: N/A

**PEDIATRIC EMERGENCY
 MEDICINE**

TYGART, MELISSA

Provider ID: 294097
 Board Certified Specialty: No
 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: 1336602507


 Provider English Spoken: Y
 Cultural Competency: N


Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO

Medi-Cal Open Panel: N
 Min/Max Age: 0\19

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER



 Hours: SU 1:00PM-10:00PM
 M-F 4:00PM-10:00PM
 SA 1:00PM-10:00PM

 Website: N/A

**PEDIATRIC EMERGENCY
 MEDICINE**

VAIDYA, KAMALA

Provider ID: 205813
 Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER



 Hours: SU 1:00PM-10:00PM
 M-F 4:00PM-10:00PM
 SA 1:00PM-10:00PM

 Website: N/A

**PEDIATRIC EMERGENCY
 MEDICINE**

VARGAS, JACLYN

Provider ID: 296485
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\19

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: SU 1:00PM-10:00PM
 M-F 4:00PM-10:00PM
 SA 1:00PM-10:00PM

 Website: N/A

**PEDIATRIC EMERGENCY
 MEDICINE**

WANG, EMILY

Provider ID: 265953
 Board Certified Specialty: No
 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: 1427142363

Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL,
 SCRIPPS MEMORIAL
 HOSPITAL ENCINITAS, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, SCRIPPS MEMORIAL
 HOSPITAL

Medi-Cal Open Panel: Y
 Min/Max Age: 0\19

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**PEDIATRIC
 GASTROENTEROLOGY**

CHU, CHRISTOPHER

Provider ID: 301642
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\19
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRIC PULMONOLOGY
**LENHART-PENDERGRASS,
 PATRICIA**

Provider ID: 294643
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**PHYSICAL MEDICINE /
 REHABILITATION**

RICHARDSON, HENRY

Provider ID: 295852
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**PHYSICAL MEDICINE /
 REHABILITATION**

RYAN, KYLE

Provider ID: 275661

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

BASIN, NATALIE

Provider ID: 304442

Board Certified Specialty: No

3629 VISTA WAY
OCEANSIDE, CA 92056

Phone: (760) 757-7546

Fax: (760) 547-2311

After Hours Phone: (760)
757-7546

Provider Gender: Female

NPI: 1477196897

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

BASIN, NATALIE

Provider ID: 302864

Board Certified Specialty: No

3629 VISTA WAY
OCEANSIDE, CA 92056

Phone: (760) 757-7546

Fax: (760) 547-2311

After Hours Phone: (760)
757-7546

Provider Gender: Female

NPI: 1477196897

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

KIVIAT, ANNETTE

Provider ID: 302455

Board Certified Specialty: No

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: N

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

KUPIS, ROBERT

Provider ID: 291523

Board Certified Specialty: No

605 CROUCH ST
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1285676353



Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT



PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT


RAMOS, ELENA


Provider ID: 301307
 Board Certified Specialty: No
 605 CROUCH ST BLDG C
 OCEANSIDE, CA 92054
 Phone: (760) 736-6767
 Fax: (760) 566-1501
 After Hours Phone: (760)
 736-6767

Provider Gender: Female
 NPI: 1306489570

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 2\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


THEPVONGSA, MELISSA

Provider ID: 293151
 Board Certified Specialty: No
 605 CROUCH ST BLDG C
 OCEANSIDE, CA 92054
 Phone: (760) 736-6767
 Fax: (760) 566-1501
 After Hours Phone: (760)
 736-6767

Provider Gender: Female

NPI: 1750964425
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM


 Website: N/A

PSYCHOLOGIST

COOK, SHERYL


Provider ID: 304924
 Board Certified Specialty: No
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054
 Phone: (760) 736-6767
 Fax: (760) 736-8740
 After Hours Phone: (760)
 736-6767

Provider Gender: Female
 NPI: 1750420816

 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER



 Hours: M 9:00AM-6:15PM
 W 9:00AM-6:00PM

 Website: N/A



PSYCHOLOGIST

GUTIERREZ, VERONICA

Provider ID: 304733
 Board Certified Specialty: No
 4700 N RIVER RD

OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
 631-5000

Provider Gender: Female
 NPI: 1467674176

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999




American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER



 Website: N/A

PSYCHOLOGIST

GUTIERREZ, VERONICA


Provider ID: 304732
 Board Certified Specialty: No
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760)
 631-5000


Provider Gender: Female
 NPI: 1467674176

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Website: N/A

PSYCHOLOGIST

GUTIERREZ, VERONICA

Provider ID: 304730

Board Certified Specialty: No

517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1467674176

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

PSYCHOLOGIST

JENSEN, BRIAN

Provider ID: 290775

Board Certified Specialty: No

619 CROUCH ST
OCEANSIDE, CA 92054
Phone: (760) 566-1620
Fax: (760) 433-4040
After Hours Phone: (760) 566-1620

Provider Gender: Male

NPI: 1518138049

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

PSYCHOLOGIST

KRAPES, MICHAEL

Provider ID: 290097

Board Certified Specialty: No

2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 566-1501

After Hours Phone: (760) 736-6767

Provider Gender: Male

NPI: 1215233028

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

PSYCHOLOGIST

MAUHILI, KENNA

Provider ID: 298272

Board Certified Specialty: No

619 CROUCH ST STE 100
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-8740

After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1386949360

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

FARRAR, COURTNEY

Provider ID: 295874

Board Certified Specialty: No

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: Y

Min/Max Age: 13\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY CARDIOVASCULAR

GRAMINS, DANIEL

Provider ID: 210048

Board Certified Specialty: No

3998 VISTA WAY STE A
OCEANSIDE, CA 92056
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male
 NPI: 1164495750
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: TRI CITY
 MEDICAL CTR, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY COLON SURGERY

NASSERY, KRISTEN

Provider ID: 300122
 Board Certified Specialty: No
 3601 VISTA WAY STE 203
 OCEANSIDE, CA 92056
 Phone: (760) 724-5352
 Fax: (760) 724-5447
 After Hours Phone: (760)
 724-5352
 Provider Gender: Female
 NPI: 1396059440
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: TRI CITY
 MEDICAL CTR, SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS, PALOMAR
 MEDICAL CENTER
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT

PROVIDER
 Hours: M-TH
 8:00AM-5:00PM
 F 8:00AM-4:30PM
 Website: N/A

SURGERY ORTHOPEDIC

CIDAMBI, EMILY

Provider ID: 246469
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY ORTHOPEDIC

PRUSS, ERIKA

Provider ID: 303798
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY ORTHOPEDIC

UPASANI, VIDYADHAR

Provider ID: 260954
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY PEDIATRIC

FAIRBANKS, TIMOTHY

Provider ID: 205498

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PEDIATRIC

KLING, KAREN

Provider ID: 206129

Board Certified Specialty: No

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)

547-1020

Provider Gender: Female

NPI: 1982775144

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MARY BIRCH HOSP
FOR WOMEN AND

NEWBORNS, NATIONAL
NAVAL MED CTR, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

UROLOGY

MARIETTI SHEPHERD, SARAH

Provider ID: 265121

Board Certified Specialty: No

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: 1801094115

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL

OAKLAND

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PERRIS

CERTIFIED NURSE

PRACTITIONER

BLAND, JACELIS

Provider ID: 296767

Board Certified Specialty: No

1675 N PERRIS BLVD STE G1
PERRIS, CA 92571

Phone: (760) 736-7676

Fax: (760) 566-1501

After Hours Phone: (760)
736-7676

Provider Gender: Female

NPI: 1801522859

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:30PM

Website: N/A

POWAY

CARDIOLOGY

BAYAT, HAMED

Provider ID: 269450

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

Website: N/A

CARDIOLOGY

CHEN, ANDREW

Provider ID: 269315

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

Website: N/A

CARDIOLOGY

SERRY, ROD

Provider ID: 269471

Board Certified Specialty: No

15611 POMERADO RD STE 400

POWAY, CA 92064

Phone: (858) 592-2696

Fax: (760) 743-8837

After Hours Phone: (858) 592-2696

Provider Gender: Male

NPI: 1912945130

Provider English Spoken: Y

Provider Language(s) Spoken: Farsi, Portuguese, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, PALOMAR HEALTH, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

CARDIOVASCULAR DISEASE

ZAKOV, KAMEN

Provider ID: 122539

Board Certified Specialty: Yes

15611 POMERADO RD STE 400

POWAY, CA 92064

Phone: (858) 675-3110

Fax: (858) 613-2937

After Hours Phone: (858) 675-3110

Provider Gender: Male

NPI: 1518933613

Provider English Spoken: Y

Provider Language(s) Spoken: German

Cultural Competency: N

Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

JOHNSON, CHRISTINE

Provider ID: 295458

Board Certified Specialty: No

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: Y

Min/Max Age: 13\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

WOLFE, AMANDA

Provider ID: 243582

Board Certified Specialty: No

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
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

WRIGHT, KIMBERLY

Provider ID: 256378

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

DERMATOLOGY

CHIANG, JENNIFER

Provider ID: 302560

Board Certified Specialty: No

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: 1457656738

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin,
Spanish

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-4:30PM

Website: N/A

DERMATOLOGY

CHIANG, JENNIFER

Provider ID: 302978

Board Certified Specialty: No

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: 1457656738

Provider English Spoken: Y


Provider Language(s)
Spoken: Chinese, Mandarin,
Spanish

Cultural Competency: N

Medi-Cal Open Panel: Y





Min/Max Age: 0\999

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:30AM-4:30PM*
 *Website: N/A*

DERMATOLOGY



TYAGI, ABHILASHA

Provider ID: 302554
Board Certified Specialty: No
 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: 1609262963
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):


N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:30AM-4:30PM*
 *Website: N/A*

DERMATOLOGY

TYAGI, ABHILASHA




Provider ID: 302893
Board Certified Specialty: No
 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: 1609262963
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:30AM-4:30PM*
 *Website: N/A*

DERMATOLOGY

UEBELHOER, NATHAN





Provider ID: 302914
Board Certified Specialty: No
 15725 POMERADO RD STE 102
 POWAY, CA 92064
 *Phone: (619) 267-8303*
Fax: (619) 267-4835
 *After Hours Phone: (619) 267-8303*

Provider Gender: Male
NPI: 1659344513
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: NAVAL MEDICAL CTR SD RBE
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:30AM-4:30PM*
 *Website: N/A*





DERMATOLOGY


UEBELHOER, NATHAN

Provider ID: 302527
Board Certified Specialty: No
 15725 POMERADO RD STE 102
 POWAY, CA 92064
 *Phone: (619) 267-8303*
Fax: (619) 267-4835
 *After Hours Phone: (619) 267-8303*
Provider Gender: Male
NPI: 1659344513
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: NAVAL MEDICAL CTR SD RBE
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):

FAMILY PRACTICE




NAJAND, SADAF

Provider ID: 270055
Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A

FAMILY PRACTICE

WHITE, KERI


Provider ID: 269491
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

MANSOUR, DAVID




Provider ID: 291544
 Board Certified Specialty: No
 13010 POWAY RD



POWAY, CA 92064
 Phone: (858) 218-3000
 Fax: (360) 462-2742
 After Hours Phone: (858)
 218-3000
 Provider Gender: Male
 NPI: 1689164949
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic

Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 14\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A




INTERNAL MEDICINE

THAPER, MOHINDERPAL

Provider ID: 270016
 Board Certified Specialty: No
 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: Y

Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A





INTERNAL MEDICINE

GERIATRIC MEDICINE

SCHWARTZ, MARTIN

Provider ID: 122531
 Board Certified Specialty: No
 15611 POMERADO RD STE
 400
 POWAY, CA 92064
 Phone: (858) 675-3100
 Fax: (858) 618-1762
 After Hours Phone: (858)
 675-3100

Provider Gender: Male
 NPI: 1861606790

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: PALOMAR
 HEALTH, PALOMAR MEDICAL
 CENTER
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**NEONATAL / PERINATAL
 MEDICINE**

SAUER, CHARLES

Provider ID: 206164

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**NEONATAL / PERINATAL
MEDICINE**

WEST, JULIE

Provider ID: 297072

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

COBB, DAMON

Provider ID: 206030

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
9:00AM-4:30PM
F 9:00AM-1:00PM

Website: N/A

OPHTHALMOLOGY

LOZIER, JEFFREY

Provider ID: 270187

Board Certified Specialty: Yes

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

9:00AM-5:00PM


 Website: N/A


OPTOMETRIST

KIM, MICHELLE


Provider ID: 270014

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM


 Website: N/A


PHYSICIANS ASSISTANT

CHATFIELD, ALEXANDRA

Provider ID: 276715

Board Certified Specialty: No

 15611 POMERADO RD STE 525
POWAY, CA 92064

 Phone: (858) 485-0050

Fax: (858) 673-5187

 After Hours Phone: (858) 485-0050

Provider Gender: Female

NPI: 1215584628


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PODIATRIST

HAN, KYOUNG

Provider ID: 296326

Board Certified Specialty: No

 15706 POMERADO RD STE 102
POWAY, CA 92064

 Phone: (858) 485-1494

Fax: (858) 485-1515

 After Hours Phone: (858) 485-1494

Provider Gender: Female

NPI: 1083954671

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:
SADDLEBACK MEMORIAL
MED CTR, PALOMAR HEALTH,
PALOMAR MEDICAL CENTER


Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


PODIATRIST

NEGRON, RICARDO

Provider ID: 274645

Board Certified Specialty: No

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000

Fax: (858) 633-4688

 After Hours Phone: (858) 218-3000

Provider Gender: Male

NPI: 1932548393

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: Providence
St Joseph Hospital

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PODIATRIST

READ, TRENTON

Provider ID: 296656

Board Certified Specialty: No

 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
9:00AM-5:00PM
 *Website: N/A*

PSYCHOLOGIST



VALLEZ-BARLAM, ANDREA



Provider ID: 290629
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
9:00AM-5:00PM
 *Website: N/A*

PULMONARY DISEASES

BENDER, FRANK






Provider ID: 270195

Board Certified Specialty: No
 15611 POMERADO RD STE
580
POWAY, CA 92064
 *Phone: (858) 592-2696*
Fax: (858) 592-0627
 *After Hours Phone: (858)*
592-2696
Provider Gender: Male
NPI: 1912015363
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER, PALOMAR
HEALTH

Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
9:00AM-6:00PM
 *Website: N/A*

RHEUMATOLOGY






RAO, SOUMYA

Provider ID: 46060
Board Certified Specialty: No
 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: Y
Min/Max Age: 18\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

RHEUMATOLOGY

REDDY, SMITHA

Provider ID: 269402
Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH
8:00AM-4:00PM

Website: N/A

SURGERY ORTHOPEDIC

BALIKIAN, PHILIP

Provider ID: 257485

Board Certified Specialty: Yes

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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

BALIKIAN, PHILIP

Provider ID: 119552

Board Certified Specialty: Yes

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: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

BRIED, JAMES

Provider ID: 269500

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SAN DIEGO

ADOLESCENT MEDICINE

CHELVAKUMAR, GAYATHRI

Provider ID: 296674

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

 Website: N/A


ALLERGY IMMUNOLOGY

JAMES, CHRISTINE

Provider ID: 284917

Board Certified Specialty: No

 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: Y

Min/Max Age: 18\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


ALLERGY IMMUNOLOGY


RIEDL, MARC

Provider ID: 255768

Board Certified Specialty: Yes


 8899 UNIVERSITY CENTER LN STE 230
SAN DIEGO, CA 92122

 Phone: (858) 657-5350

 After Hours Phone: (858) 657-5350

Provider Gender: Male

NPI: 1285654889

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY


ALEXANDER, BRENTON

Provider ID: 242303

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA

Provider ID: 300068

Board Certified Specialty: No

 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

ANESTHESIOLOGY


BRUNO, KELLY

Provider ID: 238903

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY


CANO, SARAH

Provider ID: 200959

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1750517306

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,

SCRIPPS GREEN HOSPITAL


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY


CURRAN, BRIAN

Provider ID: 239002

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1710373642

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY

FEJLEH, ASHLEY

Provider ID: 269502

Board Certified Specialty: No

 200 W 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: Y


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY

FUNDINGSLAND, BRENT

Provider ID: 280468

Board Certified Specialty: No

 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY

HYLTON, DIANA

Provider ID: 241735
 Board Certified Specialty: Yes
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY

MEYER, MEGAN

Provider ID: 239607
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY

MILLAR, MELISSA

Provider ID: 201308
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY

NGUYEN, QUOC SY

Provider ID: 242188
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY

OSWALD, JESSICA

Provider ID: 239600
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY








SHAW, SUSANNA

Provider ID: 255316
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY





SORIA, CLAIRE

Provider ID: 243294
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY






SREJIC, UNA

Provider ID: 206383
 Board Certified Specialty: Yes
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273

After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1588723860
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: Stanford Health Care, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, MEDICAL CTR AT UCSF, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY

SUYDAM, STEVEN

Provider ID: 286569
 Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1386856821
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL,

SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
TRI CITY MEDICAL CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP CHULA VISTA MED
CTR, SHARP CHULA VISTA
MED CTR, SHARP CORONADO
HOSP AND HEALTHCARE CTR,
RADY CHILDRENS HOSPITAL
SAN DIEGO, SCRIPPS GREEN
HOSPITAL

Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY

TRIVEDI, SURAJ

Provider ID: 246749
Board Certified Specialty: No
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: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY

TSUDA, PAIGE

Provider ID: 271682
Board Certified Specialty: No
200 W 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY

TULLY, JEFFREY

Provider ID: 283689
Board Certified Specialty: No
200 W 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY

TZENG, ERIC

Provider ID: 284577
Board Certified Specialty: No
200 W 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: Y
Min/Max Age: 0\999

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY

YODER, ANDREA

Provider ID: 272804
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY

YOUNAN, LAWRENCE

Provider ID: 240870
 Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273

After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1922432475
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY PAIN MANAGEMENT

CASTELLANOS, JOEL

Provider ID: 243553
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON

Provider ID: 299880
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\100
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY PAIN MANAGEMENT






DAIRO, BRANDON

Provider ID: 300089
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CARDIOLOGY





ALANI, ANAS

Provider ID: 201252
 Board Certified Specialty: Yes
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CARDIOLOGY








CASTELLANOS, LUIS

Provider ID: 211764
 Board Certified Specialty: No
 330 LEWIS ST FL 3
 SAN DIEGO, CA 92103
 Phone: (858) 657-8530
 Fax: (619) 543-2287
 After Hours Phone: (858) 657-8530
 Provider Gender: Male
 NPI: 1013059286
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL

HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CARDIOLOGY

CASTELLANOS, LUIS

Provider ID: 211765
 Board Certified Specialty: No
 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
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CARDIOLOGY

CRUZ RODRIGUEZ, JOSE

Provider ID: 300061
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CARDIOLOGY

KINGDON, TYLER

Provider ID: 301814
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CARDIOLOGY

MIZZELL, ANNA

Provider ID: 214020
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 245577
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM
 Website: N/A

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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM
 Website: N/A

CARDIOLOGY

PHREANER, NICHOLAS

Provider ID: 239946
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CTR, SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

SHARP CHULA VISTA MED CTR, SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM
 Website: N/A






CARDIOLOGY

SHEREV, DIMITRI

Provider ID: 301306
 Board Certified Specialty: No
 6402 EL CAJON BLVD STE 100 SAN DIEGO, CA 92115
 Phone: (619) 582-4490
 Fax: (519) 582-4737
 After Hours Phone: (619) 582-4490
 Provider Gender: Male
 NPI: 1154323996
 Provider English Spoken: Y
 Provider Language(s) Spoken: Bulgarian, Russian, Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, ALVARADO COMMUNITY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC, SHARP CHULA VISTA MED






CARDIOLOGY

SHEREV, DIMITRI

Provider ID: 302987
 Board Certified Specialty: No
 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, ALVARADO COMMUNITY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC,

CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 295844
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

 Website: N/A

CARDIOLOGY


YEANG, CALVIN


Provider ID: 238822

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CARDIOVASCULAR DISEASE


LERNER, JONATHAN

Provider ID: 303447

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CARDIOVASCULAR DISEASE


PROHASKA, THOMAS

Provider ID: 299912

Board Certified Specialty: No

 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED ACUPUNCTURIST


ARELLANO, JACQUELINE

Provider ID: 277966

Board Certified Specialty: No

 330 LEWIS ST

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1104129485

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED ACUPUNCTURIST


ARELLANO, JACQUELINE

Provider ID: 304138

Board Certified Specialty: No

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1104129485

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 277968

Board Certified Specialty: No

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

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 277967

Board Certified Specialty: No

9333 GENESEE AVE STE
200
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304137

Board Certified Specialty: No

4910 DIRECTORS PL
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED ACUPUNCTURIST

CRAFT, KEVIN

Provider ID: 290942

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 277701

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED ACUPUNCTURIST
JULIAN, FIDES

Provider ID: 277700
Board Certified Specialty: No
📍 9333 GENESEE AVE STE
200
SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1407401128

🗒 Provider English Spoken: Y
🗒 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED ACUPUNCTURIST
JULIAN, FIDES

Provider ID: 304132
Board Certified Specialty: No
📍 200 W 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED ACUPUNCTURIST
JULIAN, FIDES

Provider ID: 277699
Board Certified Specialty: No
📍 330 LEWIS ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1407401128

🗒 Provider English Spoken: Y
🗒 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED ACUPUNCTURIST
JULIAN, FIDES

Provider ID: 304131
Board Certified Specialty: No
📍 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED ACUPUNCTURIST
LAM, KHANH

Provider ID: 295380
Board Certified Specialty: No
📍 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: Y

Min/Max Age: 18\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED ACUPUNCTURIST

SEITZ, GRETCHEN

Provider ID: 246474

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TU

8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

AGUILA, YESENIA

Provider ID: 304624

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

ALBARRAN-SLOVIN, MELODY

Provider ID: 299328

Board Certified Specialty: No

📍 1016 OUTER RD SAN DIEGO, CA 92154

☎ Phone: (619) 429-3733

Fax: (619) 628-5550

☎ After Hours Phone: (619) 429-3733

Provider Gender: Female

NPI: 1740953249

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

ALSTEEN, STEPHANIE

Provider ID: 291389

Board Certified Specialty: No

📍 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

AMOS, MARIA

Provider ID: 291439

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

BAKER, TANYA

Provider ID: 255625

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

BELTRON, KIMBERLY

Provider ID: 302309

Board Certified Specialty: No

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: 1871295493

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

BENARD, ROBERT

Provider ID: 268229

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1184027724

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UNIVERSITY HSP

OF SAN DIEGO CO, Highland

Hospital

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

BILOTTA, NATALIE

Provider ID: 291418

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): After Hours Phone: (858) 279-0925

N

Accessibility: CONTACT PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

BUENROSTRO, CHRISTINA

Provider ID: 243718

Board Certified Specialty: No

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1851749253

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

BUI, ANH

Provider ID: 304273

Board Certified Specialty: No

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

Provider Gender: Male

NPI: 1184309684

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 14\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

BUI, ANH

Provider ID: 304272

Board Certified Specialty: No

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: Y

Min/Max Age: 14\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

**CAMARGO-LOWTHERS,
ANGELICA**

Provider ID: 270981

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

**CAMARGO-LOWTHERS,
ANGELICA**

Provider ID: 54944

Board Certified Specialty: No

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: Y

Min/Max Age: 18\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

**CAMARGO-LOWTHERS,
ANGELICA**

Provider ID: 295914

Board Certified Specialty: No

 8010 FROST ST STE 220
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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


CAPOZZI, JENNIFER

Provider ID: 241031

Board Certified Specialty: No


 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHANTALA, ELIZABETH

Provider ID: 291305

Board Certified Specialty: No

 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


CHAVEZ, ALEXANDRIA

Provider ID: 243357

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHEATHAM, BRITTANY


Provider ID: 291461

Board Certified Specialty: No

 200 W 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: Y
 Min/Max Age: 0\999




American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


 Website: N/A

**CERTIFIED NURSE
 PRACTITIONER**

CHOATE, BERNADETTE



Provider ID: 286369
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N


 Accessibility: CONTACT


PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**CERTIFIED NURSE
 PRACTITIONER**

CHOATE, BERNADETTE


Provider ID: 286368
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


 Hours: M-F
 8:00AM-5:00PM



 Website: N/A

**CERTIFIED NURSE
 PRACTITIONER**


COLEMAN, PAGE

Provider ID: 304288
 Board Certified Specialty: No


 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM
 SA 8:00AM-2:00PM


 Website: N/A

**CERTIFIED NURSE
 PRACTITIONER**

CONNER, PAMELA


Provider ID: 299930
 Board Certified Specialty: No

 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N


 Accessibility: CONTACT

PROVIDER
 Website: N/A

CERTIFIED NURSE
PRACTITIONER
CONNOR, CAROLINE

Provider ID: 279836
 Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE
PRACTITIONER
CONNOR, CAROLINE

Provider ID: 279835
 Board Certified Specialty: No

 16950 VIA TAZON
 SAN DIEGO, CA 92127

 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800)
 926-8273

Provider Gender: Female

NPI: 1609081710

 Provider English Spoken: Y
 Cultural Competency: N


Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE
PRACTITIONER


COSINO, ANJELICA

Provider ID: 201309

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 9:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE
PRACTITIONER
DAVIES, SUMMER

Provider ID: 253692

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM


 Website: N/A

CERTIFIED NURSE
PRACTITIONER
DAVIS, JANET

Provider ID: 255796

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

DE DIOS, SARAH

Provider ID: 300051

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528632742

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Website: N/A


**CERTIFIED NURSE
PRACTITIONER**

DEL VECCHIO, MEGAN

Provider ID: 301726

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


**CERTIFIED NURSE
PRACTITIONER**

DEL VECCHIO, MEGAN

Provider ID: 301725

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


**CERTIFIED NURSE
PRACTITIONER**


DEUTSCH, KAREN

Provider ID: 247981

Board Certified Specialty: No

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1740517127

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

DEUTSCH, KAREN

Provider ID: 247980

Board Certified Specialty: No


 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

DO, ELAINE







Provider ID: 290950
 Board Certified Specialty: No
 4305 UNIVERSITY AVE STE 150
 SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 Fax: (858) 633-4662
 After Hours Phone: (619) 280-2058
 Provider Gender: Female
 NPI: 1215696307
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Y

Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM SA 8:00AM-2:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER


DOAN, ANGELA




Provider ID: 291425
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

DOAN, ANGELA








Provider ID: 291426
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

DRISCOLL, KARRIE

Provider ID: 286345
 Board Certified Specialty: No
 4303 LA JOLLA VILLAGE DR STE 2110
 SAN DIEGO, CA 92122
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1396085098
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

DRISCOLL, SUSAN

Provider ID: 298968
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 12\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 10:00AM-4:00PM
 M-F 8:30AM-5:30PM
 SA 8:00AM-2:30PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

DWYER, ERIN

Provider ID: 269863
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

ECLARINO, GALELEO

Provider ID: 296764
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

ERICKSON, LISA

Provider ID: 287444
 Board Certified Specialty: No

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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

ERICKSON, LISA

Provider ID: 278982
 Board Certified Specialty: No
 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

FELD, KEREN

Provider ID: 297672

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

SA 8:00AM-2:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

FISHER, SLOANE

Provider ID: 301585

Board Certified Specialty: No

3020 CHILDRENS WAY

SAN DIEGO, CA 92123

Phone: (858) 966-8800

Fax: (858) 966-7433

After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1538807003

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSP OF LOS ANGELES

Medi-Cal Open Panel: N

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

GARTH, MELISSA

Provider ID: 274053

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

GIORGI, ASHLEY

Provider ID: 304877

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

SA 8:00AM-2:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

GOMEZ, LESLIE

Provider ID: 299468

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

GOMEZ, LESLIE

Provider ID: 299467

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

GOMEZ, LESLIE

Provider ID: 299466

Board Certified Specialty: No

📍 16950 VIA TAZON

SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☐ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1528578713

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

GUADARRAMA, IGNACIO

Provider ID: 262419

Board Certified Specialty: No

📍 995 GATEWAY CENTER

WAY STE 105

SAN DIEGO, CA 92102

☎ Phone: (619) 264-1934

Fax: (619) 264-1937

☐ After Hours Phone: (619) 264-1934

Provider Gender: Male

NPI: 1821331174

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HA, THU

Provider ID: 293260

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

CERTIFIED NURSE



PRACTITIONER

HA, THU

Provider ID: 293261

Board Certified Specialty: No


📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


HARKNESS, RUMIKO

Provider ID: 208841

Board Certified Specialty: No


 4168 FRONT ST
 SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1487785093

 Provider English Spoken: Y

 Provider Language(s) Spoken: Japanese


Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


HAROUSH, GAL

Provider ID: 302475

Board Certified Specialty: No

 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: Y


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


HEAD, KRISTIN


Provider ID: 268656

Board Certified Specialty: No

 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: Y


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HILL, GENIELYN


Provider ID: 299144

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HILLIARD, THESALONICA

Provider ID: 284022

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TU

8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HOOPER, BONNIE

Provider ID: 275254

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HOOPER, BONNIE

Provider ID: 275255

Board Certified Specialty: No

4060 4TH AVE STE 415 SAN DIEGO, CA 92103

Phone: (619) 298-9809

Fax: (619) 298-9823

After Hours Phone: (619) 298-9809

Provider Gender: Female

NPI: 1821062878

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

IBARRA, MARTHA

Provider ID: 295392

Board Certified Specialty: No

6973 LINDA VISTA RD SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858) 279-0925

Provider Gender: Female

NPI: 1114957289

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Medi-Cal Open Panel: Y

Min/Max Age: 14\999

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 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

IBARRA, MARTHA

Provider ID: 295393


Board Certified Specialty: No

7011 LINDA VISTA RD SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)

810-8700
 Provider Gender: Female
 NPI: 1114957289
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA
 Medi-Cal Open Panel: Y
 Min/Max Age: 14\999
 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 9:00AM-4:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

INSTONE, SUSAN








Provider ID: 293255
 Board Certified Specialty: No
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 Fax: (858) 633-4680
 After Hours Phone: (858)
 810-8700
 Provider Gender: Female
 NPI: 1710223268
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N

Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

INSTONE, SUSAN

Provider ID: 293254
 Board Certified Specialty: No
 4305 UNIVERSITY AVE STE
 150
 SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 Fax: (858) 633-4682
 After Hours Phone: (619)
 280-2058
 Provider Gender: Female
 NPI: 1710223268
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

JONES, CHRISTA





Provider ID: 275563
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER


KEMP, KATHRINE

Provider ID: 301276
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-5:00PM
 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

KI, TRISH

Provider ID: 293293
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

KI, TRISH

Provider ID: 293294
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999



American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

KIDANE, ZINNIA


Provider ID: 302426
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT




PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

KIDANE, ZINNIA

Provider ID: 302427
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

KLEMENCIC, TAHNEE

Provider ID: 302628
 Board Certified Specialty: No
 7910 FROST ST STE 195
 SAN DIEGO, CA 92123
 Phone: (858) 966-8974
 Fax: (858) 966-6721
 After Hours Phone: (858)
 966-8974
 Provider Gender: Female

NPI: 1134802283

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: N

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

LAFORTEZA, JOZELLE


Provider ID: 202666

Board Certified Specialty: No

 9333 GENESEE AVE STE
200

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1538578307

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE

PRACTITIONER


LANE, KIMBERLY

Provider ID: 301600


Board Certified Specialty: No

 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: Y

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE

PRACTITIONER


LANE, KIMBERLY

Provider ID: 301601

Board Certified Specialty: No

 3444 KEARNY VILLA RD
STE 202

SAN DIEGO, CA 92123

 Phone: (858) 429-7646

Fax: (858) 429-7929

 After Hours Phone: (858)
429-7646

Provider Gender: Female

NPI: 1457670119


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

LANE, KIMBERLY

Provider ID: 301603

Board Certified Specialty: No

 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: Y

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

LANE, KIMBERLY

Provider ID: 301597

Board Certified Specialty: No

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: Y

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MANZO, CORINA

Provider ID: 304481

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MARTINEZ, CAROLYN

Provider ID: 293345

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MEDINA, RUBELETA

Provider ID: 296673

Board Certified Specialty: No

9995 CARMEL MOUNTAIN
RD STE B1011
SAN DIEGO, CA 92129

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MENDOZA, GRETTEL MARIE

Provider ID: 303202

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER




Hours: M-TH
8:00AM-6:00PM

Website: N/A


F 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE
PRACTITIONER

MICK, SHARON

Provider ID: 299649
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


 Website: N/A

CERTIFIED NURSE
PRACTITIONER

MICK, SHARON

Provider ID: 299648
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


 Website: N/A

CERTIFIED NURSE
PRACTITIONER

MICK, SHARON

Provider ID: 299647
 Board Certified Specialty: No
 16950 VIA TAZON
 SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273

Provider Gender: Female
 NPI: 1891061966

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR




Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT



PROVIDER
 Website: N/A

CERTIFIED NURSE
PRACTITIONER

MIDORO, ABEGAILLE


Provider ID: 303828
 Board Certified Specialty: No
 9855 ERMA RD STE 105
 SAN DIEGO, CA 92131
 Phone: (844) 200-2426
 Fax: (858) 536-8034
 After Hours Phone: (844)
 200-2426

Provider Gender: Female
 NPI: 1952925851

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Tagalog
 Cultural Competency: N

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-TU
 8:30AM-5:30PM
 W 10:00AM-7:00PM
 TH-F 8:30AM-5:30PM

 Website: N/A

CERTIFIED NURSE
PRACTITIONER

MIDORO, ABEGAILLE

Provider ID: 303829
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TU

8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MILLER, EVA

Provider ID: 255833

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MOHEBBI, ATHENA

Provider ID: 201325

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MORAN, TIFFANY

Provider ID: 304275

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MULVEY, CAOILFHIONN

Provider ID: 291419

Board Certified Specialty: No

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1184386864

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

NEJATI, FRESHTA

Provider ID: 214112

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

NETZEL, JENNIFER

Provider ID: 291347

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

NETZEL, JENNIFER

Provider ID: 291348

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

NETZEL, JENNIFER

Provider ID: 291346

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

NOVENO, HILARIO

Provider ID: 286911

Board Certified Specialty: No

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: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

NOVENO, HILARIO

Provider ID: 286912


Board Certified Specialty: No

4168 FRONT ST

SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1124486865

 Provider English Spoken: Y


 Provider Language(s)
 Spoken: Tagalog


Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

O'CONNELL, STEFANY

Provider ID: 296846

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

OREJEL, EDITH

Provider ID: 296716

Board Certified Specialty: No

 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111

 Phone: (858) 279-0925
 Fax: (858) 633-4680

 After Hours Phone: (858) 279-0925

Provider Gender: Female


NPI: 1073278180

 Provider English Spoken: Y
 Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

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 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

OREJEL, EDITH

Provider ID: 296715

Board Certified Specialty: No

 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111

 Phone: (858) 810-8700
 Fax: (858) 633-4680

 After Hours Phone: (858) 810-8700

Provider Gender: Female

NPI: 1073278180

 Provider English Spoken: Y
 Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

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 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


ORPILLA, IMELDA

Provider ID: 282962

Board Certified Specialty: No



 10737 CAMINO RUIZ STE
 235

 SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 Fax: (858) 578-4417

 After Hours Phone: (844) 200-2426

Provider Gender: Female

NPI: 1790785988

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): PAI, SARAH

N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU 8:30AM-5:30PM
 W 8:30AM-7:00PM
 TH-F 8:30AM-5:30PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

ORPILLA, IMELDA

Provider ID: 243506
 Board Certified Specialty: No
 9995 CARMEL MOUNTAIN RD STE B10-B11
 SAN DIEGO, CA 92129
 Phone: (214) 590-5306
 Fax: (858) 240-6470
 After Hours Phone: (214) 590-5306
 Provider Gender: Female
 NPI: 1790785988
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog

Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU 8:30AM-5:30PM
 W 10:00AM-7:00PM
 TH-F 8:30AM-5:30PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

Provider ID: 276870
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL

Provider ID: 293248
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL

Provider ID: 293249
 Board Certified Specialty: No
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 Fax: (858) 633-4680
 After Hours Phone: (858) 810-8700
 Provider Gender: Male
 NPI: 1073169769
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog

Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

PEREZ, ALLYSSA
 Provider ID: 286222

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

PEREZ, ALLYSSA

Provider ID: 286223

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

PEREZ, ALLYSSA

Provider ID: 304162

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

PETTIS, BETH

Provider ID: 286878

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

POPE, KATILYNN

Provider ID: 303129

Board Certified Specialty: No

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: 1174232748

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

PRUETT, ZHIKE

Provider ID: 76608

Board Certified Specialty: No

4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Phone: (619) 299-2350

After Hours Phone: (619)
299-2350

Provider Gender: Female

NPI: 1295086262

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 18\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

PRUETT, ZHIKE

Provider ID: 295975

Board Certified Specialty: No

4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Phone: (619) 299-2350

After Hours Phone: (619)

299-2350

Provider Gender: Female
NPI: 1295086262

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

QUINTO, CINDY

Provider ID: 293264

Board Certified Specialty: No

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: 1902810377

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Lao,
Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

PROVIDER

Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

QUINTO, CINDY

Provider ID: 293265

Board Certified Specialty: No

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: 1902810377

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Lao,
Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

RAJAEI, NILOUFAR

Provider ID: 291437

Board Certified Specialty: No

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1275904047

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A


CERTIFIED NURSE PRACTITIONER

RANDLE, CARRIE

Provider ID: 299296

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800
Fax: (858) 966-7433

 After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1558557348


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: NAVAL MEDICAL CTR SD RBE, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: N

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A


CERTIFIED NURSE PRACTITIONER


RIEGO, SUZANNE

Provider ID: 214477

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

ROBERTSON, RACHAEL

Provider ID: 286940

Board Certified Specialty: No

 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

RODENMEYER, EVE

Provider ID: 295956

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105


 Phone: (619) 280-2058
Fax: (858) 633-4682

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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE PRACTITIONER

ROSCOE, SYDNEY

Provider ID: 305038

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

ROSCOE, SYDNEY

Provider ID: 305039

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

ROSCOE, SYDNEY

Provider ID: 305037

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

ROSS, CRYSTAL

Provider ID: 287763

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

ROSS, CRYSTAL

Provider ID: 302559


Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

SA 8:00AM-2:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

ROSSI, CATHERINE

Provider ID: 291445

Board Certified Specialty: No

📍 200 W 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: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

ROZO, JOSE

Provider ID: 300037

Board Certified Specialty: No

📍 200 W 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: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

SABIN, NANCY

Provider ID: 293287

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

SABIN, NANCY

Provider ID: 293288

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

SAMPSON, ANDRIECE

Provider ID: 303282

Board Certified Specialty: No

📍 2630 1ST AVE
SAN DIEGO, CA 92103
☎ Phone: (619) 234-2158
☎ Fax: (619) 234-0505

🕒 After Hours Phone: (619) 234-2158

Provider Gender: Female
NPI: 1619594124

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

SANTANGELO, JOANNE

Provider ID: 293285

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 293286

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

SATTERWHITE, MAURINE

Provider ID: 293258

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

SATTERWHITE, MAURINE

Provider ID: 293259

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

SEARS-WILEY, ELIZABETH

Provider ID: 276851

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

SELBY, BLAKE

Provider ID: 256646

Board Certified Specialty: No

📍 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

SELBY, BLAKE

Provider ID: 246423
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

SENA, TIFFANY

Provider ID: 300229
 Board Certified Specialty: No
 550 WASHINGTON ST STE
 300
 SAN DIEGO, CA 92103
 Phone: (619) 297-5437
 Fax: (619) 297-4567
 After Hours Phone: (619)
 297-5437

Provider Gender: Female
 NPI: 1710539523
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL
 Medi-Cal Open Panel: N
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH
 8:00AM-8:00PM
 F 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

SWARTZ, ERIN

Provider ID: 255787



Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

TAING, JENNIFER




Provider ID: 201573
 Board Certified Specialty: No
 4168 FRONT ST
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1649528357
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 UNIVERSITY OF CALIFORNIA
 IRVINE MED CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A




CERTIFIED NURSE

PRACTITIONER

TALBOT, ADRIANNE

Provider ID: 278183
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N


 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER


TIMBERMAN, SARAH

Provider ID: 295361
 Board Certified Specialty: No
 3030 CHILDRENS WAY FL
 2
 SAN DIEGO, CA 92123

 Phone: (858) 966-4003
 Fax: (858) 560-6798


 After Hours Phone: (858)
 966-4003

Provider Gender: Female
 NPI: 1144614066

 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A



CERTIFIED NURSE

PRACTITIONER

TONJES, ERIKA

Provider ID: 298018
 Board Certified Specialty: No
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 279-9676
 Fax: (858) 633-4680
 After Hours Phone: (858)
 279-9676

Provider Gender: Female
 NPI: 1205540812

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE



PRACTITIONER

TONJES, ERIKA

Provider ID: 298019
 Board Certified Specialty: No
 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: 1205540812

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish

Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A





CERTIFIED NURSE

PRACTITIONER

TOPPEN, LAURA

Provider ID: 215477
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A


CERTIFIED NURSE




PRACTITIONER

TURNER, ELIZABETH

Provider ID: 255601
 Board Certified Specialty: No
 4510 EXECUTIVE DR STE
 315
 SAN DIEGO, CA 92121
 Phone: (858) 534-8019
 After Hours Phone: (858)
 534-8019




Provider Gender: Female
 NPI: 1326570045

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):


N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A




CERTIFIED NURSE

PRACTITIONER

VIBAL-POASTER, MARIA
 Provider ID: 205651
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE



PRACTITIONER

VILLALOBOS, REBECA

Provider ID: 294770
 Board Certified Specialty: No
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 Fax: (619) 515-2510
 After Hours Phone: (619)
 515-2300

Provider Gender: Female
 NPI: 1184224396




 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A



CERTIFIED NURSE

PRACTITIONER

VILLALOBOS, REBECA

Provider ID: 294769
 Board Certified Specialty: No
 823 GATEWAY CENTER
 WAY
 SAN DIEGO, CA 92102
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300

Provider Gender: Female
 NPI: 1184224396

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish




Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-5:30PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

WALDRUP, LA'RHONDA

Provider ID: 299260
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A





**CERTIFIED NURSE
 PRACTITIONER**




WOO, ANDY
 Provider ID: 299916
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

**CERTIFIED NURSE
 PRACTITIONER**



YEO, ALEXANDRIA
 Provider ID: 299941
 Board Certified Specialty: No
 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: 1902368319
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

**CERTIFIED REGISTERED
 NURSE ANESTHETIST**

ALFONSO, ALVIN
 Provider ID: 256374
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**CERTIFIED REGISTERED
 NURSE ANESTHETIST**

AMADOR, LINDSAY
 Provider ID: 291388
 Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1003556184
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

**CERTIFIED REGISTERED
 NURSE ANESTHETIST**

APPLEGET, JOSEPH
 Provider ID: 239602
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A


**CERTIFIED REGISTERED
 NURSE ANESTHETIST**



BARBA, ARNEL
 Provider ID: 262186
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

CERTIFIED REGISTERED








NURSE ANESTHETIST
BAYLIS, CHRISTOPHER
 Provider ID: 240763
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**CERTIFIED REGISTERED
 NURSE ANESTHETIST**



BILLINGTON, KATHERINE
 Provider ID: 262246
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Website: N/A

**CERTIFIED REGISTERED
 NURSE ANESTHETIST**

BOEING, KRISTINA
 Provider ID: 274397
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**CERTIFIED REGISTERED
 NURSE ANESTHETIST**

BURROWS, TERENCE
 Provider ID: 256694
 Board Certified Specialty: No
 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

DOLLAND, STEVEN

Provider ID: 280552

Board Certified Specialty: No

📍 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

FERRITER, STACY

Provider ID: 265295

Board Certified Specialty: No

📍 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

GARCIA, CALVIN

Provider ID: 217365

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

926-8273

Provider Gender: Male

NPI: 1427419944

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

GONZALEZ, LISA

Provider ID: 299905

Board Certified Specialty: No

📍 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

POLIKOWSKI, SAMANTHA

Provider ID: 291444

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

RAMIREZ, NICOLE

Provider ID: 291404

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

SACKS, BRENT

Provider ID: 278003

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

VINCENT, BERLIN

Provider ID: 291454

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

CHOI, NATHALIE

Provider ID: 301714

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED REGISTERED


NURSE MIDWIFE

CHOI, NATHALIE

Provider ID: 301715

Board Certified Specialty: No

 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED REGISTERED


NURSE MIDWIFE

EKHOLM, JANNA

Provider ID: 290584

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED REGISTERED


NURSE MIDWIFE


GOODWIN, RACHEL

Provider ID: 210018

Board Certified Specialty: No



 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1518274919

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


GOODWIN, RACHEL

Provider ID: 210019

Board Certified Specialty: No



 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED REGISTERED

NURSE MIDWIFE


GREAR MANN, MELISSA

Provider ID: 210053




Board Certified Specialty: No

 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: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

**CERTIFIED REGISTERED
NURSE MIDWIFE**




GREAR MANN, MELISSA
Provider ID: 210052
Board Certified Specialty: No

 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: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

**CERTIFIED REGISTERED
NURSE MIDWIFE**




GUNTHER, HOPE
Provider ID: 210041
Board Certified Specialty: No

 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: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




**CERTIFIED REGISTERED
NURSE MIDWIFE**

HIRSCH, JENNIFER
Provider ID: 210058
Board Certified Specialty: No

 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: Y



Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

**CERTIFIED REGISTERED
NURSE MIDWIFE**




HIRSCH, JENNIFER
Provider ID: 210055
Board Certified Specialty: No

 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

**CERTIFIED REGISTERED
NURSE MIDWIFE**

HIRSCH, JENNIFER
Provider ID: 210054
Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CERTIFIED REGISTERED


NURSE MIDWIFE

NATHAN, CARLY

Provider ID: 301047
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A





CERTIFIED REGISTERED

NURSE MIDWIFE

NATHAN, CARLY
 Provider ID: 301048
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CERTIFIED REGISTERED








NURSE MIDWIFE

PERDION, KAREN
 Provider ID: 210134
 Board Certified Specialty: No
 4168 FRONT ST
 SAN DIEGO, CA 92103
 Phone: (619) 543-7878
 Fax: (619) 543-2366
 After Hours Phone: (619) 543-7878
 Provider Gender: Female
 NPI: 1518916857
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

PERDION, KAREN
 Provider ID: 210137
 Board Certified Specialty: No
 16950 VIA TAZON
 SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1518916857
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CHIROPRACTOR

BUI, MAI

Provider ID: 289496
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M 9:00AM-6:00PM
 W 9:00AM-6:00PM
 F 9:00AM-2:00PM
 Website: N/A

CHIROPRACTOR

BUI, MAI

Provider ID: 125052
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F

9:00AM-5:00PM
 Website: N/A

CHIROPRACTOR

BUI, MAI

Provider ID: 295791
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A

CHIROPRACTOR

CASTRO, DAVID

Provider ID: 293322
 Board Certified Specialty: No
 1016 OUTER RD
 SAN DIEGO, CA 92154
 Phone: (619) 429-3733
 Fax: (619) 628-5550
 After Hours Phone: (619)
 429-3733
 Provider Gender: Male
 NPI: 1841557733

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CHIROPRACTOR

GILIBERTO, JOSEPH

Provider ID: 291547
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CHIROPRACTOR

GILIBERTO, JOSEPH

Provider ID: 291546
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CHIROPRACTOR

LUU, DANIEL

Provider ID: 269883
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 10:00AM-6:00PM
 TU 10:00AM-2:00PM
 W 10:00AM-6:00PM
 TH 10:00AM-2:00PM
 F 10:00AM-6:00PM
 Website: N/A

CHIROPRACTOR

ROBINSON, DEAN

Provider ID: 300848
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM
 Website: N/A

CHIROPRACTOR

ROBINSON, DEAN

Provider ID: 300847
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM
 Website: N/A

DERMATOLOGY

CALAME, ANTOANELLA


Provider ID: 290301
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


DERMATOLOGY

FABRIKANT, JORDAN

Provider ID: 262275

Board Certified Specialty: No

 4060 4TH AVE STE 415
SAN DIEGO, CA 92103

 Phone: (619) 298-9809
Fax: (619) 298-9823

 After Hours Phone: (619)
298-9809

Provider Gender: Male

NPI: 1649585753

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM


 Website: N/A

DERMATOLOGY


KANNAN, SWATI


Provider ID: 286287

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


DERMATOLOGY

KAUNITZ, GENEVIEVE

Provider ID: 285011

Board Certified Specialty: No


 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


DERMATOLOGY


KOZMA, BONITA

Provider ID: 269301

Board Certified Specialty: No


 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):



N


 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

DERMATOLOGY




SHI, VERONICA

Provider ID: 271713
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

DERMATOLOGY

SHI, VERONICA

Provider ID: 286335
Board Certified Specialty: No
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)

926-8273
Provider Gender: Female
NPI: 1366897464
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

DERMATOLOGY

SINGH, GAURAV

Provider ID: 272612
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):


N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE




AMANN, CHRISTOPHER

Provider ID: 270913
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1134326895

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, USC
KENNETH NORRIS JR CANCER
HOSPITAL, KECK HOSPITAL OF
USC, USC VERDUGO HILLS
HOSPITAL

Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

AUSTIN, ANDREA

Provider ID: 269291

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

BAGBY, JESSICA

Provider ID: 271136

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

BARRY, JEFFREY

Provider ID: 271130

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

BARRY, JEFFREY

Provider ID: 271132

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

BARRY, JEFFREY

Provider ID: 271129

Board Certified Specialty: No

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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N



 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE
BELLINGHAUSEN, AMY

Provider ID: 270333
 Board Certified Specialty: No
 4520 EXECUTIVE DR STE
 P2
 SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1801206354


 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CORONADO HOSP AND
 HEALTHCARE CTR, SHARP
 MEMORIAL HOSPITAL, UCSD
 LA JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR

Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER




 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE
BELLINGHAUSEN, AMY


Provider ID: 270336
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A


EMERGENCY MEDICINE
BELLINGHAUSEN, AMY

Provider ID: 270334
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE
CASTELLANO, TIFFANY

Provider ID: 301706
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

EMERGENCY MEDICINE

CASTELLANO, TIFFANY

Provider ID: 279314
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

CHEN, ALICE

Provider ID: 287430
 Board Certified Specialty: No
 16950 VIA TAZON
 SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1427476597

Provider English Spoken: Y
 Provider Language(s) Spoken: Mandarin
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

CHEN, ALICE

Provider ID: 287428
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

Hours: M-F
 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

COLLINS, CATHLEEN

Provider ID: 285133
 Board Certified Specialty: No
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 NPI: 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

EMERGENCY MEDICINE

COYNE, CHRISTOPHER


Provider ID: 303036
 Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

GUITTARD, JESSE



Provider ID: 239879

Board Certified Specialty: No

 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM



 Website: N/A


EMERGENCY MEDICINE

HERNANDEZ, CRISTINA

Provider ID: 242544


Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM



 Website: N/A

EMERGENCY MEDICINE

HOGUE, BRENNIA

Provider ID: 301711

Board Certified Specialty: No

 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Website: N/A


EMERGENCY MEDICINE

HORNBEAK, KIRSTEN

Provider ID: 240022

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

KUTZ, CRAIG

Provider ID: 283845
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

LIOTTA, BENJAMIN

Provider ID: 285630
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-8:00PM
 Website: N/A

EMERGENCY MEDICINE

MCDANIEL, MICHELE

Provider ID: 246901
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

MUELLER, MATTHEW

Provider ID: 280657
 Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

Provider Gender: Male
 NPI: 1003355629
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON, EL
 CENTRO REGIONAL MEDICAL
 CENTER

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

NOSTE, ERIN

Provider ID: 239797
 Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (619) 543-6400

☎ After Hours Phone: (619) 543-6400

Provider Gender: Female

NPI: 1871732214

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

EMERGENCY MEDICINE

NOSTE, ERIN

Provider ID: 239798

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: SU

8:00AM-10:00PM

M-F 8:00AM-5:00PM

SA 8:00AM-10:00PM

🌐 Website: N/A

EMERGENCY MEDICINE

PARK, JAY

Provider ID: 285607

Board Certified Specialty: No

📍 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

EMERGENCY MEDICINE

PHAM, LILY

Provider ID: 304937

Board Certified Specialty: No

📍 3020 CHILDRENS WAY

SAN DIEGO, CA 92123

☎ Phone: (858) 966-8800

Fax: (858) 966-7433

☎ After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1811423072

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

EMERGENCY MEDICINE

PHAM, LILY

Provider ID: 304933

Board Certified Specialty: No

📍 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM
 M-F 4:00PM-10:00PM
 SA 1:00PM-10:00PM
 Website: N/A

EMERGENCY MEDICINE

RUDOLF, FRANCES

Provider ID: 240159
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

SABHA, MAHMOUD

Provider ID: 243441
 Board Certified Specialty: No
 16950 VIA TAZON
 SAN DIEGO, CA 92127

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1457747883
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

SLOANE, CHRISTIAN

Provider ID: 209518
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

TANAKA, HIDEAKI

Provider ID: 240124
 Board Certified Specialty: No
 16950 VIA TAZON
 SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1124280730

Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: EL CENTRO
 REGIONAL MEDICAL CENTER,
 Sharp Grossmont Hospital
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 8:00AM-8:00PM
 M-F 8:00AM-5:00PM
 SA 8:00AM-8:00PM
 Website: N/A

EMERGENCY MEDICINE

YOU, ALAN

Provider ID: 269936
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

YU, ELAINE









Provider ID: 301708
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT

PROVIDER
 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

BOEDER, SCHAFFER

Provider ID: 255611
 Board Certified Specialty: No
 4168 FRONT ST
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1477808285
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PROVIDER
 Website: N/A

PROVIDER
 Website: N/A




PROVIDER
 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

EKANAYAKE, PREETHIKA

Provider ID: 284813
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

EKANAYAKE, PREETHIKA

Provider ID: 284812
 Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1083922462
 Provider English Spoken: Y
 Provider Language(s) Spoken: Sinhala, Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL


CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY


METABOLISM DIABETES

GUERIN, CHRIS

Provider ID: 284646

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1275648875

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, UCSD MEDICAL


CTR, UCSD LA JOLLA JOHN
SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ENDOCRINOLOGY

METABOLISM DIABETES

JUANG, PATRICIA

Provider ID: 255605


Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ENDOCRINOLOGY


METABOLISM DIABETES

KULASA, KRISTEN

Provider ID: 255622

Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY


METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 287781

Board Certified Specialty: No

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1720474141


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 287780
 Board Certified Specialty: No
 330 LEWIS ST
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273

Provider Gender: Female
 NPI: 1720474141
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ENDOCRINOLOGY
METABOLISM DIABETES
NAGELBERG, JODI

Provider ID: 287782
 Board Certified Specialty: No
 9909 MIRA MESA BLVD
 STE 200
 SAN DIEGO, CA 92131
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

Provider Gender: Female
 NPI: 1720474141
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ENDOCRINOLOGY
METABOLISM DIABETES

NAGELBERG, JODI
 Provider ID: 287779
 Board Certified Specialty: No
 8899 UNIVERSITY CENTER
 LN
 SAN DIEGO, CA 92122
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

Provider Gender: Female
 NPI: 1720474141
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ENDOCRINOLOGY
METABOLISM DIABETES

SANTOS CAVAIOLA, TRICIA
 Provider ID: 256091
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ENDOCRINOLOGY
METABOLISM DIABETES

TANTISIRA, LALITA
 Provider ID: 286323
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY
METABOLISM DIABETES


VALDEZ, KRYSTAL

Provider ID: 299363

Board Certified Specialty: No

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126


 Phone: (844) 200-2426


Fax: (858) 578-4417

 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1629480272

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TWIN

CITIES COMMUNITY

HOSPITAL, SIERRA VISTA

REGIONAL MED CTR,


PARADISE VALLEY HOSPITAL


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY
METABOLISM DIABETES

VALDEZ, KRYSTAL


Provider ID: 299743

Board Certified Specialty: No


 10737 CAMINO RUIZ STE

235

SAN DIEGO, CA 92126


 Phone: (844) 200-2426

Fax: (858) 578-4417

 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1629480272

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TWIN

CITIES COMMUNITY

HOSPITAL, SIERRA VISTA

REGIONAL MED CTR,

PARADISE VALLEY HOSPITAL


Medi-Cal Open Panel: Y

Min/Max Age: 18\100

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL


Provider ID: 301761

Board Certified Specialty: No

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113


 Phone: (619) 662-4100

Fax: (619) 595-0258

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1588197826

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, PARADISE VALLEY

HOSPITAL


Medi-Cal Open Panel: Y


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

 Website: N/A


FAMILY PRACTICE

BELL, TRACY


Provider ID: 304813

Board Certified Specialty: No

 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: Y

Min/Max Age: 14\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM

 Website: N/A

FAMILY PRACTICE

BELL, TRACY

Provider ID: 304814
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 14\999
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM
 Website: N/A

FAMILY PRACTICE

BERNADETT, ALEX

Provider ID: 296739
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\99

American Sign Language (ASL): Fax: (619) 662-4158

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

FAMILY PRACTICE

BERNADETT, ALEX

Provider ID: 296740
 Board Certified Specialty: No
 10505 SORRENTO VALLEY RD STE 200
 SAN DIEGO, CA 92121
 Phone: (858) 793-7860
 Fax: (858) 436-1289
 After Hours Phone: (858) 793-7860

Provider Gender: Male
 NPI: 1215382841
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\99

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

FAMILY PRACTICE

CAMPBELL, BRIANNA

Provider ID: 298950
 Board Certified Specialty: No
 950 S EUCLID AVE
 SAN DIEGO, CA 92114
 Phone: (619) 662-4100


After Hours Phone: (619) 662-4100
 Provider Gender: Female
 NPI: 1316479892
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: CHULA VISTA COMM HOSP
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 10:00AM-4:00PM M-F 8:30AM-5:30PM SA 8:00AM-2:30PM
 Website: N/A

FAMILY PRACTICE

CHEN, ALICE

Provider ID: 207163
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

FAMILY PRACTICE




CHEN, ALICE

Provider ID: 207164
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

FAMILY PRACTICE




CHEN, ALICE

Provider ID: 207167
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N



 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

FAMILY PRACTICE


HILL, LINDA

Provider ID: 293210
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):



N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:30AM-5:30PM
 Website: N/A

FAMILY PRACTICE

HILL, LINDA



Provider ID: 293211
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Website: N/A

FAMILY PRACTICE

JOHN, TANNER







Provider ID: 303515
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

FAMILY PRACTICE







JOLICOEUR, MEGAN

Provider ID: 300057
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

FAMILY PRACTICE


JOLICOEUR, MEGAN

Provider ID: 300060

Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

FAMILY PRACTICE

JOLICOEUR, MEGAN

Provider ID: 300058
 Board Certified Specialty: No
 9333 GENESEE AVE
 SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1114366192
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

FAMILY PRACTICE

JOLICOEUR, MEGAN

Provider ID: 300059

Board Certified Specialty: No
 9909 MIRA MESA BLVD
 STE 200
 SAN DIEGO, CA 92131
 Phone: (800) 926-8273
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1114366192
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

FAMILY PRACTICE

KUROSAKA, MOMO

Provider ID: 291447
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

FAMILY PRACTICE

KUROSAKA, MOMO

Provider ID: 291448

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

FAMILY PRACTICE

MCLAUGHLIN, ERIK

Provider ID: 303847

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

PERESS, LILIA

Provider ID: 304277

Board Certified Specialty: No

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: Y

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

PERESS, LILIA

Provider ID: 304276

Board Certified Specialty: No

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: Y

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

RISSEY, JOSEPH

Provider ID: 293216

Board Certified Specialty: Yes

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

FAMILY PRACTICE

RISSER, JOSEPH

Provider ID: 293217

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

FAMILY PRACTICE

ROSADO, IVAN

Provider ID: 299244

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

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

FAMILY PRACTICE

SCOTT, LAGINA

Provider ID: 302648

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

SUMMERS-DAY, COURTNEY

Provider ID: 290976

Board Certified Specialty: Yes

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

FAMILY PRACTICE

VAN PRATT LEVIN, BENJAMIN

Provider ID: 302531

Board Certified Specialty: No

1016 OUTER RD
SAN DIEGO, CA 92154

Phone: (619) 429-3733

Fax: (619) 328-5550

After Hours Phone: (619)
429-3733

Provider Gender: Male

NPI: 1619438330

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIONEERS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

VO, PHU LUONG

Provider ID: 303332

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**FAMILY PRACTICE GERIATRIC
MEDICINE**

MILLER, SCOTT

Provider ID: 271539

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

GASTROENTEROLOGY

ANAND, GOBIND

Provider ID: 272837

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

GASTROENTEROLOGY

ANAND, GOBIND

Provider ID: 304187

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

GASTROENTEROLOGY

BAUMAN, LAURA

Provider ID: 260041

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A



GASTROENTEROLOGY

DAVE, SHRAVAN

Provider ID: 270450
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

GASTROENTEROLOGY

DAVE, SHRAVAN

Provider ID: 304204
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A



GASTROENTEROLOGY





HASAN, AWS

Provider ID: 299951
 Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1780047597
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A

GASTROENTEROLOGY


HILDRETH, AMBER




Provider ID: 280464
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

GASTROENTEROLOGY







KUMAR, SOMA

Provider ID: 205377
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

GASTROENTEROLOGY











NOVO, MEGAN

Provider ID: 296066
 Board Certified Specialty: No
 292 EUCLID AVE STE 115
 SAN DIEGO, CA 92114
 Phone: (619) 266-3332
 Fax: (619) 266-6006
 After Hours Phone: (619)
 266-3332
 Provider Gender: Female
 NPI: 1770961971
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR, UNIVERSITY OF
 CALIFORNIA IRVINE MED CTR,
 PARADISE VALLEY HOSPITAL,
 TRI CITY MEDICAL CTR,
 SCRIPPS MEMORIAL
 HOSPITAL ENCINITAS,
 SCRIPPS MERCY HOSPITAL,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

GASTROENTEROLOGY

POLK, DAVID

Provider ID: 275449
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A
GASTROENTEROLOGY
REDDY, JOSEPH
 Provider ID: 27748
 Board Certified Specialty: Yes
 6699 ALVARADO RD STE
 2301
 SAN DIEGO, CA 92120
 Phone: (619) 588-4074
 Fax: (619) 588-4004
 After Hours Phone: (619)
 588-4074

Provider Gender: Male
 NPI: 1245215391
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Hindi, Spanish,
 Telugu
 Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL, UCSD
 MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

GASTROENTEROLOGY

REDDY, JOSEPH

Provider ID: 290034
 Board Certified Specialty: Yes
 6699 ALVARADO RD STE
 2301
 SAN DIEGO, CA 92120
 Phone: (619) 588-4074
 Fax: (619) 588-4004
 After Hours Phone: (619)
 588-4074
 Provider Gender: Male
 NPI: 1245215391
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Hindi, Spanish,
 Telugu
 Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL, UCSD
 MEDICAL CTR
 Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

GASTROENTEROLOGY

SHAFFER, KATHERINE

Provider ID: 295712

Board Certified Specialty: No

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Phone: (619) 266-3332
Fax: (619) 266-6000

After Hours Phone: (619)
266-3332

Provider Gender: Female

NPI: 1336405695

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PARADISE
VALLEY HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

GASTROENTEROLOGY

SHAH, SHAILJA

Provider ID: 304178

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

GASTROENTEROLOGY

SHAH, SHAILJA

Provider ID: 283896

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 18\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

GASTROENTEROLOGY

TSAI, MATTHEW

Provider ID: 304196

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A






GASTROENTEROLOGY

YOUSSEF, FADY

Provider ID: 300024

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1265887723
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

GASTROENTEROLOGY









YOUSSEF, FADY

Provider ID: 304186
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

GENERAL PRACTICE





BORRERO, MARCOS


Provider ID: 125077

Board Certified Specialty: No
 3490 PALM AVE
 SAN DIEGO, CA 92154
 Phone: (619) 423-5616
 Fax: (619) 423-5684
 After Hours Phone: (619) 423-5616
 Provider Gender: Male
 NPI: 1952312621
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
 Medi-Cal Open Panel: Y
 Min/Max Age: 2\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

GENETICS CLINICAL








REIMERS, REBECCA

Provider ID: 294650
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

GENETICS CLINICAL

REIMERS, REBECCA

Provider ID: 302348
 Board Certified Specialty: No
 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: N
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

GENETICS MEDICAL

DEL CAMPO CASANELLES,

MIGUEL

Provider ID: 206013

Board Certified Specialty: No

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: 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

GENETICS MEDICAL

MARDACH, REBECCA

Provider ID: 241946

Board Certified Specialty: No

7920 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 966-5840

After Hours Phone: (858)
966-5840

Provider Gender: Female

NPI: 1457330607

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RONALD
REAGAN UCLA MED CTR, UC
DAVIS MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

HEARING AID DEALER /

SUPPLIER

ANDERSON, ELAINE

Provider ID: 268691

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

HEARING AID DEALER /
SUPPLIER

ANDERSON, ELAINE

Provider ID: 268689

Board Certified Specialty: No

6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120

Phone: (619) 583-7002

Fax: (619) 583-9404

After Hours Phone: (619)
583-7002

Provider Gender: Female

NPI: 1063558856

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

HEARING AID DEALER /

SUPPLIER

DAVIS, KELLE

Provider ID: 268653

Board Certified Specialty: No

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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-5:00PM
 Website: N/A

**HEARING AID DEALER /
 SUPPLIER**







DAVIS, KELLE
 Provider ID: 268652
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-5:00PM
 Website: N/A

HEMATOLOGY / ONCOLOGY







CHEN, YU-WEI
 Provider ID: 303059
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

HEMATOLOGY / ONCOLOGY

LEE, KAREN
 Provider ID: 284165
 Board Certified Specialty: No
 3010 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123
 Phone: (858) 966-5811
 Fax: (858) 966-8035
 After Hours Phone: (858)
 966-5811
 Provider Gender: Female
 NPI: 1518352970
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

HEMATOLOGY / ONCOLOGY

NGUYEN, ANTHONY
 Provider ID: 301060
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

HEMATOLOGY / ONCOLOGY

PAUL, MEGAN
 Provider ID: 274499
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

HEMATOLOGY / ONCOLOGY

SCHWERKOSKE, JOHN
 Provider ID: 298655
 Board Certified Specialty: No
 3965 5TH AVE STE 230
 SAN DIEGO, CA 92103
 Phone: (619) 872-0953
 Fax: (619) 378-3162
 After Hours Phone: (619)
 872-0953
 Provider Gender: Male
 NPI: 1912260829
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 METHODIST HOSP OF
 SACRAMENTO, MERCY SAN
 JUAN MEDICAL CENTER,
 MERCY GENERAL HOSPITAL,
 CITY OF HOPE NATIONAL
 MED CTR, MERCY HOSPITAL
 OF FOLSOM, UC DAVIS
 MEDICAL CTR, WOODLAND
 MEMORIAL HOSP,
 WOODLAND MEMORIAL
 HOSP, LOMA LINDA
 UNIVERSITY MED CTR
 MURRIETA, Hemet Valley
 Medical Center
 Medi-Cal Open Panel: Y

Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A

HEMATOLOGY / ONCOLOGY

VU, PETER
 Provider ID: 272716
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

HEMATOLOGY / ONCOLOGY

ZHOU, JENNY
 Provider ID: 273188
 Board Certified Specialty: No

9333 GENESEE AVE STE
 310
 SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1598007924
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**HOSPICE AND PALLIATIVE
 MEDICINE**

RUBENZI, TAMARA
 Provider ID: 245573
 Board Certified Specialty: No
 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

**HOSPICE AND PALLIATIVE
MEDICINE**

RUBENZIK, TAMARA

Provider ID: 276671

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

INFECTIOUS DISEASE

ALDOUS, JEANNETTE

Provider ID: 290420

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

INFECTIOUS DISEASE

BAMFORD, LAURA

Provider ID: 276546

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

INFECTIOUS DISEASE

DEISS, ROBERT

Provider ID: 258330

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

INFECTIOUS DISEASE

HORTON, LUCY

Provider ID: 240887

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INFECTIOUS DISEASE

KUPPALLI, KRUTIKA

Provider ID: 301058

Board Certified Specialty: No

200 W 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
MEDICAL CTR, Stanford Health
Care, STANFORD HEALTH
CARE TRI-VALLEY

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

INFECTIOUS DISEASE

MARTIN, THOMAS

Provider ID: 277226

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INFECTIOUS DISEASE

MARTIN, THOMAS

Provider ID: 277225

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INFECTIOUS DISEASE

MOODLEY, AMARAN

Provider ID: 208558

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

 Website: N/A

INFECTIOUS DISEASE


PANNARAJ, PIA

Provider ID: 301026

Board Certified Specialty: No

 3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123


 Phone: (858) 966-7785

Fax: (858) 966-8658

 After Hours Phone: (858) 966-7785

Provider Gender: Female

NPI: 1942478524

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS ANGELES, HOLLYWOOD

PRESBYTERIAN MED CTR,

RADY CHILDRENS HOSPITAL

SAN DIEGO


Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A

INFECTIOUS DISEASE

PROMER, KATHERINE

Provider ID: 258545

Board Certified Specialty: No

 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: 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


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A

INFECTIOUS DISEASE


RAJAGOPAL, AMUTHA


Provider ID: 221088

Board Certified Specialty: No

 4168 FRONT ST FL 3


SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1124465745

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A

INFECTIOUS DISEASE

RAMIREZ SANCHEZ, CLAUDIA

Provider ID: 299946

Board Certified Specialty: No

 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

INFECTIOUS DISEASE

TOVAR PADUA, LEIDY

Provider ID: 205357

Board Certified Specialty: No

 3030 CHILDRENS WAY FL

2

SAN DIEGO, CA 92123
 Phone: (858) 966-7785
 Fax: (858) 966-8658
 After Hours Phone: (858) 966-7785
 Provider Gender: Female
 NPI: 1033491311
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSP OF LOS ANGELES, LONG BEACH MEMORIAL MED CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

INFECTIOUS DISEASE

TOVAR PADUA, LEIDY
 Provider ID: 265093
 Board Certified Specialty: No
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 NPI: 1033491311
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSP OF

LOS ANGELES, LONG BEACH MEMORIAL MED CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

ARUTYUNOV, BORIS
 Provider ID: 201910
 Board Certified Specialty: No
 200 W ARBOR DR SAN DIEGO, CA 92103
 Phone: (619) 471-9186
 After Hours Phone: (619) 471-9186
 Provider Gender: Male
 NPI: 1144562703
 Provider English Spoken: Y
 Provider Language(s) Spoken: Russian
 Cultural Competency: N
 Hospital Affiliation: GOOD SAMARITAN HOSPITAL, PIH HEALTH GOOD SAMARITAN HOSPITAL, SUTTER MEDICAL CENTER SACRAMENTO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER





Hours: M-F 9:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

BALL, SHELDON
 Provider ID: 294137
 Board Certified Specialty: No
 6973 LINDA VISTA RD SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 Fax: (858) 633-4680
 After Hours Phone: (858) 279-0925
 Provider Gender: Male
 NPI: 1689646275
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 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 9:00AM-4:00PM
 Website: N/A





INTERNAL MEDICINE



BALL, SHELDON
 Provider ID: 294136
 Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
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 9:00AM-4:00PM
 Website: N/A

INTERNAL MEDICINE

BORDIN-WOSK, TALYA

Provider ID: 273983
Board Certified Specialty: No
 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: Y
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A





INTERNAL MEDICINE




CHENG, GEORGE

Provider ID: 247639
Board Certified Specialty: No
 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: Y
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE






DJEKIC, KRISTINA

Provider ID: 286668
Board Certified Specialty: No
 200 W 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

GELBERG, ANNA

Provider ID: 285638
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1104004258
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Russian
Cultural Competency: N
Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER, HOAG MEMORIAL
HOSPITAL PRESBYTERIAN,
UCSD MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Y
Min/Max Age: 18\999
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

INTERNAL MEDICINE
GRUNVALD, EDUARDO

Provider ID: 286344

Board Certified Specialty: No


 200 W 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: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


 Hours: M-F
8:00AM-5:00PM


 Website: N/A

INTERNAL MEDICINE
GRUNVALD, EDUARDO

Provider ID: 286343

Board Certified Specialty: No


 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122


 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497791339

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

INTERNAL MEDICINE
HASTIE, ELIZABETH

Provider ID: 291431

Board Certified Specialty: No


 200 W 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: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER


 Website: N/A


INTERNAL MEDICINE
HOGARTH, MICHAEL

Provider ID: 214386

Board Certified Specialty: No

 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: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


INTERNAL MEDICINE
JABBOUR, MOUSSA

Provider ID: 256659

Board Certified Specialty: No


 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: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

JIANG, JUN

Provider ID: 291415

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1447792171


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


INTERNAL MEDICINE

KATZ, YISRAEL

Provider ID: 272936

Board Certified Specialty: No

 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: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE


KVIATKOVSKY, MILLA

Provider ID: 274003

Board Certified Specialty: No



 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: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE


LAGO HERNANDEZ, CARLOS

Provider ID: 238622

Board Certified Specialty: No

 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: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM









 Website: N/A

INTERNAL MEDICINE

LAM, MICHAEL






Provider ID: 274411




Board Certified Specialty: No

 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE





LAM, MICHAEL

Provider ID: 274410
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

LEVERONE, NICHOLAS

Provider ID: 272692
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A



INTERNAL MEDICINE



MAJITHIA, AMIT

Provider ID: 255882
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE




MARTINEZ, ARMANDO

Provider ID: 291421
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Website: N/A

INTERNAL MEDICINE

MUNCE, DANIELLE

Provider ID: 272577
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A




INTERNAL MEDICINE

NAIDZIONAK, ULADZISLAU

Provider ID: 290567
 Board Certified Specialty: No
 7930 FROST ST STE 405
 SAN DIEGO, CA 92123
 Phone: (858) 237-0572
 After Hours Phone: (858) 237-0572

Provider Gender: Male
 NPI: 1023246212
 Provider English Spoken: Y
 Provider Language(s) Spoken: Russian



Cultural Competency: N
 Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999



American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: TU 9:00AM-4:00PM TH 9:00AM-4:00PM
 Website: N/A

INTERNAL MEDICINE

NARANJO, RODRIGO

Provider ID: 293268
 Board Certified Specialty: No
 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: 1609095264
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):



N
 Accessibility: CONTACT PROVIDER
 Website: N/A

INTERNAL MEDICINE

NARANJO, RODRIGO





Provider ID: 293269
 Board Certified Specialty: No
 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: 1609095264
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Website: N/A

INTERNAL MEDICINE








NOKES, BRANDON

Provider ID: 287582
 Board Certified Specialty: No
 200 W 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: Y
Min/Max Age: 18\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*






INTERNAL MEDICINE




SEBASKY, MEGHAN

Provider ID: 273962
Board Certified Specialty: No
 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: Y
Min/Max Age: 18\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

INTERNAL MEDICINE






SHAHATTO, LOBNA



Provider ID: 201324
Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 *Phone: (858) 657-7000*
 *After Hours Phone: (858) 657-7000*
Provider Gender: Female
NPI: 1477879906
 *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: Y
Min/Max Age: 18\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

INTERNAL MEDICINE






SMITH, CHELSEY




Provider ID: 239920
Board Certified Specialty: No
 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: Y
Min/Max Age: 18\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

INTERNAL MEDICINE

TANTISIRA, LALITA

Provider ID: 275926
Board Certified Specialty: No
 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: Y
Min/Max Age: 18\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

INTERNAL MEDICINE

TANTISIRA, LALITA

Provider ID: 275927
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

TAYLOR, DAVID

Provider ID: 274469
 Board Certified Specialty: No
 200 W 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: Y

Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

THOMAS, ROBERT

Provider ID: 238929
 Board Certified Specialty: Yes
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

WANG, ANGELA

Provider ID: 259535
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N




Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

WANG, ANGELA




Provider ID: 259534
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

WEBSTER, LUKE

Provider ID: 272681
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):




N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

YANG, JENNY

Provider ID: 283026
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A




INTERNAL MEDICINE

YANG, JENNY

Provider ID: 283027
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N



 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

ZHANG, SHERRY

Provider ID: 272657
 Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1588198147

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Mandarin
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

GERIATRIC MEDICINE

AGNIHOTRI, PARAG

Provider ID: 247292

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERVENTIONAL

CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 296050

Board Certified Specialty: No

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: Y

Min/Max Age: 15\99

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

LICENSED PROFESSIONAL

CLINICAL COUNSELOR

GARCIA, JENNI

Provider ID: 299310

Board Certified Specialty: No

3025 BEYER BLVD
SAN DIEGO, CA 92154

Phone: (619) 662-4100

Fax: (619) 662-4119

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1437775863

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

LICENSED PROFESSIONAL

CLINICAL COUNSELOR

NAKAMURA, TIFFANY

Provider ID: 239584

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL

MEDICINE

ADAMI, REBECCA

Provider ID: 272670

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL): Provider ID: 300010

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**MATERNAL AND FETAL
MEDICINE**

ADAMI, REBECCA

Provider ID: 277179

Board Certified Specialty: No



 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: Y


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

**MATERNAL AND FETAL
MEDICINE**

EMERUWA, UKACHI

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1245627421


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


**MATERNAL AND FETAL
MEDICINE**

EMERUWA, UKACHI

Provider ID: 300012

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


**MATERNAL AND FETAL
MEDICINE**

EMERUWA, UKACHI

Provider ID: 300011

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A



**MATERNAL AND FETAL
MEDICINE**

LAURENT, LOUISE

Provider ID: 208640

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

MCCULLOUGH, DEIRDRE

Provider ID: 277260

Board Certified Specialty: No

 3020 CHILDRENS WAY SAN DIEGO, CA 92123

 Phone: (858) 966-6710
Fax: (858) 966-6711

 After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1639153018

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

MCCULLOUGH, DEIRDRE

Provider ID: 210034

Board Certified Specialty: No

 3003 HEALTH CENTER DR SAN DIEGO, CA 92123

 Phone: (858) 966-6710
Fax: (858) 939-4102

 After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1639153018

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 296994

Board Certified Specialty: No


 3003 HEALTH CENTER DR SAN DIEGO, CA 92123


 Phone: (858) 966-6710
Fax: (858) 939-4102

 After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1124413026

 Provider English Spoken: Y

 Provider Language(s) Spoken: Hungarian, Spanish
Cultural Competency: N


Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A



MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 296998

Board Certified Specialty: No

 7910 FROST ST STE 220 SAN DIEGO, CA 92123

 Phone: (858) 966-6710
 After Hours Phone: (858) 966-6710

Provider Gender: Female
NPI: 1124413026

Provider English Spoken: Y
 Provider Language(s)
Spoken: Hungarian, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

**MATERNAL AND FETAL
MEDICINE**

MELBER, DORA

Provider ID: 296989
Board Certified Specialty: No
 7910 FROST ST STE 430
SAN DIEGO, CA 92123
 Phone: (858) 966-6710
Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female
NPI: 1124413026

Provider English Spoken: Y
 Provider Language(s)
Spoken: Hungarian, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

**MATERNAL AND FETAL
MEDICINE**

MELBER, DORA

Provider ID: 296990
Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-6710
Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female
NPI: 1124413026

Provider English Spoken: Y
 Provider Language(s)
Spoken: Hungarian, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Hours: M-F

8:00AM-5:00PM

Website: N/A

**MATERNAL AND FETAL
MEDICINE**

MOORE, THOMAS

Provider ID: 208643
Board Certified Specialty: No
 4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1184682379

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Y
Min/Max Age: 16\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
 Website: N/A

**MATERNAL AND FETAL
MEDICINE**

MOORE, THOMAS

Provider ID: 208644
Board Certified Specialty: No
 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: Y
Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**MATERNAL AND FETAL
MEDICINE**

REIMERS, REBECCA

Provider ID: 294648

Board Certified Specialty: No

 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: Y
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


**MATERNAL AND FETAL
MEDICINE**

REIMERS, REBECCA

Provider ID: 294647

Board Certified Specialty: No

 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: Y
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**MATERNAL AND FETAL
MEDICINE**

RICHARDSON, ALVIE

Provider ID: 214436

Board Certified Specialty: No

 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

 Phone: (858) 966-6710
Fax: (858) 939-4102

 After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1154305977

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, Sharp Grossmont

Hospital

Medi-Cal Open Panel: Y
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**MATERNAL AND FETAL
MEDICINE**

RICHARDSON, ALVIE

Provider ID: 277314

Board Certified Specialty: No

 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: Y
Min/Max Age: 0\19

American Sign Language (ASL): 8:00AM-5:00PM
N Website: N/A

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE

Provider ID: 277307
Board Certified Specialty: No
3003 HEALTH CENTER DR SAN DIEGO, CA 92123
Phone: (858) 966-6710
Fax: (858) 939-4102
After Hours Phone: (858) 966-6710
Provider Gender: Male
NPI: 1477563302
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, Sharp Grossmont Hospital, Sharp Grossmont Hospital
Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F

MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE

Provider ID: 277304
Board Certified Specialty: No
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: Y
Min/Max Age: 0\19
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F
Website: N/A

MATERNAL AND FETAL MEDICINE

SHANNON, KELLI

Provider ID: 208474
Board Certified Specialty: No
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: Y
Min/Max Age: 0\19
American Sign Language (ASL):




N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA




Provider ID: 242522
Board Certified Specialty: No
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: Y Min/Max Age: 0\19 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A




MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA

Provider ID: 277353
 Board Certified Specialty: No
 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: Y Min/Max Age: 0\19 American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA




Provider ID: 287084
 Board Certified Specialty: No
 7910 FROST ST STE 220 SAN DIEGO, CA 92123
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
 Provider Gender: Female
 NPI: 1760730758

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP

MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital Medi-Cal Open Panel: Y Min/Max Age: 0\19 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE

WILLIAMS, KRISTIN

Provider ID: 277383
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

**MATERNAL AND FETAL
MEDICINE**

WILLIAMS, KRISTIN

Provider ID: 277387

Board Certified Specialty: No

📍 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: Y
Min/Max Age: 0\19

American Sign Language (ASL): 🕒 Hours: M-F
8:00AM-5:00PM

N
♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

**MATERNAL AND FETAL
MEDICINE**

WOLF, RICHARD

Provider ID: 209253

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 16\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

**NEONATAL / PERINATAL
MEDICINE**

BAI-TONG, SHIYU

Provider ID: 283285

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

**NEONATAL / PERINATAL
MEDICINE**

CARROLL, JEANNE

Provider ID: 205727

Board Certified Specialty: No

📍 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**NEONATAL / PERINATAL
 MEDICINE**



DEL ROSARIO, PAMELA
 Provider ID: 295000
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER






 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**NEONATAL / PERINATAL
 MEDICINE**




FLEMING, SARAH
 Provider ID: 205645
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A




**NEONATAL / PERINATAL
 MEDICINE**

GLENN, TARA
 Provider ID: 283159
 Board Certified Specialty: No
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 966-5818
 Fax: (858) 966-7483

 After Hours Phone: (858)
 966-5818
 Provider Gender: Female
 NPI: 1992060974
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**NEONATAL / PERINATAL
 MEDICINE**



HIETALATI, SAMANTHA
 Provider ID: 294251
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

HONOLD, JOSE


Provider ID: 205941
 Board Certified Specialty: No
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 966-5818
 Fax: (858) 966-7483
 After Hours Phone: (858)
 966-5818
 Provider Gender: Male
 NPI: 1093886855
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, PIONEERS MEMORIAL
 HOSPITAL, SOUTHWEST
 HEALTHCARE INLAND VALLEY
 HOSPITAL, SOUTHWEST
 HEALTHCARE RANCHO
 SPRINGS HOSPITAL, SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, EL CENTRO REGIONAL
 MEDICAL CENTER, SCRIPPS
 MERCY HOSPITAL, SCRIPPS
 MERCY HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

HONOLD, JOSE

Provider ID: 242881
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F

8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

LANE, BRIAN

Provider ID: 205707
 Board Certified Specialty: No
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 966-5818
 Fax: (858) 966-7483
 After Hours Phone: (858)
 966-5818
 Provider Gender: Male
 NPI: 1427129287
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, SCRIPPS MEMORIAL
 HOSPITAL ENCINITAS,
 SCRIPPS MEMORIAL
 HOSPITAL, SHARP CHULA
 VISTA MED CTR, SOUTHWEST
 HEALTHCARE INLAND VALLEY
 HOSPITAL, SOUTHWEST
 HEALTHCARE RANCHO
 SPRINGS HOSPITAL, SCRIPPS
 MERCY HOSPITAL, SCRIPPS
 MERCY HOSPITAL, SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM

 Website: N/A


**NEONATAL / PERINATAL
MEDICINE**

LE, CRYSTAL


Provider ID: 205630

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**NEONATAL / PERINATAL
MEDICINE**

MARC AURELE, KRISHELLE

Provider ID: 206208

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**NEONATAL / PERINATAL
MEDICINE**

MARC AURELE, KRISHELLE

Provider ID: 206206

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

**NEONATAL / PERINATAL
MEDICINE**


MARC AURELE, KRISHELLE

Provider ID: 206210


Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEONATAL / PERINATAL


MEDICINE

MATOBA, NANA

Provider ID: 297974

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEONATAL / PERINATAL


MEDICINE

MATOBA, NANA

Provider ID: 297975

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEONATAL / PERINATAL


MEDICINE

MATOBA, NANA

Provider ID: 299894

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEONATAL / PERINATAL


MEDICINE

MCCULLEY, DAVID

Provider ID: 277177

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5818

Fax: (858) 966-7483

 After Hours Phone: (858)
966-5818

Provider Gender: Male


NPI: 1235304155


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

**NEONATAL / PERINATAL
MEDICINE**

MESTAN, KAREN

Provider ID: 285932

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**NEONATAL / PERINATAL
MEDICINE**

NIEMI, ANNA-KAISA

Provider ID: 262157

Board Certified Specialty: No

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
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**NEONATAL / PERINATAL
MEDICINE**

NIEMI, ANNA-KAISA

Provider ID: 262158

Board Certified Specialty: No

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
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL

MEDICINE

NYMAN, KATHERINE

Provider ID: 301822

Board Certified Specialty: No

4077 5TH AVE
SAN DIEGO, CA 92103

Phone: (619) 260-7046

Fax: (619) 686-3843

After Hours Phone: (619)
260-7046

Provider Gender: Female

NPI: 1003260951

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**NEONATAL / PERINATAL
MEDICINE**

NYMAN, KATHERINE

Provider ID: 301819

Board Certified Specialty: No

3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

Phone: (858) 966-5888




Fax: (858) 249-5839

After Hours Phone: (858)
966-5888





Provider Gender: Female




NPI: 1003260951

Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

**NEONATAL / PERINATAL
MEDICINE**

ODONNELL, F JANE
Provider ID: 205578
Board Certified Specialty: No
 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: Y






Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

**NEONATAL / PERINATAL
MEDICINE**

RAMOS, CARLOS
Provider ID: 206060
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F

8:00AM-5:00PM
Website: N/A

**NEONATAL / PERINATAL
MEDICINE**

SAJTI, ENIKO
Provider ID: 206171
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

**NEONATAL / PERINATAL
MEDICINE**

SAUER, CHARLES
Provider ID: 303906
Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8:00AM-5:00PM
 🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES

Provider ID: 303904
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8:00AM-5:00PM
 🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

SONG, RICHARD

Provider ID: 206143
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8:00AM-5:00PM
 🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

SPEZIALE, MARK





Provider ID: 206126
 Board Certified Specialty: No
 📍 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 📞 Phone: (858) 966-5888
 📠 Fax: (858) 966-7483
 ☎ After Hours Phone: (858) 966-5888
 Provider Gender: Male
 NPI: 1801978143

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR, UCSD MEDICAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*




NEONATAL / PERINATAL MEDICINE

SUTTNER, DENISE

Provider ID: 265085
Board Certified Specialty: No
 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 MERCY HOSPITAL

Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL): N




 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

NEONATAL / PERINATAL MEDICINE

SWEENEY, NATHALY

Provider ID: 206182
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

NEONATAL / PERINATAL MEDICINE

VOLLER, STEPHANNIE

Provider ID: 303808
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

**NEONATAL / PERINATAL
MEDICINE**

VOLLER, STEPHANNIE

Provider ID: 303806

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**NEONATAL / PERINATAL
MEDICINE**

VOLLER, STEPHANNIE

Provider ID: 303807

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**NEONATAL / PERINATAL
MEDICINE**

WEISS, KATHERINE

Provider ID: 264677

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1053541862

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

**NEONATAL / PERINATAL
MEDICINE**

WEST, JULIE

Provider ID: 297073

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEPHROLOGY

QUEVEDO, JUAN

Provider ID: 269998

Board Certified Specialty: No

995 GATEWAY CENTER
WAY STE 207

SAN DIEGO, CA 92102

Phone: (619) 263-9729

Fax: (619) 263-9730

After Hours Phone: (619)
263-9729







Provider Gender: Male

NPI: 1093902496

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A





NEPHROLOGY




SHAH, MITA

Provider ID: 262230
 Board Certified Specialty: No
 8010 FROST ST STE 510
 SAN DIEGO, CA 92123
 Phone: (858) 637-4700
 Fax: (858) 637-4701
 After Hours Phone: (858)
 637-4700
 Provider Gender: Female
 NPI: 1194773010
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

NEPHROLOGY

STEINBERG, STEVEN

Provider ID: 262281
 Board Certified Specialty: No
 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: Male
 NPI: 1407852783
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A

NEPHROLOGY






ZHONG, YAN

Provider ID: 296054
 Board Certified Specialty: Yes
 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
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

NEPHROLOGY

ZHONG, YAN

Provider ID: 296053
 Board Certified Specialty: Yes
 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
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY

BEVINS, ELIZABETH

Provider ID: 241943
Board Certified Specialty: No
 4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1013395151

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY

BUI, JONATHAN

Provider ID: 303227
Board Certified Specialty: No
 3030 CHILDRENS WAY FL
4
SAN DIEGO, CA 92123
 Phone: (858) 966-5819
 Fax: (858) 966-4930
 After Hours Phone: (858)
966-5819
Provider Gender: Male
NPI: 1730247974

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY

BUI, JONATHAN

Provider ID: 206005
Board Certified Specialty: No
 8001 FROST ST
SAN DIEGO, CA 92123
 Phone: (858) 966-5999
 Fax: (858) 966-4930
 After Hours Phone: (858)
966-5999
Provider Gender: Male
NPI: 1730247974
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY

COUGHLIN, DAVID

Provider ID: 240951
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY

COUGHLIN, DAVID

Provider ID: 304172
Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

NEUROLOGY

COUGHLIN, DAVID

Provider ID: 240949

Board Certified Specialty: Yes

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

NEUROLOGY

DOVE, KATHERINE

Provider ID: 302784

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

NEUROLOGY

DUNN-PIRIO, ANASTASIE

Provider ID: 304160

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

NEUROLOGY

DUNN-PIRIO, ANASTASIE

Provider ID: 203235

Board Certified Specialty: No

📍 200 W ARBOR DR FL 1

SAN DIEGO, CA 92103

☎ Phone: (619) 543-3500

Fax: (888) 539-8781

☎ After Hours Phone: (619) 543-3500

Provider Gender: Female

NPI: 1700177136

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

NEUROLOGY

FREDERICK, ALIYA

Provider ID: 283152

Board Certified Specialty: No


📍 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

NEUROLOGY




GOLD, JEFFREY





Provider ID: 283335
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19

American Sign Language (ASL):
 Board Certified Specialty: No
 N
 3030 CHILDRENS WAY FL
 4
 SAN DIEGO, CA 92123
 Phone: (858) 966-5819
 Fax: (858) 966-4930
 After Hours Phone: (858)
 966-5819

NEUROLOGY

GOLD, JEFFREY




Provider ID: 303287
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A




NEUROLOGY

GUIDO-ESTRADA, NATALIE

Provider ID: 303271






 3030 CHILDRENS WAY FL
 4
 SAN DIEGO, CA 92123
 Phone: (858) 966-5819
 Fax: (858) 966-4930
 After Hours Phone: (858)
 966-5819

Provider Gender: Female
 NPI: 1528353521
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

NEUROLOGY

GUNDOGDU, MELEK

Provider ID: 201623
 Board Certified Specialty: No
 200 W ARBOR DR FL 1
 SAN DIEGO, CA 92103
 Phone: (619) 543-3500
 After Hours Phone: (619)
 543-3500
 Provider Gender: Female
 NPI: 1437253671
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Turkish
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEUROLOGY

HANNAWI, ANDREW

Provider ID: 283154

Board Certified Specialty: No

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5999

Fax: (858) 576-8412

📞 After Hours Phone: (858)
966-5999

Provider Gender: Male

NPI: 1194179135

🗣 Provider English Spoken: Y

🗣 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEUROLOGY

IRAGUIMADOZ, VICENTE

Provider ID: 304154

Board Certified Specialty: No

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1053326710

🗣 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

NEUROLOGY

KHAMISHON, BORIS

Provider ID: 269923

Board Certified Specialty: No

📍 6699 ALVARADO RD STE
2301
SAN DIEGO, CA 92120

☎ Phone: (619) 582-2595

Fax: (619) 229-8006

📞 After Hours Phone: (619)
582-2595

Provider Gender: Male

NPI: 1104922038

🗣 Provider English Spoken: Y

🗣 Provider Language(s)
Spoken: Russian, Samoan,
Spanish

Cultural Competency: N

Hospital Affiliation: ALVARADO
HOSPITAL LLC

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH
8:00AM-4:00PM

F 8:00AM-3:00PM

🌐 Website: N/A

NEUROLOGY

KIM MCMANUS, OLIVIA

Provider ID: 303229

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N




♿ Accessibility: CONTACT PROVIDER





🌐 Website: N/A

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY

LAVERTY, CHAMINDRA

Provider ID: 303258
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY

LEE, DAVID

Provider ID: 246263
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY

LEE, DAVID

Provider ID: 304198
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A

NEUROLOGY




LEGER, GABRIEL

Provider ID: 247608
Board Certified Specialty: No
 4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
 Phone: (858) 543-8540
 After Hours Phone: (858)
543-8540
Provider Gender: Male
NPI: 1720367899

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY

LEGER, GABRIEL

Provider ID: 304176
Board Certified Specialty: No
 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male

NPI: 1720367899
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

NEUROLOGY

LONGARDNER, KATHERINE

Provider ID: 304197
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

NEUROLOGY

LONGARDNER, KATHERINE

Provider ID: 268346
 Board Certified Specialty: No
 4520 EXECUTIVE DR
 SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1801215926
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

NEUROLOGY

NELSON, JAMES

Provider ID: 303228
 Board Certified Specialty: No
 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: 1568434546
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: VALLEY
 CHILDRENS HOSPITAL, UCSD

MEDICAL CTR, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

NEUROLOGY

QAYOUMI, WALI

Provider ID: 284370
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM

 Website: N/A


NEUROLOGY

QAYOUMI, WALI

Provider ID: 304161

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


NEUROLOGY

RIGGINS, NINA

Provider ID: 304200

Board Certified Specialty: No

 6655 ALVARADO RD
SAN DIEGO, CA 92120


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1568655264

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: MEDICAL
CTR AT UCSF


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

NEUROLOGY


RIGGINS, NINA

Provider ID: 285968

Board Certified Specialty: No

 4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1568655264

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: MEDICAL
CTR AT UCSF


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


SCHORR, EMILY

Provider ID: 305020

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

NEUROLOGY


SCHORR, EMILY

Provider ID: 305021

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

NEUROLOGY

SCHORR, EMILY

Provider ID: 305023

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

NEUROLOGY

SWEAT, MARIE

Provider ID: 303831

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

YANG, JENNIFER

Provider ID: 301593

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

ZIMBRIC, MICHAEL

Provider ID: 206272

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

ZIMBRIC, MICHAEL

Provider ID: 303284

Board Certified Specialty: No

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: Y
 Min/Max Age: 0\19

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

NEUROLOGY CHILD

GRAVES, JENNIFER

Provider ID: 261037
 Board Certified Specialty: No
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858)
 966-8800
 Provider Gender: Female
 NPI: 1992849863

Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSF
 Medical Center At Mission Bay,
 UCSF MEDICAL CENTER AT
 MOUNT ZION, MEDICAL CTR
 AT UCSF, UCSD MEDICAL CTR,
 UCSD LA JOLLA JOHN SALLY
 THORNTON, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Y

Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

NEUROLOGY CHILD

GUIDO-ESTRADA, NATALIE

Provider ID: 205825
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

NEUROLOGY CHILD

NELSON, JAMES

Provider ID: 205373
 Board Certified Specialty: No
 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: 1568434546
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: VALLEY
 CHILDRENS HOSPITAL, UCSD
 MEDICAL CTR, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

NEUROLOGY CHILD

SAHAGIAN, MICHELLE

Provider ID: 206074
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

BLAKE, GARY

Provider ID: 290731

Board Certified Specialty: No

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: Y

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

COHEN, MANSOUR

Provider ID: 205940

Board Certified Specialty: Yes

7695 CARDINAL CT STE
390

SAN DIEGO, CA 92123
Phone: (858) 279-8111

Fax: (858) 279-4703

After Hours Phone: (858)
279-8111

Provider Gender: Male

NPI: 1346225356

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Farsi,
Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH
9:00AM-4:00PM

Website: N/A

Email:

JOSHUACOHENMD@YAHOO.COM

OBSTETRICS / GYNECOLOGY

CONTRERAS, MICHELLE

Provider ID: 295938

Board Certified Specialty: No

550 WASHINGTON ST STE
331

SAN DIEGO, CA 92103
Phone: (619) 662-4100

Fax: (619) 432-1607

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1730499252

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SUTTER

SOLANO MED CTR, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291327

Board Certified Specialty: No

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: Y

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291330

Board Certified Specialty: No

200 W 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291326
 Board Certified Specialty: No
 📍 3750 CONVOY ST STE 312
 SAN DIEGO, CA 92111
 ☎ Phone: (800) 926-8273
 Fax: (888) 539-8781
 ☎ After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1790128759
 ☑ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291329
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291328
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 16\999

American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291338
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 🌐 Website: N/A

OBSTETRICS / GYNECOLOGY







DRIEBE, AMY

Provider ID: 291339
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A


OBSTETRICS / GYNECOLOGY






DRIEBE, AMY

Provider ID: 291337
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

OBSTETRICS / GYNECOLOGY







DRIEBE, AMY

Provider ID: 291340
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

OBSTETRICS / GYNECOLOGY







FRUGONI, GINA

Provider ID: 270056
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY




GARG, ANUPAM

Provider ID: 295893
 Board Certified Specialty: No
 550 WASHINGTON ST STE
 331
 SAN DIEGO, CA 92103
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Provider Gender: Male
 NPI: 1013944636
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, ALVARADO
 HOSPITAL LLC, SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA
 Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY







GROGAN, BRIAN

Provider ID: 296002
 Board Certified Specialty: No
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 Fax: (858) 633-4682
 After Hours Phone: (858)

279-0925
 Provider Gender: Male
 NPI: 1235218439
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A


OBSTETRICS / GYNECOLOGY

GROGAN, BRIAN

Provider ID: 296001
 Board Certified Specialty: No
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 Fax: (858) 633-4680
 After Hours Phone: (858)
 810-8700
 Provider Gender: Male
 NPI: 1235218439
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

OBSTETRICS / GYNECOLOGY






GUPTA, PRATIMA




Provider ID: 257547
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY








GUPTA, PRATIMA

Provider ID: 257548
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT

Provider ID: 278915
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY



HARVEY, SCOTT

Provider ID: 278917
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY






HOANG, MAI

Provider ID: 208294
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

HOM-TEDLA, MARIANNE

Provider ID: 242751
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY






KLEIN, DAVID

Provider ID: 271560

Board Certified Specialty: No
 16950 VIA TAZON
 SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1780073635
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON
 Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

KLEIN, DAVID

Provider ID: 271561
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

KOHATSU, KAREN

Provider ID: 205481
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH
 8:30AM-4:30PM
 F 8:30AM-2:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH

Provider ID: 208681
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH



Provider ID: 285519
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN

Provider ID: 200965
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL): N
 Accessibility: CONTACT


PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY



MACKAY, GILLIAN

Provider ID: 303064
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N



 Accessibility: CONTACT
 PROVIDER
 Website: N/A

OBSTETRICS / GYNECOLOGY

MANI, PARVIN


Provider ID: 242345
 Board Certified Specialty: No
 5555 RESERVOIR DR STE
 208
 SAN DIEGO, CA 92120
 Phone: (619) 583-7555
 Fax: (619) 583-0555
 After Hours Phone: (619)
 583-7555


Provider Gender: Female
 NPI: 1518925015

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi

Cultural Competency: N
 Hospital Affiliation:
 GROSSMONT HOSPITAL,
 ALVARADO HOSPITAL LLC,
 SHARP MARY BIRCH HOSP
 FOR WOMEN AND
 NEWBORNS, UCSD LA JOLLA

JOHN SALLY THORNTON
 Medi-Cal Open Panel: Y
 Min/Max Age: 10\150
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 9:00AM-5:00PM

 Website: N/A


Email:
 PARVINMANI@YAHOO.COM

OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA

Provider ID: 285742
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N




 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM


 Website: N/A

OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA

Provider ID: 285741
 Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273

Provider Gender: Female
 NPI: 1467585521


 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR

Medi-Cal Open Panel: Y
 Min/Max Age: 16\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY

MELENDEZ, ARIANA

Provider ID: 299922

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

MELENDEZ, ARIANA

Provider ID: 299921

Board Certified Specialty: No

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: Y

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299982

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299978

Board Certified Specialty: No

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: Y

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299981

Board Certified Specialty: No

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: Y

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299980

Board Certified Specialty: No

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: Y

Min/Max Age: 16\999


American Sign Language (ASL): *Cultural Competency: N*
N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OBSTETRICS / GYNECOLOGY



PICKETT, CHARLOTTE

Provider ID: 299979
Board Certified Specialty: No
 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: Y
Min/Max Age: 16\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OBSTETRICS / GYNECOLOGY

PINSON, KELSEY




Provider ID: 284286
Board Certified Specialty: No
 4910 DIRECTORS PL STE
 200
 SAN DIEGO, CA 92121
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1841722485

 *Provider English Spoken: Y*


Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UNIVERSITY HSP OF SAN DIEGO CO

Medi-Cal Open Panel: Y
Min/Max Age: 16\999
 American Sign Language (ASL):
N


 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

OBSTETRICS / GYNECOLOGY

PINSON, KELSEY



Provider ID: 284288
Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1841722485

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UNIVERSITY HSP OF SAN DIEGO CO

Medi-Cal Open Panel: Y
Min/Max Age: 16\999
 American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*



OBSTETRICS / GYNECOLOGY

PINSON, KELSEY

Provider ID: 284287
Board Certified Specialty: No
 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: 1841722485


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UNIVERSITY HSP OF SAN DIEGO CO
Medi-Cal Open Panel: Y
Min/Max Age: 16\999
 American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

OBSTETRICS / GYNECOLOGY






RIVAS, RENEE

Provider ID: 284298
Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*

926-8273
 Provider Gender: Female
 NPI: 1295263861
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR


Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A



OBSTETRICS / GYNECOLOGY


SEFA-BOAKYE, KOFI
 Provider ID: 290713
 Board Certified Specialty: No
 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: Male
 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

Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

OBSTETRICS / GYNECOLOGY




SHAH, NEMI
 Provider ID: 272580
 Board Certified Specialty: No
 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: 1558715268
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR, SOUTHWEST
 HEALTHCARE RANCHO
 SPRINGS HOSPITAL,
 TEMECULA VALLEY HOSPITAL
 INC

Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

SHUCKETT, ARIEL
 Provider ID: 290708
 Board Certified Specialty: No
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 Fax: (858) 633-4680
 After Hours Phone: (858)
 279-0925

Provider Gender: Female
 NPI: 1245590124
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL, SHARP
 MARY BIRCH HOSP FOR
 WOMEN AND NEWBORNS
 Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A






OBSTETRICS / GYNECOLOGY




SUYAMA, JULIE
 Provider ID: 284290
 Board Certified Specialty: No
 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: Y
Min/Max Age: 16\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

OBSTETRICS / GYNECOLOGY





SUYAMA, JULIE




Provider ID: 284291
Board Certified Specialty: No
 200 W 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: Y
Min/Max Age: 16\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA






Provider ID: 285174
Board Certified Specialty: No
 200 W 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: Y
Min/Max Age: 16\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

OBSTETRICS / GYNECOLOGY






THOMSON, SAMANTHA

Provider ID: 285176
Board Certified Specialty: No
 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: Y
Min/Max Age: 16\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER








Provider ID: 290128
Board Certified Specialty: No
 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: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A


OCCUPATIONAL THERAPIST

BOND, KIMBERLEE

Provider ID: 206549
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OCCUPATIONAL THERAPIST

BOND, KIMBERLEE




Provider ID: 206548
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OCCUPATIONAL THERAPIST

LARSEN, JULIE




Provider ID: 258359
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OCCUPATIONAL THERAPIST


MIKUT, ALYSSA

Provider ID: 258415
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

BANSAL, PREETI

Provider ID: 205620
 Board Certified Specialty: Yes
 7910 FROST ST STE 200
 SAN DIEGO, CA 92123
 Phone: (858) 309-7702

Fax: (858) 966-7403

☎ After Hours Phone: (858) 309-7702

Provider Gender: Female

NPI: 1871664631

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL, TRI CITY MEDICAL
CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OPHTHALMOLOGY

BAXTER, SALLY

Provider ID: 272788

Board Certified Specialty: No

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1912325184

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OPHTHALMOLOGY

BAXTER, SALLY

Provider ID: 272789

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OPHTHALMOLOGY

BEAZER, ALEX

Provider ID: 272803

Board Certified Specialty: No

📍 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OPHTHALMOLOGY

BHATIA, SHAGUN

Provider ID: 240636

Board Certified Specialty: No

📍 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




OPHTHALMOLOGY

CAMP, ANDREW

Provider ID: 260020
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A



OPHTHALMOLOGY

GUALTIERI, CHRISTOPHER

Provider ID: 252313
Board Certified Specialty: Yes


 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: Y
Min/Max Age: 6\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

Email:
MYNEWEYES@HOTMAIL.COM

OPHTHALMOLOGY


HENNEIN, LAUREN

Provider ID: 297009
Board Certified Specialty: No


 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


HENNEIN, LAUREN

Provider ID: 297011
Board Certified Specialty: No

 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N



 Accessibility: CONTACT

PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

HUYNH, PAUL


Provider ID: 295645
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM
 SA 8:00AM-5:00PM

 Website: N/A



Email:
 DOCTORPAUL@SBCGLOBAL.NET

OPHTHALMOLOGY

HUYNH, PAUL

Provider ID: 245200
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM
 SA 8:00AM-5:00PM





 Website: N/A

Email:
 DOCTORPAUL@SBCGLOBAL.NET

OPHTHALMOLOGY


JACOBSEN, BRADLEY


Provider ID: 302869
 Board Certified Specialty: No
 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
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

JIN, MAN

Provider ID: 299955
 Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1073010120

 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Website: N/A

OPHTHALMOLOGY

KHATIB, NORA

Provider ID: 290441
Board Certified Specialty: No

233 LEWIS ST
SAN DIEGO, CA 92103

Phone: (619) 501-9050

Fax: (619) 501-9054

After Hours Phone: (619)
501-9050

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: Y

Min/Max Age: 14\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

KLINGE, LANNING

Provider ID: 239915

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

LI, ALEXANDRIA

Provider ID: 272833

Board Certified Specialty: No

200 W 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

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

LIU, YUNXIANG

Provider ID: 210803

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

MOLL, ANGELA

Provider ID: 205510

Board Certified Specialty: No

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1861648602

☐ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, GROSSMONT
 HOSPITAL, SHARP MEMORIAL
 HOSPITAL, UCSF BENIOFF
 CHILDREN'S HOSPITAL
 OAKLAND, SCRIPPS MERCY
 HOSPITAL, SCRIPPS MERCY
 HOSPITAL CHULA VISTA
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

♿ Accessibility: CONTACT
 PROVIDER
 🕒 Hours: M-F
 8:00AM-5:00PM
 🌐 Website: N/A

OPHTHALMOLOGY

MOVAGHAR, MANSOOR

Provider ID: 216412
 Board Certified Specialty: No
 📍 7910 FROST ST STE 200
 SAN DIEGO, CA 92123
 📞 Phone: (858) 309-7702
 📠 After Hours Phone: (858)
 309-7702
 Provider Gender: Male
 NPI: 1497792220

☐ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

♿ Accessibility: CONTACT
 PROVIDER
 🕒 Hours: M-F
 8:00AM-5:00PM
 🌐 Website: N/A

OPHTHALMOLOGY

OHALLORAN, HENRY

Provider ID: 205888
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\19

American Sign Language (ASL):
 N

♿ Accessibility: CONTACT
 PROVIDER
 🕒 Hours: M-F
 8:00AM-5:00PM
 🌐 Website: N/A

OPHTHALMOLOGY

PHAN, RYAN

Provider ID: 302925
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

♿ Accessibility: CONTACT
 PROVIDER
 🕒 Hours: M-F
 8:00AM-5:00PM
 🌐 Website: N/A

OPHTHALMOLOGY

PHAN, RYAN

Provider ID: 295647
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N



 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY




PHAN, RYAN

Provider ID: 287883
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY



PHAN, RYAN

Provider ID: 295646
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F

8:00AM-5:00PM
 Website: N/A



OPHTHALMOLOGY
PUIG LLANO, MANUEL

Provider ID: 299964
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Website: N/A

OPHTHALMOLOGY
RAHMATNEJAD, KAMRAN

Provider ID: 300040
 Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1699268292

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 299936

Board Certified Specialty: No

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1932605649

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OPHTHALMOLOGY

SONG, DELU

Provider ID: 302872

Board Certified Specialty: No

📍 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, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OPHTHALMOLOGY

YAMADA, KENTARO

Provider ID: 295848

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
9:00AM-5:00PM

🌐 Website: N/A

OPTOMETRIST

AOTO, KIM

Provider ID: 268723

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:30AM-5:00PM

🌐 Website: N/A

OPTOMETRIST

AOTO, KIM

Provider ID: 296795

Board Certified Specialty: No

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)
898-2020

Provider Gender: Female

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 9:00AM-5:00PM
TU 8:30AM-4:30PM
W 7:30AM-4:30PM
TH 9:30AM-5:00PM
F 8:30AM-4:00PM

Website: N/A

OPTOMETRIST

AOTO, KIM

Provider ID: 268718

Board Certified Specialty: No

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)
898-2020

Provider Gender: Female

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 9:00AM-5:00PM
TU 8:30AM-4:30PM
W 7:30AM-4:30PM
TH 9:30AM-5:00PM
F 8:30AM-4:00PM

Website: N/A

OPTOMETRIST

JOMOC, CAITLIN

Provider ID: 304156

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

JOMOC, CAITLIN

Provider ID: 304155

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

KIM, PHILIP

Provider ID: 287910

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

SCHWAB, GARY

Provider ID: 290411

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

SCHWAB, GARY

Provider ID: 290410

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

VO, ANDREW

Provider ID: 201312

Board Certified Specialty: No

200 W ARBOR DR STE 101
SAN DIEGO, CA 92103

Phone: (619) 543-7907

After Hours Phone: (619)
543-7907

Provider Gender: Male

NPI: 1790291565

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

VO, ANDREW

Provider ID: 304147

Board Certified Specialty: No

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790291565

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

YU, CAROL

Provider ID: 301684

Board Certified Specialty: No

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639697451

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

YU, CAROL

Provider ID: 301680

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1639697451

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OPTOMETRIST

YU, CAROL

Provider ID: 301683

Board Certified Specialty: No

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1639697451

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

ORAL MAXILLOFACIAL

SURGEON

DENTICO-OLIN, MARC

Provider ID: 304727

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

ORAL MAXILLOFACIAL

SURGEON

DENTICO-OLIN, MARC

Provider ID: 273663

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

OTOLARYNGOLOGY

BLISS, MORGAN

Provider ID: 272565

Board Certified Specialty: Yes

📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

OTOLARYNGOLOGY

BRUMUND, KEVIN

Provider ID: 299635

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

OTOLARYNGOLOGY

BRUMUND, KEVIN

Provider ID: 299634

Board Certified Specialty: No

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1033193669

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299461

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299462

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299457

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

OTOLARYNGOLOGY

CARVALHO, DANIELA

Provider ID: 272557

Board Certified Specialty: No

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858) 309-7701
Provider Gender: Female
NPI: 1154492916
Provider English Spoken: Y
Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OTOLARYNGOLOGY
CARVALHO, DANIELA

Provider ID: 205628
Board Certified Specialty: No
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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OTOLARYNGOLOGY
COFFEY, CHARLES

Provider ID: 299579
Board Certified Specialty: No
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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY
COFFEY, CHARLES

Provider ID: 299583
Board Certified Specialty: No
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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A

OTOLARYNGOLOGY
COFFEY, CHARLES

Provider ID: 299582
Board Certified Specialty: No
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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY


DECONDE, ADAM

Provider ID: 299567
Board Certified Specialty: No



 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

DECONDE, ADAM


Provider ID: 299568
Board Certified Specialty: No

 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY


DECONDE, ADAM

Provider ID: 299569
Board Certified Specialty: No


 200 W 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY


FRIEDMAN, RICK

Provider ID: 299532
Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781



 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1982708558

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN
HOSPITAL, CHILDRENS HOSP
OF LOS ANGELES, SOUTH
COAST GLOBAL MEDICAL
CENTER INC, ANAHEIM
GLOBAL MEDICAL CENTER,
ORANGE COUNTY GLOBAL
MEDICAL CENTER INC,
CHAPMAN GLOBAL MEDICAL
CENTER INC, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299531

Board Certified Specialty: No

8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982708558

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTH COAST GLOBAL MEDICAL CENTER INC, ANAHEIM GLOBAL MEDICAL CENTER, ORANGE COUNTY GLOBAL MEDICAL CENTER INC, CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299530

Board Certified Specialty: No

16950 VIA TAZON SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982708558

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTH COAST GLOBAL MEDICAL CENTER INC, ANAHEIM GLOBAL MEDICAL CENTER, ORANGE COUNTY GLOBAL MEDICAL CENTER INC, CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

OTOLARYNGOLOGY

FRIESEN, TZYYNONG

Provider ID: 272604

Board Certified Specialty: No

3030 CHILDRENS WAY FL 1 SAN DIEGO, CA 92123

Phone: (858) 309-7701

Fax: (858) 966-8038

After Hours Phone: (858) 309-7701

Provider Gender: Female

NPI: 1952740177

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299561

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299560

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299559

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Website: N/A

OTOLARYNGOLOGY

GREENE, JACQUELINE

Provider ID: 298396

Board Certified Specialty: No

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1144583931

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

OTOLARYNGOLOGY

GREENE, JACQUELINE

Provider ID: 272959

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

GREENE, JACQUELINE

Provider ID: 298397

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

OTOLARYNGOLOGY

HARRIS, JEFFREY

Provider ID: 299576

Board Certified Specialty: No

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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY

HARRIS, JEFFREY

Provider ID: 299575
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1417988783
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299514
Board Certified Specialty: No
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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299515
Board Certified Specialty: No
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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299511
Board Certified Specialty: No
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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OTOLARYNGOLOGY
HUSSEMAN, JACOB

Provider ID: 301052
Board Certified Specialty: No
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1124034053

📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OTOLARYNGOLOGY
HUSSEMAN, JACOB

Provider ID: 301053
Board Certified Specialty: No
📍 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OTOLARYNGOLOGY
JIANG, WEN

Provider ID: 272660
Board Certified Specialty: Yes
📍 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A






OTOLARYNGOLOGY
KARI, ELINA

Provider ID: 299443
Board Certified Specialty: No
📍 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A





OTOLARYNGOLOGY
KARI, ELINA

Provider ID: 299446
Board Certified Specialty: No
📍 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299445
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY







LEUIN, SHELBY

Provider ID: 272637
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

 Website: N/A





OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299482
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY







MAGIT, ANTHONY

Provider ID: 299481
 Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A


OTOLARYNGOLOGY






MAGIT, ANTHONY

Provider ID: 299480
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299590
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299591
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A






OTOLARYNGOLOGY


MATSUOKA, AKIHIRO

Provider ID: 299592
Board Certified Specialty: No
 200 W 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY




NGUYEN, QUYEN

Provider ID: 299603
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):



N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY

NGUYEN, QUYEN



Provider ID: 299607
 Board Certified Specialty: No
 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: 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY




NGUYEN, QUYEN

Provider ID: 299606
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY

PATEL, VIJAY



Provider ID: 297037
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19



American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299509
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299508

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

**VAHABZADEH-HAGH,
ANDREW**

Provider ID: 299507

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299641

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299642

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299639

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*


OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299610
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999




American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


 *Website: N/A*

OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299615
Board Certified Specialty: No
 8899 UNIVERSITY CENTER LN
 SAN DIEGO, CA 92122
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*

Provider Gender: Male

NPI: 1366590853
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299614
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999


American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

OTOLARYNGOLOGY



YAN, CAROL

Provider ID: 298412
Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999



American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298414
Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298413
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

**OTOLARYNGOLOGY /
 OTOLOGY / LARYNGOLOGY /
 RHINOLOGY**

MAGIT, ANTHONY

Provider ID: 272767
 Board Certified Specialty: Yes
 3030 CHILDRENS WAY FL 1
 SAN DIEGO, CA 92123
 Phone: (855) 309-7701
 Fax: (858) 966-4062

After Hours Phone: (855)
 309-7701
 Provider Gender: Male
 NPI: 1891858379
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A

**PATHOLOGY ANATOMIC
 CLINICAL**

ALLEN, ELIZABETH

Provider ID: 275756
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

**PATHOLOGY ANATOMIC
 CLINICAL**

BROOME, HELEN

Provider ID: 275720
 Board Certified Specialty: No
 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

BROOME, HELEN

Provider ID: 275721

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PATHOLOGY ANATOMIC


CLINICAL

BUI, JACK

Provider ID: 247581

Board Certified Specialty: No

 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1942529821

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PATHOLOGY ANATOMIC

CLINICAL

BUI, JACK

Provider ID: 247580

 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PATHOLOGY ANATOMIC


CLINICAL

QUINTANA, PAULINA

Provider ID: 296765

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC CLINICAL

ROMA, ANDRES

Provider ID: 275826

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

SHABAIK, AHMED

Provider ID: 275781

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC CLINICAL

SONG, WEI

Provider ID: 300001

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

PATHOLOGY ANATOMIC CLINICAL

STEPHENS, LAURA

Provider ID: 300042

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

PATHOLOGY ANATOMIC CLINICAL

VAVINSKAYA, VERA

Provider ID: 275789

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

WANG, DEHUA

Provider ID: 289153

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC ALLERGY /

IMMUNOLOGY

ALKATIB, RHONDA

Provider ID: 291226

Board Certified Specialty: No

📍 2655 CAMINO DEL RIO N
STE 425

SAN DIEGO, CA 92108

☎ Phone: (619) 286-6687

Fax: (619) 286-6695

☎ After Hours Phone: (619)
286-6687

Provider Gender: Female

NPI: 1417363086

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ALVARADO
HOSP MED CTR, ALVARADO

HOSPITAL LLC

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC ALLERGY /

IMMUNOLOGY

COLLINS, CATHLEEN

Provider ID: 206083

Board Certified Specialty: No

📍 3030 CHILDRENS WAY STE
2

SAN DIEGO, CA 92123

☎ Phone: (858) 966-5961

Fax: (858) 966-6791

☎ 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC ALLERGY /

IMMUNOLOGY

GENG, BOB

Provider ID: 205824

Board Certified Specialty: No

📍 3030 CHILDRENS WAY STE
2

SAN DIEGO, CA 92123


☎ Phone: (858) 966-5961

Fax: (858) 966-6791




☎ 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

**PEDIATRIC ALLERGY /
IMMUNOLOGY**




GENG, BOB

Provider ID: 205823
Board Certified Specialty: No
 5776 RUFFIN RD
SAN DIEGO, CA 92123
 Phone: (858) 292-1144
Fax: (858) 268-5145
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

**PEDIATRIC ALLERGY /
IMMUNOLOGY**

GREINER, ALEXANDER


Provider ID: 205697
Board Certified Specialty: No
 5776 RUFFIN RD
SAN DIEGO, CA 92123
 Phone: (858) 966-4900
Fax: (858) 268-5145
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-0:00PM
 Website: N/A


**PEDIATRIC ALLERGY /
IMMUNOLOGY**




LEIBEL, SYDNEY

Provider ID: 205724

Board Certified Specialty: No
 5776 RUFFIN RD
SAN DIEGO, CA 92123
 Phone: (858) 292-1144
Fax: (858) 268-5145
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

**PEDIATRIC ALLERGY /
IMMUNOLOGY**

LEIBEL, SYDNEY

Provider ID: 205725
Board Certified Specialty: No
 3030 CHILDRENS WAY FL
2 NORTH
SAN DIEGO, CA 92123
 Phone: (858) 966-5961
Fax: (858) 966-6791
 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**PEDIATRIC ALLERGY /
IMMUNOLOGY**

WALTERS, KRISTEN

Provider ID: 206255

Board Certified Specialty: No

 5776 RUFFIN RD
SAN DIEGO, CA 92123

 Phone: (858) 966-4900
Fax: (858) 966-4051

 After Hours Phone: (858)
966-4900

Provider Gender: Female

NPI: 1437442308


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

BOCK, MATTHEW

Provider ID: 280463

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

BORQUEZ, ALEJANDRO

Provider ID: 284120

Board Certified Specialty: No



 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

CHAU, PETER

Provider ID: 271427

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19








American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A




PEDIATRIC CARDIOLOGY





DAVIS, CHRISTOPHER

Provider ID: N/A
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC CARDIOLOGY



DOMICO, MICHELE


Provider ID: 216855
Board Certified Specialty: No
 3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
 Phone: (858) 966-5855
 After Hours Phone: (858)

966-5855
Provider Gender: Female
NPI: 1932305000
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
CHILDRENS HOSPITAL AT
MISSION, CHILDRENS
HOSPITAL OF ORANGE
COUNTY, UNIVERSITY OF
CALIFORNIA IRVINE MED CTR,
Foothill Regional Medical
Center, HOAG MEMORIAL
HOSPITAL PRESBYTERIAN,
SOUTH COAST GLOBAL
MEDICAL CENTER INC, HOAG
HOSPITAL IRVINE, HOAG
HOSPITAL IRVINE, ANAHEIM
GLOBAL MEDICAL CENTER,
ORANGE COUNTY GLOBAL
MEDICAL CENTER INC,
CHAPMAN GLOBAL MEDICAL
CENTER INC
Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC CARDIOLOGY







DUMMER, KIRSTEN

Provider ID: 260595
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC CARDIOLOGY

GOLDING, IAN

Provider ID: 210823
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

GORDON, BRENT

Provider ID: 295391

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

HALEY, JESSICA

Provider ID: 205687

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

JUSTINO, HENRI

Provider ID: 284123

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

**LEHNERT SCHUCHARDT,
ELEANOR**

Provider ID: 262250

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

MCCANDLESS, RACHEL

Provider ID: 206147

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-4912

Fax: (858) 966-7903

☎ After Hours Phone: (858) 966-4912

Provider Gender: Female

NPI: 1487821815

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC CARDIOLOGY

MUELLER, DANA

Provider ID: 245535

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PEDIATRIC CARDIOLOGY

NARAYAN, HARI

Provider ID: 205349

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC CARDIOLOGY

RAO, ROHIT

Provider ID: 206122

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC CARDIOLOGY

SILVA SEPULVEDA, JOSE

Provider ID: 206297

Board Certified Specialty: No

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5855

Fax: (858) 966-7903

☎ After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1417222472

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY


STEINBERG, LEONARD

Provider ID: 248208

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC CARDIOLOGY

STRINGER, JESSE

Provider ID: 206296

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1972745388

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

VAUGHN, GABRIELLE

Provider ID: 205643

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

PEDIATRIC CARDIOLOGY


VELLORE GOVARDHAN,

SHILPA

Provider ID: 271454

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

WERHO, DAVID

Provider ID: 206316

Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRIC CARDIOLOGY
WILLIAMS, MATTHEW

Provider ID: 206287
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRIC CARDIOLOGY
YOUNOSZAI, ADEL

Provider ID: 303133
 Board Certified Specialty: No
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 966-5855
 Fax: (858) 966-7903
 After Hours Phone: (858) 966-5855
 Provider Gender: Male
 NPI: 1952493819

Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRIC DERMATOLOGY
BOIKO, SUSAN

Provider ID: 303684
 Board Certified Specialty: No
 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: 1053488981
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO

Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRIC DERMATOLOGY
EICHENFIELD, DAWN

Provider ID: 303679
 Board Certified Specialty: No
 7910 FROST ST STE 120
 SAN DIEGO, CA 92123
 Phone: (858) 966-6795
 Fax: (858) 966-7479
 After Hours Phone: (858) 966-6795
 Provider Gender: Female
 NPI: 1295198091
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRIC DERMATOLOGY
EICHENFIELD, DAWN

Provider ID: 283142
 Board Certified Specialty: No

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: Y
Min/Max Age: 0\19
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

AGHILI, ROXANA

Provider ID: 303780
Board Certified Specialty: No
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: Y
Min/Max Age: 0\19
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

AGHILI, ROXANA

Provider ID: 304918
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858)
966-8800
Provider Gender: Female
NPI: 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: Y
Min/Max Age: 0\18
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

AMIRNOVIN, RAMBOD

Provider ID: 297673
Board Certified Specialty: No
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: 1629104492

Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, LOMA LINDA
UNIVERSITY CHILDRENS
HOSPITAL, LOMA LINDA
UNIVERSITY MED CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, LONG BEACH
MEMORIAL MED CTR, EARL
AND LORRAINE MILLER
CHILDRENS HSP
Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

AUSTIN PAGE, LUKAS

Provider ID: 205589

Board Certified Specialty: No

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: 1326301862

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

BELLOMO, THOMAS

Provider ID: 205601

Board Certified Specialty: No

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)
280-2905

Provider Gender: Male

NPI: 1700926698

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

BETTY, MARYANN

Provider ID: 245754

Board Certified Specialty: No

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1285014498

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

BETTY, MARYANN

Provider ID: 257396

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

Fax: (858) 966-7433

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1285014498

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

BIALOSTOZKY, MARIO

Provider ID: 206011

Board Certified Specialty: No

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: 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

**PEDIATRIC EMERGENCY
 MEDICINE**

BRYL, AMY
 Provider ID: 205967
 Board Certified Specialty: No
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858)
 966-8800
 Provider Gender: Female
 NPI: 1497079487
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 SOUTHWEST HEALTHCARE
 INLAND VALLEY HOSPITAL,

UCSF BENIOFF CHILDREN'S
 HOSPITAL OAKLAND,
 SOUTHWEST HEALTHCARE
 RANCHO SPRINGS HOSPITAL,
 RADY CHILDRENS HOSPITAL
 SAN DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

**PEDIATRIC EMERGENCY
 MEDICINE**

CAMPBELL, SARA
 Provider ID: 206335
 Board Certified Specialty: No
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
 966-8800
 Provider Gender: Female
 NPI: 1841687563
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Spanish
 Cultural Competency: N
 Hospital Affiliation:
 CHILDRENS HOSP OF LOS
 ANGELES, RADY CHILDRENS
 HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F

8:00AM-5:00PM
 Website: N/A

**PEDIATRIC EMERGENCY
 MEDICINE**

CARSTAIRS, SHAUN
 Provider ID: 205665
 Board Certified Specialty: No
 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: 1255301602
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, SCRIPPS MERCY
 HOSPITAL, SCRIPPS MERCY
 HOSPITAL CHULA VISTA, UCSD
 LA JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR, NAVAL MEDICAL CTR SD
 RBE
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

**PEDIATRIC EMERGENCY
 MEDICINE**




CHOO, SUN
 Provider ID: 296535
 Board Certified Specialty: No
 3020 CHILDRENS WAY

SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 NPI: 1700047628
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: N
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE






CHOO, SUN

Provider ID: 296536
 Board Certified Specialty: No
 4305 UNIVERSITY AVE STE 150
 SAN DIEGO, CA 92105
 Phone: (619) 280-2905
 Fax: (619) 283-1614
 After Hours Phone: (619) 280-2905
 Provider Gender: Female
 NPI: 1700047628
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: N

Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM
 M-F 4:00PM-10:00PM
 SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

CONRAD, HEATHER








Provider ID: 205960
 Board Certified Specialty: No
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 NPI: 1205813409
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

DEL RE, ANGELO

Provider ID: 206081
 Board Certified Specialty: No
 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: 1275761371
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

DEVERA, GEMMIE

Provider ID: 288572
 Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800
Fax: (858) 966-7433

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1366622078

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: N

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

DO, STEPHANIE

Provider ID: 287393

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL): **DORWART, ELIZABETH**
N

Accessibility: CONTACT
PROVIDER

Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

DONOFRIO-ODMANN, JOY

Provider ID: 205375

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800
Fax: (858) 966-7433

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

Provider ID: 294260

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800
Fax: (858) 966-7433

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1609132034

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: LUCILE
SALTER PACKARD CHILDRENS
HOSP, Stanford Health Care,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

EKPENYONG, ATIM

Provider ID: 205722

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 576-1700
Fax: (858) 966-7433

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: Y
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**PEDIATRIC EMERGENCY
MEDICINE**

FISHER, JAY

Provider ID: 295690

Board Certified Specialty: No

 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: 1629118518


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**PEDIATRIC EMERGENCY
MEDICINE**

GAHM, CLAIRE

Provider ID: 301305

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-8800

Fax: (858) 966-7433

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1750709077

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: N

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


**PEDIATRIC EMERGENCY
MEDICINE**

GIBONEY, JENNIFER

Provider ID: 205925

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800


Fax: (858) 966-7433

 After Hours Phone: (858)

966-8800

Provider Gender: Female

NPI: 1275895849

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**


GROSS, MATTHEW

Provider ID: 297172

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Male

NPI: 1942223664




 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Y




Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM
 M-F 4:00PM-10:00PM
 SA 1:00PM-10:00PM
 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

GROSS, MATTHEW


Provider ID: 297174
 Board Certified Specialty: No
 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: 1942223664

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19



American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

HERSKOVITZ, SCOTT

Provider ID: 261045
 Board Certified Specialty: Yes
 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: 1225393499

 Provider English Spoken: Y
 Cultural Competency: N


Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO


Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
 N




 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

HUNTER, WENDY

Provider ID: 206278
 Board Certified Specialty: No
 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: Y


Min/Max Age: 0\19

American Sign Language (ASL):

N




 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

INDRA, SEAN

Provider ID: 302625
 Board Certified Specialty: No
 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: 1427349091

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, VALLEY CHILDRENS
 HOSPITAL

Medi-Cal Open Panel: N

Min/Max Age: 0\19


American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

ISHIMINE, PAUL

Provider ID: 206236
 Board Certified Specialty: No
 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: 1437184421
 🗒 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 🕒 Hours: M-F
 8:00AM-5:00PM
 🌐 Website: N/A

**PEDIATRIC EMERGENCY
 MEDICINE**

JACKSON, TAYLOR
 Provider ID: 302127
 Board Certified Specialty: No
 📍 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 ☎ Phone: (858) 966-5999
 Fax: (858) 966-8519
 📞 After Hours Phone: (858) 966-5999
 Provider Gender: Male
 NPI: 1326543752
 🗒 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Y

Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 🕒 Hours: M-F
 8:00AM-5:00PM
 🌐 Website: N/A

**PEDIATRIC EMERGENCY
 MEDICINE**

JOSHI, WEENA
 Provider ID: 262234
 Board Certified Specialty: No
 📍 4305 UNIVERSITY AVE STE
 150
 SAN DIEGO, CA 92105
 ☎ Phone: (619) 280-2905
 Fax: (619) 283-1614
 📞 After Hours Phone: (619) 280-2905
 Provider Gender: Female
 NPI: 1376862177

🗒 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, PALOMAR HEALTH
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 🕒 Hours: M-F
 8:00AM-5:00PM
 🌐 Website: N/A

**PEDIATRIC EMERGENCY
 MEDICINE**

JOSHI, WEENA
 Provider ID: 262232

Board Certified Specialty: No
 📍 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 ☎ Phone: (858) 966-8800
 Fax: (858) 966-7433
 📞 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 NPI: 1376862177

🗒 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, PALOMAR HEALTH
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

♿ Accessibility: CONTACT
 PROVIDER
 🕒 Hours: M-F
 8:00AM-5:00PM
 🌐 Website: N/A

**PEDIATRIC EMERGENCY
 MEDICINE**

KHAN, SHAHFAR
 Provider ID: 294094
 Board Certified Specialty: No
 📍 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 ☎ Phone: (858) 966-8800
 Fax: (858) 966-7433
 📞 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 NPI: 1013361815

🗒 Provider English Spoken: Y
 🗒 Provider Language(s)
 Spoken: Hindi, Urdu
 Cultural Competency: N
 Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

KINGDON, JOANNA

Provider ID: 302317

Board Certified Specialty: No

 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: Y


Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM



SA 1:00PM-10:00PM

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

LOVEJOY, AMY

Provider ID: 206107

 Board Certified Specialty: No
 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: 1790856557

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSPITAL OF ORANGE COUNTY

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM


 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


LOVEJOY, AMY

Provider ID: 262029

 Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 309-7701

Fax: (858) 966-8038

 After Hours Phone: (858) 309-7701

Provider Gender: Female

NPI: 1790856557

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSPITAL OF ORANGE COUNTY

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


MCDANIEL, MICHELE

Provider ID: 248071

Board Certified Specialty: No

 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: Y




Min/Max Age: 0\19

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

MENDES, CHANTAL








Provider ID: 295668
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM
 M-F 4:00PM-10:00PM
 SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE





MESIWALA, ADNAN

Provider ID: 275654
 Board Certified Specialty: No

 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: 1528483955
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE







METCALF, ASHLEY

Provider ID: 205348
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

MILLS, DAVID

Provider ID: 302146
 Board Certified Specialty: No
 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: 1194145946
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

MINKA, GENEVIEVE

Provider ID: 205336
 Board Certified Specialty: No
 4305 UNIVERSITY AVE STE 150
 SAN DIEGO, CA 92105
 Phone: (619) 280-2905
 Fax: (619) 283-1614
 After Hours Phone: (619) 280-2905
 Provider Gender: Female
 NPI: 1689646689
 Provider English Spoken: Y
 Provider Language(s) Spoken: French
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM M-F 4:00PM-10:00PM SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

MINKA, GENEVIEVE
 Provider ID: 262107
 Board Certified Specialty: No
 8110 BIRMINGHAM WAY FL 1
 SAN DIEGO, CA 92123
 Phone: (858) 966-7785
 After Hours Phone: (858) 966-7785
 Provider Gender: Female

NPI: 1689646689
 Provider English Spoken: Y
 Provider Language(s) Spoken: French
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA
 Medi-Cal Open Panel: N
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

MINKA, GENEVIEVE
 Provider ID: 205334
 Board Certified Specialty: No
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 NPI: 1689646689
 Provider English Spoken: Y
 Provider Language(s) Spoken: French
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

MISHRA-OCCHINO, SEEMA
 Provider ID: 205404
 Board Certified Specialty: No
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 576-1700
 Fax: (858) 966-7433
 After Hours Phone: (858) 576-1700
 Provider Gender: Female
 NPI: 1689612830
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

MONTBLEAU, KARA
 Provider ID: 299240
 Board Certified Specialty: No
 3020 CHILDRENS WAY SAN DIEGO, CA 92123

Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 NPI: 1164981197
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

MURRAY, MATTHEW
 Provider ID: 205759
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

NGUYEN, MYLINH
 Provider ID: 262299
 Board Certified Specialty: No
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 NPI: 1730428053
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

NGUYEN, MARGARET
 Provider ID: 270705




Board Certified Specialty: No
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 NPI: 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

OZAKI, YOSHIHIRO
 Provider ID: 241926
 Board Certified Specialty: No
 4305 UNIVERSITY AVE STE 150
 SAN DIEGO, CA 92105
 Phone: (619) 280-2905
 Fax: (619) 283-1614
 After Hours Phone: (619) 280-2905
 Provider Gender: Male
 NPI: 1467898239
 Provider English Spoken: Y
 Provider Language(s)




Spoken: Japanese
 Cultural Competency: N
 Hospital Affiliation: VALLEY
 CHILDRENS HOSPITAL, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO



Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A



**PEDIATRIC EMERGENCY
 MEDICINE**

OZCAN, ALI

Provider ID: 287923
 Board Certified Specialty: No
 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: 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Website: N/A




**PEDIATRIC EMERGENCY
 MEDICINE**

PADE, KATHRYN

Provider ID: 262411
 Board Certified Specialty: No
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858)
 966-8800


Provider Gender: Female
 NPI: 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A



**PEDIATRIC EMERGENCY
 MEDICINE**

PARK, BRIAN

Provider ID: 302352
 Board Certified Specialty: No
 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: 1710418744
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, SOUTHWEST
 HEALTHCARE RANCHO
 SPRINGS HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Website: N/A

**PEDIATRIC EMERGENCY
 MEDICINE**

PARK, RONALD

Provider ID: 295457
 Board Certified Specialty: No
 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: N

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

PARKER, SHERINE

Provider ID: 205784

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

Fax: (858) 966-7433

 After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1477626513

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL

Medi-Cal Open Panel: Y


Min/Max Age: 0\19


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

QUINONES-PEREZ, BIANCA

Provider ID: 206947

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-8800


Fax: (858) 966-7433

 After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1124360565

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


QUINONES-PEREZ, BIANCA

Provider ID: 206949

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


RANASURIYA, DUNISHA

Provider ID: 216970

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):  Website: N/A

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


RATNAYAKE, KRISTIN

Provider ID: 206034

Board Certified Specialty: No

 3020 CHILDRENS WAY MC
5075

SAN DIEGO, CA 92123

 Phone: (858) 966-8800

Fax: (858) 966-7433

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1679716658

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

UCSF BENIOFF CHILDREN'S

HOSPITAL OAKLAND,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

RADY CHILDRENS HOSPITAL


SAN DIEGO


Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


PEDIATRIC EMERGENCY MEDICINE

RUSSELL, SAMUEL

Provider ID: 301249

Board Certified Specialty: No

 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: 1215564265

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


RUSSELL, SAMUEL

Provider ID: 301250

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

SALEH, FAREED

Provider ID: 206216

Board Certified Specialty: No

 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: 1366691115

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

SANACORA, RACHEL

Provider ID: 297728
Board Certified Specialty: No
📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
☎ Phone: (858) 966-8800
Fax: (858) 966-7433
🕒 After Hours Phone: (858)
966-8800
Provider Gender: Female
NPI: 1548987985

🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

SANACORA, RACHEL

Provider ID: 297729
Board Certified Specialty: No
📍 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
🌐 Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

SCHROTER, STEPHANIE

Provider ID: 243830
Board Certified Specialty: No
📍 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

SCHWARTZ, KRISTY

Provider ID: 206169
Board Certified Specialty: No
📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
☎ Phone: (858) 966-8800
Fax: (858) 966-7433
🕒 After Hours Phone: (858)
966-8800
Provider Gender: Female
NPI: 1497080808

🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
UCSF BENIOFF CHILDREN'S
HOSPITAL OAKLAND,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

SHERER, KIMBERLY

Provider ID: 284168
 Board Certified Specialty: No
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 NPI: 1992202964
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

SHETH, SARIKA
 Provider ID: 248171
 Board Certified Specialty: No
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 NPI: 1336503234
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

SOUDER, CHRISTOPHER
 Provider ID: 301636
 Board Certified Specialty: No
 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: 1851540199
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
 Medi-Cal Open Panel: N
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE




SOUDER, CHRISTOPHER
 Provider ID: 301635
 Board Certified Specialty: No
 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: N
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

TAMAS, VANESSA
 Provider ID: 206212
 Board Certified Specialty: No
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 576-1700
 Fax: (858) 966-7433
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY




MEDICINE

TANG, ANDREW

Provider ID: 294677
 Board Certified Specialty: No
 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: 1184071516

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19


American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY




MEDICINE

TODD, SARAH

Provider ID: 302800
 Board Certified Specialty: No
 4305 UNIVERSITY AVE STE
 150
 SAN DIEGO, CA 92105
 Phone: (619) 280-2905
 Fax: (619) 283-1614
 After Hours Phone: (619)
 280-2905
 Provider Gender: Female
 NPI: 1407299787

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RONALD
 REAGAN UCLA MED CTR,
 SANTA MONICA UCLA MED
 CTR, RADY CHILDRENS
 HOSPITAL SAN DIEGO, UCSD
 MEDICAL CTR




Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM
 M-F 4:00PM-10:00PM
 SA 1:00PM-10:00PM
 Website: N/A



PEDIATRIC EMERGENCY

MEDICINE

TRAN, THERESA



Provider ID: 301834
 Board Certified Specialty: No
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858)
 966-8800

Provider Gender: Female
 NPI: 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Website: N/A


PEDIATRIC EMERGENCY

MEDICINE


TRAUT, JOEL

Provider ID: 205475
 Board Certified Specialty: No
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 576-1700
 Fax: (858) 966-7433
 After Hours Phone: (858)
 576-1700

Provider Gender: Male
 NPI: 1982792065


 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO


Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A




PEDIATRIC EMERGENCY MEDICINE

TYGART, MELISSA

Provider ID: 294095
 Board Certified Specialty: No
 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: 1336602507

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO




Medi-Cal Open Panel: N
 Min/Max Age: 0\19
 American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM
 M-F 4:00PM-10:00PM
 SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE




ULRICH, STACEY

Provider ID: 205847
 Board Certified Specialty: No

 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 966-8036
 Fax: (858) 966-7433
 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: Y
 Min/Max Age: 0\19


American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA

Provider ID: 205809
 Board Certified Specialty: No
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 NPI: 1083840920


 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Y

Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A




PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA

Provider ID: 205811
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM
 M-F 4:00PM-10:00PM
 SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

VAN WOY, LAUREN

Provider ID: 301574

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

Fax: (858) 966-7433

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 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: N

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

VANE, JACKSON

Provider ID: 205883

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

VARGAS, JACLYN

Provider ID: 285935

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

VARGAS, JACLYN

Provider ID: 285934

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1619359718

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, Los Angeles General
Medical Center

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**PEDIATRIC EMERGENCY
MEDICINE**

VARGAS, JACLYN

Provider ID: 296486

Board Certified Specialty: No

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: Y
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


**PEDIATRIC EMERGENCY
MEDICINE**

VAYNGORTIN, TATYANA

Provider ID: 263012


Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800
Fax: (858) 966-7433

 After Hours Phone: (858)
966-8800

Provider Gender: Female
NPI: 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: Y
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**PEDIATRIC EMERGENCY
MEDICINE**

WANG, YVETTE

Provider ID: 263416


Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800
Fax: (858) 966-7433

 After Hours Phone: (858)
966-8800


Provider Gender: Female
NPI: 1710321278

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


**PEDIATRIC EMERGENCY
MEDICINE**

WANG, EMILY

Provider ID: 265954


Board Certified Specialty: No

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

 Phone: (619) 280-2905
Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Female
NPI: 1427142363


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Y
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**PEDIATRIC EMERGENCY
MEDICINE**

WANG, EMILY

Provider ID: 265952


Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800
Fax: (858) 966-7433

 After Hours Phone: (858)
966-8800

Provider Gender: Female
NPI: 1427142363

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP


MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL


Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**PEDIATRIC EMERGENCY
MEDICINE**

YAPHOCKUN, KAREN

Provider ID: 206184

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 576-1700

Fax: (858) 966-7433

 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: Y


Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PEDIATRIC ENDOCRINOLOGY


CYMBALUK, ANNA

Provider ID: 294214


Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC ENDOCRINOLOGY


PATTERSON, MARY

Provider ID: 206059

Board Certified Specialty: No

 3030 CHILDRENS WAY FL
4 NORTH

SAN DIEGO, CA 92123

 Phone: (858) 966-4032

Fax: (858) 966-6227

 After Hours Phone: (858)
966-4032

Provider Gender: Female

NPI: 1912112020

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC ENDOCRINOLOGY


SINGH, PUJA

Provider ID: 302818

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19





American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC ENDOCRINOLOGY



VARGAS TRUJILLO, MARCELA

Provider ID: 205605
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


PEDIATRIC
GASTROENTEROLOGY




CHU, CHRISTOPHER

Provider ID: 301639
Board Certified Specialty: No
 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: N
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC
GASTROENTEROLOGY

GOYAL, NIDHI
Provider ID: 205598
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC
GASTROENTEROLOGY
HARTMANN, PHILLIPP

Provider ID: 294228
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC
GASTROENTEROLOGY

LIN, TOM

Provider ID: 297707

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC
GASTROENTEROLOGY

PATHAK, SAGAR

Provider ID: 301825

Board Certified Specialty: No

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

Phone: (858) 966-4003

Fax: (858) 560-6798

After Hours Phone: (858) 966-4003

Provider Gender: Male

NPI: 1700318292

Provider English Spoken: Y

Provider Language(s)
Spoken: Gujarati, Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC
GASTROENTEROLOGY

SCHWARZ, KATHLEEN

Provider ID: 205885

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC
GASTROENTEROLOGY

YOUNG, JOCELYN

Provider ID: 294675

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC HEMATOLOGY /
ONCOLOGY

BRIGGS, BENJAMIN

Provider ID: 274689

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**PEDIATRIC HEMATOLOGY /
ONCOLOGY**

BUSH, KELLY

Provider ID: 274408

Board Certified Specialty: No

3010 CHILDRENS WAY STE
2
SAN DIEGO, CA 92123

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1073831079

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**PEDIATRIC HEMATOLOGY /
ONCOLOGY**

CHOO, SUN

Provider ID: 206115

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC HEMATOLOGY /

ONCOLOGY

DING, HILDA

Provider ID: 206173

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**PEDIATRIC HEMATOLOGY /
ONCOLOGY**

ELSTER, JENNIFER

Provider ID: 205769

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**PEDIATRIC HEMATOLOGY /
ONCOLOGY**

GANESAN, ANUSHA

Provider ID: 205882

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**PEDIATRIC HEMATOLOGY /
ONCOLOGY**

JAFFRAY, JULIE

Provider ID: 296760

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**PEDIATRIC HEMATOLOGY /
ONCOLOGY**

KUO, DENNIS

Provider ID: 205433

Board Certified Specialty: No

 3010 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Male

NPI: 1750492146

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**PEDIATRIC HEMATOLOGY /
ONCOLOGY**

SRIDHAR, SUNITA

Provider ID: 302088

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

WONG, VICTOR

Provider ID: 206149

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

YU, JENNIFER


Provider ID: 206148

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM


 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

YU, HELENA

Provider ID: 301583

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY


ZAGE, PETER

Provider ID: 206315

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

PEDIATRIC INFECTIOUS DISEASES

MILDER, EDMUND

Provider ID: 289138

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC NEPHROLOGY

CARTER, CAITLIN

Provider ID: 302777

Board Certified Specialty: No

8110 BIRMINGHAM WAY FL 1

SAN DIEGO, CA 92123

Phone: (858) 966-8052

Fax: (858) 966-7789

After Hours Phone: (858) 966-8052

Provider Gender: Female

NPI: 1255514618

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS GREEN

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL, UCSD

MEDICAL CTR, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC NEPHROLOGY

INGULLI, ELIZABETH

Provider ID: 302778

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PEDIATRIC NEPHROLOGY

MAK, ROBERT

Provider ID: 302776

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC NEPHROLOGY

PERENS, ELLIOT

Provider ID: 302765

Board Certified Specialty: No





8110 BIRMINGHAM WAY FL 1




SAN DIEGO, CA 92123

 Phone: (858) 966-8052
 Fax: (858) 966-7789
 After Hours Phone: (858) 966-8052
 Provider Gender: Male
 NPI: 1922328947
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, MEDICAL CTR AT UCSF, SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC PULMONOLOGY







AKONG, KATHRYN

Provider ID: 205673
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A







PEDIATRIC PULMONOLOGY

BHATTACHARJEE, RAKESH

Provider ID: 205950
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A





PEDIATRIC PULMONOLOGY

BHATTACHARJEE, RAKESH

Provider ID: 246060
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PEDIATRIC PULMONOLOGY

CERNELC KOHAN, MATEJKA

Provider ID: 243042
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY


CERNELC KOHAN, MATEJKA

Provider ID: 243041

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY


CHENG, EULALIA

Provider ID: 205827

Board Certified Specialty: No

 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: 1750394862

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRIC PULMONOLOGY


FINCH, CHRISTINA

Provider ID: 302581

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY


FIREIZEN, YARON

Provider ID: 302329

Board Certified Specialty: No

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

 Phone: (858) 966-5846


Fax: (858) 966-8457

 After Hours Phone: (858)
966-5846

Provider Gender: Male

NPI: 1699123927

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Hebrew

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY

LANDEO GUTIERREZ, JEREMY

Provider ID: 284176

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC PULMONOLOGY

LANDEO GUTIERREZ, JEREMY

Provider ID: 284177

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC PULMONOLOGY

**LENHART-PENDERGRASS,
PATRICIA**

Provider ID: 294641

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC PULMONOLOGY

RAO, APARNA

Provider ID: 206124

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC PULMONOLOGY

RAO, APARNA

Provider ID: 206123

Board Certified Specialty: No

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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 ⌚ Hours: M-F
 8:00AM-5:00PM
 🌐 Website: N/A

PEDIATRIC PULMONOLOGY
RYU, JULIE

Provider ID: 206218
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

♿ Accessibility: CONTACT
 PROVIDER
 ⌚ Hours: M-F
 8:00AM-5:00PM
 🌐 Website: N/A

PEDIATRIC PULMONOLOGY
TANTISIRA, KELAN

Provider ID: 277183
 Board Certified Specialty: No
 📍 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 📞 Phone: (858) 966-5846
 Fax: (858) 569-9052
 ⌚ After Hours Phone: (858)
 966-5846
 Provider Gender: Male
 NPI: 1760420434
 □ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 ⌚ Hours: M-F
 8:00AM-5:00PM
 🌐 Website: N/A

PEDIATRIC RHEUMATOLOGY
SHEETS, ROBERT

Provider ID: 255900
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER



PEDIATRIC RHEUMATOLOGY
CHANG, JOHANNA

Provider ID: 246394
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 ⌚ Hours: M-F
 8:00AM-5:00PM
 🌐 Website: N/A




PEDIATRIC RHEUMATOLOGY
SHEETS, ROBERT

Provider ID: 255900
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER


PROVIDER
 Hours: M-F
 8:00AM-4:30PM
 Website: N/A

PEDIATRICS




ALAGIRI, MADHU

Provider ID: 206387
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N




 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRICS

ALLSUP, VICTORIA

Provider ID: 302344
 Board Certified Specialty: No
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 Fax: (858) 633-4680
 After Hours Phone: (858)

279-0925
 Provider Gender: Female
 NPI: 1437786944
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\18
 American Sign Language (ASL):
 N


 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRICS




ALLSUP, VICTORIA

Provider ID: 302345
 Board Certified Specialty: No
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 Fax: (858) 633-4680
 After Hours Phone: (858)
 810-8700

Provider Gender: Female
 NPI: 1437786944

 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\18

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A



PEDIATRICS

ANDREE, GREGOR



Provider ID: 293219

Board Certified Specialty: No
 4305 UNIVERSITY AVE STE
 150
 SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 Fax: (858) 633-4682
 After Hours Phone: (619)
 280-2058

Provider Gender: Male
 NPI: 1467436063

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: German, Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\18

American Sign Language (ASL):
 N



 Accessibility: CONTACT
 PROVIDER
 Website: N/A

PEDIATRICS



ANDREE, GREGOR

Provider ID: 293220
 Board Certified Specialty: No
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 Fax: (858) 633-4680
 After Hours Phone: (858)
 810-8700

Provider Gender: Male
 NPI: 1467436063




 Provider English Spoken: Y
 Provider Language(s)
 Spoken: German, Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\18


American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Website: N/A



PEDIATRICS

BEAUCHAMP WALTERS, JULIA

Provider ID: 270063
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Website: N/A




PEDIATRICS

CAMERON, MELISSA

Provider ID: 205965
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRICS



CANTU, ALICIA

Provider ID: 205753
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM


 Website: N/A

PEDIATRICS




CANTU, ALICIA

Provider ID: 205752
 Board Certified Specialty: No
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 Fax: (858) 966-7433

 After Hours Phone: (858)
 966-8800
 Provider Gender: Female
 NPI: 1922179688



 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO


Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRICS

CHONG, AMY




Provider ID: 259993
 Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRICS


DOAN STEPHENS, CRYSTAL

Provider ID: 293274

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRICS

DOAN STEPHENS, CRYSTAL

Provider ID: 293275

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRICS

DOSHI, AMI

Provider ID: 205329

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS


DOSHI, AMI

Provider ID: 205330


Board Certified Specialty: No

 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: Y


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS

GIBONEY, JENNIFER

Provider ID: 296242

Board Certified Specialty: No




 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: Y
 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 9:00AM-4:00PM
 Website: N/A

PEDIATRICS







GIBONEY, JENNIFER

Provider ID: 296241
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\18
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-2:00PM
 Website: N/A








PEDIATRICS

GRAY, SARAH

Provider ID: 284224
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A






PEDIATRICS

HUANG, MARIA




Provider ID: 205974
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRICS

JIMENEZ BACARDI, ADRIA


Provider ID: 294640
 Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRICS



JINDAL, ANUJA

Provider ID: 303285
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRICS

KARMAKAR, KANKA

Provider ID: 213847
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\18
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM
 Website: N/A

PEDIATRICS




KHARE, MANASWITHA

Provider ID: 206289
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRICS



LEE, BEGEM

Provider ID: 205923
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS


LOPEZ, XIMENA

Provider ID: 302856


Board Certified Specialty: No

 3030 CHILDRENS WAY FL 4

SAN DIEGO, CA 92123


 Phone: (858) 966-4032

Fax: (858) 966-6227

 After Hours Phone: (858) 966-4032

Provider Gender: Female

NPI: 1740316405

 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A


PEDIATRICS

MANNINO AVILA, ELIZABETH


Provider ID: 262161

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A


PEDIATRICS

MARANO, RACHEL


Provider ID: 302438

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


PEDIATRICS

MARC AURELE, KRISHELLE

Provider ID: 301719

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\18

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PEDIATRICS

NGO, MAI

Provider ID: 302113

Board Certified Specialty: No

 3020 CHILDRENS WAY SAN DIEGO, CA 92123

 Phone: (858) 966-8974

Fax: (858) 966-4051

 After Hours Phone: (858)

966-8974
 Provider Gender: Female
 NPI: 1508910787
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Vietnamese
 Cultural Competency: N
 Hospital Affiliation: UCSF
 BENIOFF CHILDREN'S
 HOSPITAL OAKLAND,
 MEDICAL CTR AT UCSF, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRICS

NGO, MAI

Provider ID: 302114
 Board Certified Specialty: No
 7910 FROST ST STE 195
 SAN DIEGO, CA 92123
 Phone: (858) 966-8974
 Fax: (858) 966-6721
 After Hours Phone: (858)
 966-8974
 Provider Gender: Female
 NPI: 1508910787
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Vietnamese
 Cultural Competency: N
 Hospital Affiliation: UCSF
 BENIOFF CHILDREN'S
 HOSPITAL OAKLAND,

MEDICAL CTR AT UCSF, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRICS

PATEL, AARTI

Provider ID: 205865
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRICS

PIERCE, HEATHER
 Provider ID: 205701
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRICS

POLICH, MICHELLE

Provider ID: 286390
 Board Certified Specialty: No
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858)
 966-8800
 Provider Gender: Female
 NPI: 1780118018
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

PEDIATRICS

RHEE, KYUNG

Provider ID: 206114

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRICS

RIES, DAVID

Provider ID: 206082

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRICS

RUNGVIVATJARUS, TIRANUN

Provider ID: 206319

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRICS

SONG, RICHARD

Provider ID: 301716

Board Certified Specialty: No

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: Y

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT

 **PROVIDER**
Website: N/A


PEDIATRICS


STOVER, LAURIE

Provider ID: 206196

Board Certified Specialty: No


 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS

SUTTNER, DENISE

Provider ID: 301721

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A

PEDIATRICS

VEGA, SARAH


Provider ID: 297078

Board Certified Specialty: No

 3665 KEARNY VILLA RD
STE 500
SAN DIEGO, CA 92123


 Phone: (858) 966-5980

Fax: (858) 966-5992

 After Hours Phone: (858)
966-5980

Provider Gender: Female

NPI: 1154716199

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

VEGA, SARAH

Provider ID: 297077

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 576-1700

Fax: (858) 966-6728

 After Hours Phone: (858)
576-1700

Provider Gender: Female

NPI: 1154716199

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS

WEISS, KATHERINE

Provider ID: 301703

Board Certified Specialty: No

7910 FROST ST STE 230
SAN DIEGO, CA 92123

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1053541862

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRICS

WOSK, BERNARD

Provider ID: 294742

Board Certified Specialty: No

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: 1033154984

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**PHYSICAL MEDICINE /
REHABILITATION**

ALGRA, JEFFREY

Provider ID: 287524

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**PHYSICAL MEDICINE /
REHABILITATION**

BIFFL, SUSAN

Provider ID: 287453

Board Certified Specialty: No

7910 FROST ST STE 195
SAN DIEGO, CA 92123

Phone: (858) 966-8974
Fax: (858) 966-6721

After Hours Phone: (858)
966-8974

Provider Gender: Female

NPI: 1366589640

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**PHYSICAL MEDICINE /
REHABILITATION**

DALAL, PRITHA

Provider ID: 287523

Board Certified Specialty: No

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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICAL MEDICINE / REHABILITATION

LEE, HAEWON

Provider ID: 256226
 Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (858) 657-8200
 After Hours Phone: (858) 657-8200
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICAL MEDICINE / REHABILITATION

RICHARDSON, HENRY

Provider ID: 295276
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICAL MEDICINE / REHABILITATION

RYAN, KYLE

Provider ID: 287520
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICAL MEDICINE / REHABILITATION

SCOTT-WYARD, PHOEBE

Provider ID: 287519
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICAL MEDICINE / REHABILITATION

SKALSKY, ANDREW

Provider ID: 287537

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

AINSWORTH, DELISSA

Provider ID: 243367

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

ALBRIGHT, KELSEY

Provider ID: 284763

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 923-8273

Fax: (888) 539-8781

After Hours Phone: (800)
923-8273

Provider Gender: Female

NPI: 1235653148

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

ARMEEN, GARY

Provider ID: 247035

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

BEITTER, KEERSTIN

Provider ID: 300092

Board Certified Specialty: No

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: Female

NPI: 1477129302

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


BERGEN, SOPHEA

Provider ID: 295518

Board Certified Specialty: No

 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: Y

Min/Max Age: 16\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


BOYD, LISA

Provider ID: 217649

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


BRUECKNER, TAMMIE

Provider ID: 255558

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1407212376

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


CASTILLO, PATRICIA

Provider ID: 257530

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:30AM-5:30PM

F 8:30AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

DERISSI, DANA






Provider ID: 301632




Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123









 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 NPI: 1063829505
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi
 Cultural Competency: N
 Hospital Affiliation: LOMA
 LINDA UNIVERSITY MED CTR,
 RADY CHILDRENS HOSPITAL
 SAN DIEGO
 Medi-Cal Open Panel: N
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PHYSICIANS ASSISTANT
DOUGHERTY, CLARA









Provider ID: 301588
 Board Certified Specialty: No
 3444 KEARNY VILLA RD
 STE 202
 SAN DIEGO, CA 92123
 Phone: (858) 429-7646
 Fax: (858) 429-7646
 After Hours Phone: (858) 429-7646
 Provider Gender: Female
 NPI: 1609987619
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT
DOUGHERTY, CLARA

Provider ID: 301589
 Board Certified Specialty: No
 3444 KEARNY VILLA RD
 STE 201
 SAN DIEGO, CA 92123
 Phone: (858) 430-1101
 Fax: (858) 429-7931
 After Hours Phone: (858) 430-1101
 Provider Gender: Female
 NPI: 1609987619
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS, SCRIPPS
 MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A


PHYSICIANS ASSISTANT
DOUGHERTY, CLARA

Provider ID: 301591
 Board Certified Specialty: No
 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: 1609987619
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS, SCRIPPS
 MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT
DOUGHERTY, CLARA

Provider ID: 301586
 Board Certified Specialty: No
 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: 1609987619

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS


MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PHYSICIANS ASSISTANT

GUTH, CARA

Provider ID: 299111

Board Certified Specialty: No

 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: Y

Min/Max Age: 21\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

HASEGAWA, CHRIS

Provider ID: 287349

Board Certified Specialty: No

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225698962

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


HASEGAWA, CHRIS

Provider ID: 247206

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

HIGGINS, JOSHUA

Provider ID: 287133

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 287449

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298430

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298428

Board Certified Specialty: No

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1114459765

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

KHALEGHI, MANI

Provider ID: 295896

Board Certified Specialty: No

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123

Phone: (858) 571-3630

Fax: (858) 430-3146

After Hours Phone: (858)
571-3630

Provider Gender: Male

NPI: 1275072423

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:30AM-5:00PM
F 8:00AM-4:30PM

Website: N/A

PHYSICIANS ASSISTANT

KIVIAT, ANNETTE

Provider ID: 302452

Board Certified Specialty: No

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: N

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM


 Website: N/A

PHYSICIANS ASSISTANT


LAM, DAVINA

Provider ID: 295651

Board Certified Specialty: No

 6719 ALVARADO RD STE 308

SAN DIEGO, CA 92120

 Phone: (619) 265-7912

Fax: (619) 265-7922

 After Hours Phone: (619) 265-7912

Provider Gender: Female

NPI: 1245863737


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, ALVARADO HOSP MED CTR, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

LAMBERT, GAGE


Provider ID: 214788

Board Certified Specialty: No

 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 ENCINITAS, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


LINDEMANN, CHRISTINA

Provider ID: 283760

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

MARTIN, HALEY


Provider ID: 305026

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PHYSICIANS ASSISTANT

MCADAMS, JOSEPH

Provider ID: 280611

Board Certified Specialty: No

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1104371251

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


MERRILL, COREY

Provider ID: 258040

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PHYSICIANS ASSISTANT


NAKAMITSU, ABIGAIL

Provider ID: 268666

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

PELIO, DARREN


Provider ID: 293444

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PHYSICIANS ASSISTANT

PELIO, DARREN

Provider ID: 293441

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PHYSICIANS ASSISTANT


PERREAU, MARK

Provider ID: 283586

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM
 Website: N/A


PHYSICIANS ASSISTANT

PERREAULT, MARK

Provider ID: 283585
 Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

PHUNG, AIVI

Provider ID: 293246

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Website: N/A


PHYSICIANS ASSISTANT

PHUNG, AIVI


Provider ID: 293247

Board Certified Specialty: No

 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111


 Phone: (858) 279-0925


Fax: (858) 633-4680

 After Hours Phone: (858)
 279-0925

Provider Gender: Female

NPI: 1639528110

 Provider English Spoken: Y

 Provider Language(s)
 Spoken: Vietnamese


Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Website: N/A


PHYSICIANS ASSISTANT

PRIEST, VIVIAN

Provider ID: 272430

Board Certified Specialty: No

 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


PYLE, ALEXANDRA

Provider ID: 297718

Board Certified Specialty: No

 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: Y

Min/Max Age: 20\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:30AM-4:00PM

 Website: N/A

PHYSICIANS ASSISTANT

ROBERTS, AUDREY

Provider ID: 253253
Board Certified Specialty: No

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: Y
Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SCHMITT, EVA

Provider ID: 264176
Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800
Fax: (858) 966-7433

After Hours Phone: (858) 966-8800

Provider Gender: Female
NPI: 1174715106

Provider English Spoken: Y
Provider Language(s) Spoken: German

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: N
Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SCHROEDER, JENNIFER

Provider ID: 256639
Board Certified Specialty: No

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: Y
Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SCHROEDER, JENNIFER

Provider ID: 256640
Board Certified Specialty: No

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273
After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1780851253

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SCHULZ, STEFAN

Provider ID: 243419
Board Certified Specialty: No

200 W 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: Y
Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SHAUL, SHERA

Provider ID: 247974

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SPEH, BRIAN

Provider ID: 305009

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

STALLINGS, ANDREA

Provider ID: 255913

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

TESFAI, HELEN

Provider ID: 287372

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299600

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299599

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299598

Board Certified Specialty: No

📍 16950 VIA TAZON

SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1083823322

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

PHYSICIANS ASSISTANT

WEIR, JACQUELINE

Provider ID: 278203

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

WEIR, JACQUELINE

Provider ID: 278201

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

WEIR, JACQUELINE

Provider ID: 278200

Board Certified Specialty: No

📍 4168 FRONT ST

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1932494499

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

WRIGHT, DEREK

Provider ID: 302388
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PREVENTATIVE MEDICINE

GENERAL

ROMERO, CAMILA

Provider ID: 293289
 Board Certified Specialty: No
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 Fax: (858) 633-4680
 After Hours Phone: (858) 279-0925
 Provider Gender: Female
 NPI: 1508912130

Provider English Spoken: Y
 Provider Language(s) Spoken: French, Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PREVENTATIVE MEDICINE

GENERAL

ROMERO, CAMILA

Provider ID: 293290
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PREVENTATIVE MEDICINE

GENERAL

ROMERO, CAMILA

Provider ID: 303060

Board Certified Specialty: No

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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PSYCHOLOGIST

ABERCROMBIE, SHERI







Provider ID: 293400
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:30AM-5:30PM
SA 8:30AM-4:00PM*
 *Website: N/A*





PSYCHOLOGIST

ABERCROMBIE, SHERI




Provider ID: 290770
Board Certified Specialty: No
 *7011 LINDA VISTA RD
SAN DIEGO, CA 92111*
 *Phone: (858) 810-8787*
Fax: (858) 987-5825
 *After Hours Phone: (858)
810-8787*
Provider Gender: Female
NPI: 1932292422
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

PSYCHOLOGIST

BANKS, SARAH

Provider ID: 203173
Board Certified Specialty: No
 *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: Y
Min/Max Age: 0\999
*American Sign Language (ASL):
N*



 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

PSYCHOLOGIST

BANKS, SARAH

Provider ID: 304195
Board Certified Specialty: No
 *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: Y
Min/Max Age: 0\999
*American Sign Language (ASL):
N*


 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*




PSYCHOLOGIST

BANKS, SARAH

Provider ID: 203174

Board Certified Specialty: No
 *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: Y
Min/Max Age: 0\999
*American Sign Language (ASL):
N*



 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

PSYCHOLOGIST




BASS, GURGIANA


Provider ID: 290752
Board Certified Specialty: No
 *7011 LINDA VISTA RD
SAN DIEGO, CA 92111*
 *Phone: (858) 810-8787*
Fax: (858) 987-5825
 *After Hours Phone: (858)
810-8787*

Provider Gender: Male
NPI: 1639325277
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
*American Sign Language (ASL):
N*


 Accessibility: CONTACT PROVIDER
 Website: N/A


PSYCHOLOGIST
CHESHER, NICHOLAS

Provider ID: 273811
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST
CLEMENT, LUIS

Provider ID: 290745
 Board Certified Specialty: No

 2630 1ST AVE
 SAN DIEGO, CA 92103
 Phone: (619) 234-2158
 Fax: (619) 234-0505

 After Hours Phone: (619) 234-2158

Provider Gender: Male

NPI: 1235364712

 Provider English Spoken: Y
 Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

 Website: N/A

PSYCHOLOGIST
DEL AGUILA, FABIOLA


Provider ID: 290302
 Board Certified Specialty: No

 1016 OUTER RD
 SAN DIEGO, CA 92154

 Phone: (619) 429-3733
 Fax: (619) 628-5550

 After Hours Phone: (619) 429-3733

Provider Gender: Female
 NPI: 1720283211

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
 Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

 Website: N/A

PSYCHOLOGIST
DIOKNO, RHODA

Provider ID: 290800
 Board Certified Specialty: No

 2630 1ST AVE
 SAN DIEGO, CA 92103


 Phone: (619) 234-2158

Fax: (619) 234-0505

 After Hours Phone: (619) 234-2158

Provider Gender: Female

NPI: 1629109483


 Provider English Spoken: Y
 Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

 Website: N/A

PSYCHOLOGIST
FIRESTONE, MICHELLE

Provider ID: 290773
 Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Website: N/A

PSYCHOLOGIST
FIRESTONE, MICHELLE

Provider ID: 290954
 Board Certified Specialty: No

 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: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Website: N/A

PSYCHOLOGIST

FORZANI, CHRISTINA


Provider ID: 290780

Board Certified Specialty: No


 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 961-1497
Fax: (858) 633-4682


 After Hours Phone: (619)
961-1497

Provider Gender: Female
NPI: 1902939630

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PSYCHOLOGIST

GIAMONA, KRISTEN


Provider ID: 290801

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8787
Fax: (858) 987-5825


 After Hours Phone: (858)
810-8787

Provider Gender: Female
NPI: 1376824383

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Website: N/A


PSYCHOLOGIST

GIAMONA, KRISTEN


Provider ID: 294171

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680


 After Hours Phone: (858)
279-0925

Provider Gender: Female
NPI: 1376824383

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PSYCHOLOGIST

GOMEZ, JUANITA


Provider ID: 291424

Board Certified Specialty: No

 6030 VILLAGE WAY
SAN DIEGO, CA 92130
 Phone: (800) 926-8372
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

Provider Gender: Female
NPI: 1790915759

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Website: N/A

PSYCHOLOGIST

HANNA-HADDAD, WEGDAN



Provider ID: 303820

Board Certified Specialty: No

 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: 1457769333

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic

Cultural Competency: N
Medi-Cal Open Panel: Y







Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A





PSYCHOLOGIST

KLUEMPER, NICOLE

Provider ID: 290792
 Board Certified Specialty: No
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 Fax: (858) 279-0377
 After Hours Phone: (858)
 810-8700
 Provider Gender: Female
 NPI: 1902125818
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PSYCHOLOGIST

KLUEMPER, NICOLE




Provider ID: 296237
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PSYCHOLOGIST


LABIB, MICHAEL

Provider ID: 301617
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST





LEBENSOHN CHIALVO, FLORENCIA




Provider ID: 245225
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST

LEBENSOHN CHIALVO, FLORENCIA


Provider ID: 245224
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N


 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PSYCHOLOGIST

LINKE, SARAH

Provider ID: 273638
Board Certified Specialty: No

 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: Y
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8:00AM-5:00PM*


 *Website: N/A*

PSYCHOLOGIST

LINKE, SARAH

Provider ID: 273639
Board Certified Specialty: No

 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: Y
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*


 *Website: N/A*

PSYCHOLOGIST

MAGINOT-CHESHER, TAMARA

Provider ID: 273223
Board Certified Specialty: No

 4510 EXECUTIVE DR
 SAN DIEGO, CA 92121

 *Phone: (858) 534-8019*
Fax: (858) 534-6727

 *After Hours Phone: (858) 534-8019*

Provider Gender: Female
NPI: 1043441165

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*


 *Website: N/A*

PSYCHOLOGIST

MCCULLUM, TIFFANY

Provider ID: 290689
Board Certified Specialty: No

 286 EUCLID AVE STE 302
 SAN DIEGO, CA 92114

 *Phone: (619) 662-4100*
Fax: (619) 205-1949

 *After Hours Phone: (619) 662-4100*

Provider Gender: Female
NPI: 1528306206


 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

PSYCHOLOGIST

MONTOYA, JESSICA

Provider ID: 274619
Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PSYCHOLOGIST

NING, GRACE

Provider ID: 296219

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PSYCHOLOGIST

NING, GRACE

Provider ID: 290742

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PSYCHOLOGIST

NORMAN, MARC

Provider ID: 276869

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PSYCHOLOGIST

NORMAN, MARC

Provider ID: 272916

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PSYCHOLOGIST

ORFF, HENRY

Provider ID: 273009

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

ORTIZ, MARIA

Provider ID: 290721

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

PSYCHOLOGIST

PATTERSON-HYATT, KIMBERLY

Provider ID: 290730

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

PRINCE, RENEE

Provider ID: 303603

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-6:00PM

Website: N/A

PSYCHOLOGIST

RADOJEVIC, NATASHA

Provider ID: 290690

Board Certified Specialty: No

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 279-0377

After Hours Phone: (858) 810-8700

Provider Gender: Female

NPI: 1821365008

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Website: N/A

PSYCHOLOGIST

SHELLINGER, KRISTON

Provider ID: 213752

Board Certified Specialty: No


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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PSYCHOLOGIST


SCHELLINGER, KRISTON

Provider ID: 213750

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PSYCHOLOGIST


SCHELLINGER, KRISTON

Provider ID: 213751

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

TARLE, STEPHANIE

Provider ID: 303115

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST

TO, TUAN

Provider ID: 290285

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1255696183


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PSYCHOLOGIST

TO, TUAN

Provider ID: 290284

Board Certified Specialty: No

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Male
NPI: 1255696183
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PSYCHOLOGIST

TO, TUAN

Provider ID: 290283
Board Certified Specialty: No
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
Provider Gender: Male
NPI: 1255696183
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PSYCHOLOGIST

VANFOSSEN, BRIAN

Provider ID: 295382
Board Certified Specialty: No
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: 1396072500
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PSYCHOLOGIST

VIERLING, SABRINA

Provider ID: 290589
Board Certified Specialty: No
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: 1215288238
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER
Website: N/A

PULMONARY DISEASES



BAILEY, JACOB

Provider ID: 299924
Board Certified Specialty: No
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1598150039
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PULMONARY DISEASES

BAILEY, JACOB

Provider ID: 299923
Board Certified Specialty: No
200 W 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PULMONARY DISEASES

JOSHUA, JISHA



Provider ID: 238061
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):


N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PULMONARY DISEASES

JOSHUA, JISHA

Provider ID: 238062
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PULMONARY DISEASES

LE, HUAN

Provider ID: 27358
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 16\99
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-W 9:00AM-5:00PM
 TH 8:00AM-1:00PM
 F 9:00AM-6:00PM
 SA 8:00AM-11:00AM
 Website: N/A

PULMONARY DISEASES

LE, HUAN

Provider ID: 300636
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 ♿ Accessibility: CONTACT PROVIDER
 ⌚ Hours: M-W
 9:00AM-5:00PM
 TH 8:00AM-1:00PM
 F 9:00AM-5:00PM
 SA 8:00AM-11:00AM
 🌐 Website: N/A

PULMONARY DISEASES

MCGUIRE, WILLIAM

Provider ID: 299986
 Board Certified Specialty: No
 📍 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🌐 Website: N/A

PULMONARY DISEASES

PEARCE, ALEX

Provider ID: 300055

Board Certified Specialty: No
 📍 200 W ARBOR DR
 SAN DIEGO, CA 92103
 📞 Phone: (800) 926-8273
 Fax: (888) 539-8781
 ⌚ After Hours Phone: (800) 926-8273

Provider Gender: Female
 NPI: 1265896856
 🗣️ Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🌐 Website: N/A

RADIATION ONCOLOGY

CARMONA, RUBEN

Provider ID: 303100
 Board Certified Specialty: No
 📍 7901 FROST ST
 SAN DIEGO, CA 92123
 📞 Phone: (858) 939-5010
 Fax: (619) 740-8499
 ⌚ After Hours Phone: (858) 939-5010

Provider Gender: Male
 NPI: 1275929242
 🗣️ Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
 ⌚ Hours: M-F
 8:00AM-5:00PM
 🌐 Website: N/A

RADIATION ONCOLOGY

COLEMAN, LORI

Provider ID: 221091
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 19\100
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 ⌚ Hours: M-F
 8:00AM-5:00PM
 🌐 Website: N/A

RADIATION ONCOLOGY

HATTANGADI GLUTH, JONA

Provider ID: 262270
 Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-5:00PM
F 8:00AM-8:00PM

Website: N/A

RADIATION ONCOLOGY

HATTANGADI GLUTH, JONA

Provider ID: 254496

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-5:00PM
F 8:00AM-8:00PM

Website: N/A

RADIATION ONCOLOGY

HOOPES, DAVID

Provider ID: 262206

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

RADIATION ONCOLOGY

HOOPES, DAVID

Provider ID: 269725

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

RADIATION ONCOLOGY

MURPHY, JAMES

Provider ID: 262401

Board Certified Specialty: No

16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127

Phone: (559) 447-4949

Fax: (559) 447-4925

After Hours Phone: (559)
447-4949



Provider Gender: Male

NPI: 1730382631




Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR




Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
 Website: N/A




RADIATION ONCOLOGY
VOLPP, PAUL




Provider ID: 221105
Board Certified Specialty: No
 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: Y
Min/Max Age: 19\100
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A





RADIATION ONCOLOGY
WEINSTEIN, GEOFFREY
Provider ID: 220039
Board Certified Specialty: No
 3075 HEALTH CENTER DR
SAN DIEGO, CA 92123
 Phone: (858) 939-5010
Fax: (858) 939-5021
 After Hours Phone: (858)
939-5010

Provider Gender: Male
NPI: 1841233947
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Y
Min/Max Age: 19\100
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

RADIOLOGY DIAGNOSTIC
BERMAN, ZACHARY
Provider ID: 304163
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

RADIOLOGY DIAGNOSTIC
BERMAN, ZACHARY
Provider ID: 269318
Board Certified Specialty: No
 200 W 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

**RADIOLOGY DIAGNOSTIC
BRANCH, CODY**

Provider ID: 283675
Board Certified Specialty: No
200 W 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**RADIOLOGY DIAGNOSTIC
BRANCH, CODY**

Provider ID: 304199
Board Certified Specialty: No
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1851770622
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA Fax: (858) 795-1195
JOHN SALLY THORNTON
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A

**RADIOLOGY DIAGNOSTIC
CARSWELL, AIMEE**

Provider ID: 304194
Board Certified Specialty: No
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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A

**RADIOLOGY DIAGNOSTIC
CARSWELL, AIMEE**

Provider ID: 303055
Board Certified Specialty: No
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (858) 554-1212

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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A

**RADIOLOGY DIAGNOSTIC
CARSWELL, AIMEE**

Provider ID: 303054
Board Certified Specialty: No
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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 283228

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 304207

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 283226

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

CHEWNING, RUSH

Provider ID: 301914

Board Certified Specialty: No

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

Phone: (858) 966-8863

Fax: (858) 966-8863

After Hours Phone: (858)
966-8863

Provider Gender: Male

NPI: 1083872212

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

FAZELI, SOUDABEH

Provider ID: 299991

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): *Medi-Cal Open Panel: Y*
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

FAZELI, SOUDABEH

Provider ID: 299992

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

FAZELI, SOUDABEH

Provider ID: 304171

Board Certified Specialty: No

 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

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

FORCIER, NANCY

Provider ID: 286954

Board Certified Specialty: No

 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

FORCIER, NANCY

Provider ID: 286956

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC


FOWLER, KATHRYN

Provider ID: 201291

Board Certified Specialty: No

 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

HOSPITAL, 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: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC


FOWLER, KATHRYN

Provider ID: 201289

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


RADIOLOGY DIAGNOSTIC

HANNSUN, GEMMY

Provider ID: 282789

Board Certified Specialty: No

 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

HANNSUN, GEMMY

Provider ID: 282791

Board Certified Specialty: No

 330 LEWIS ST STE 202
SAN DIEGO, CA 92103


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1992120026

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Khmer, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC


HORKY, LAURA

Provider ID: 241853

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

RADIOLOGY DIAGNOSTIC




JAFFRAY, PAUL

Provider ID: 299958
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL


Provider ID: 304165
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL







Provider ID: 299957
Board Certified Specialty: No
 200 W 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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER

Provider ID: 304167
Board Certified Specialty: No
 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
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER

Provider ID: 271126
Board Certified Specialty: No
 200 W 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
Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER

Provider ID: 271127

Board Certified Specialty: No

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

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER

Provider ID: 283143

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER

Provider ID: 283145

Board Certified Specialty: No

330 LEWIS ST STE 202
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699125450

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

MARKS, ROBERT

Provider ID: 300065

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

MARKS, ROBERT

Provider ID: 300064

Board Certified Specialty: No

200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

RADIOLOGY DIAGNOSTIC


RITCHIE, DAVID

Provider ID: 300031
 Board Certified Specialty: No

 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N



 Accessibility: CONTACT
 PROVIDER


 Website: N/A

RADIOLOGY DIAGNOSTIC


RITCHIE, DAVID

Provider ID: 300032
 Board Certified Specialty: No

 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: 1407201916

 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N



 Accessibility: CONTACT
 PROVIDER


 Website: N/A

RADIOLOGY DIAGNOSTIC


SADAT, SAYED

Provider ID: 299969
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


 Website: N/A


RADIOLOGY DIAGNOSTIC

SADAT, SAYED


Provider ID: 304202
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N



 Accessibility: CONTACT
 PROVIDER


 Website: N/A

RADIOLOGY DIAGNOSTIC


SADAT, SAYED

Provider ID: 299968
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N



 Accessibility: CONTACT
 PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC




SCHULTZ, HEATHER

Provider ID: 240342
 Board Certified Specialty: No

 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




RADIOLOGY DIAGNOSTIC

SCHULTZ, HEATHER

Provider ID: 240344
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


RADIOLOGY DIAGNOSTIC

SEARLEMAN, ADAM



Provider ID: 299949
Board Certified Specialty: No

 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: Y
Min/Max Age: 0\999




American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A

RADIOLOGY DIAGNOSTIC

SEARLEMAN, ADAM



Provider ID: 299948
Board Certified Specialty: No

 200 W 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A


RADIOLOGY DIAGNOSTIC

SLATER, JERRY




Provider ID: 283310
Board Certified Specialty: No

 200 W 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A





RADIOLOGY DIAGNOSTIC

SLATER, JERRY

Provider ID: 283312
Board Certified Specialty: No





 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

RADIOLOGY DIAGNOSTIC
SPENGLER, NATHAN



Provider ID: 303049
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

RADIOLOGY DIAGNOSTIC
SPENGLER, NATHAN







Provider ID: 303048
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N





 Accessibility: CONTACT
 PROVIDER
 Website: N/A

RADIOLOGY DIAGNOSTIC
STRAKA, CHRISTOPHER

Provider ID: 276875
 Board Certified Specialty: No
 16918 DOVE CANYON RD
 STE 103
 SAN DIEGO, CA 92127
 Phone: (858) 649-5100

Fax: (858) 649-5099
 After Hours Phone: (858)
 649-5100
 Provider Gender: Male
 NPI: 1801281399
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 17\120
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

RADIOLOGY DIAGNOSTIC
SWEET, JASON

Provider ID: 305028
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC


TADDONIO, MICHAEL

Provider ID: 240408

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

TADDONIO, MICHAEL

Provider ID: 304179

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC


TADDONIO, MICHAEL

Provider ID: 240405

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1386987261

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC


TADDONIO, MICHAEL

Provider ID: 240407

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC

TADROS, ANTHONY

Provider ID: 268546

Board Certified Specialty: No

 200 W 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: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC

TADROS, ANTHONY

Provider ID: 304150

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

THOMPSON, COLE

Provider ID: 304175

Board Certified Specialty: No

 6655 ALVARADO RD
SAN DIEGO, CA 92120


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1700315264

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

THOMPSON, COLE

Provider ID: 299989

Board Certified Specialty: No

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1700315264

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC

THOMPSON, COLE

Provider ID: 299988

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1700315264

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

UNSDORFER, KYLE

Provider ID: 300034

Board Certified Specialty: No

 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): Min/Max Age: 0\999

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

UNSDORFER, KYLE

Provider ID: 300035

Board Certified Specialty: No

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1285165183


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC


VAHDOT, NOUSHIN

Provider ID: 300070

Board Certified Specialty: No

 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: Y

American Sign Language (ASL): MEMORIAL HOSPITAL

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC


VAHDOT, NOUSHIN

Provider ID: 300071

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH


Provider ID: 283207

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH

Provider ID: 283205

Board Certified Specialty: No

 3366 5TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 230-0400

Fax: (858) 429-7938

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC

YORK, VINCENT

Provider ID: 283517

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

YORK, VINCENT

Provider ID: 283519

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

AGUERO, PETER

Provider ID: 258299

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

AGUERO, PETER

Provider ID: 258298

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

BARTZ, BRYAN

Provider ID: 273381

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

BARTZ, BRYAN

Provider ID: 273380
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

BERGERON, PATRICK

Provider ID: 206534
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

BUNOSKY, ABIGAIL

Provider ID: 258304
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

BUNOSKY, ABIGAIL

Provider ID: 246022

Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N


Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST




CORTEZ, AARON

Provider ID: 279194
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST


COSTELLO, MARK
 Provider ID: 295634
 Board Certified Specialty: No
 7510 CLAIREMONT MESA BLVD STE 103
 SAN DIEGO, CA 92111
 Phone: (858) 277-2277
 Fax: (408) 945-4018
 After Hours Phone: (858) 277-2277
 Provider Gender: Male
 NPI: 1710193602


 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, Armenian, Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 5\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A

REGISTERED PHYSICAL THERAPIST




DANG, ERIC
 Provider ID: 258363
 Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A




REGISTERED PHYSICAL THERAPIST




DANG, KAYLEE
 Provider ID: 279261
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

FARRAR, COURTNEY
 Provider ID: 303843
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

FARRAR, COURTNEY
 Provider ID: 295259
 Board Certified Specialty: No
 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: Y

Min/Max Age: 13\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

JOHNSON, KENNADY

Provider ID: 305041

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

MC ELROY, CARTER

Provider ID: 206522

Board Certified Specialty: No

📍 8929 UNIVERSITY CENTER

LN STE 200

SAN DIEGO, CA 92122

☎ Phone: (855) 543-0333

Fax: (858) 657-6873

☎ After Hours Phone: (855) 543-0333

Provider Gender: Male

NPI: 1114472230

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Thai

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

MC ELROY, CARTER

Provider ID: 206523

Board Certified Specialty: No

📍 16950 VIA TAZON

SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1114472230

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Thai

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

NGUYEN, HARRY

Provider ID: 271871

Board Certified Specialty: No

📍 16950 VIA TAZON

SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1629558499

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

NUTHALL, KAITLIN

Provider ID: 202326

Board Certified Specialty: No

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: 1992210090

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

RICKERTS, MATTHEW

Provider ID: 287652

Board Certified Specialty: No

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1063882579

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

RUDD, CHRISTOPHER

Provider ID: 207560

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

SKINNER, NICOLE

Provider ID: 206547

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

VANDEWIELE, EMILY

Provider ID: 285183

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

VASQUEZ, BENJAMIN

Provider ID: 302870

Board Certified Specialty: No

4910 DIRECTORS PL
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1568938413

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Website: N/A

REGISTERED PHYSICAL THERAPIST

WALKER, JULIE

Provider ID: 258489

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

WILLIAMS, STACY

Provider ID: 259684

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

WILLIAMS, STACY

Provider ID: 259683

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS

Provider ID: 296929

Board Certified Specialty: No

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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A






SPEECH PATHOLOGIST
AROCHO-SALGADO, MIRELIS
 Provider ID: 296932




Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

SPEECH PATHOLOGIST
AROCHO-SALGADO, MIRELIS



Provider ID: 296930
 Board Certified Specialty: No
 9655 GRANITE RIDGE DR STE 200
 SAN DIEGO, CA 92123
 Phone: (877) 757-8353
 Fax: (818) 357-2505
 After Hours Phone: (877) 757-8353
 Provider Gender: Female
 NPI: 1063660165
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

SPEECH PATHOLOGIST
CLARK, MELISSA


Provider ID: 296921
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: SU 7:00AM-7:00PM
 M-F 7:00AM-7:00PM
 Website: N/A

SPEECH PATHOLOGIST
CLARK, MELISSA

Provider ID: 296922
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 7:00AM-9:00PM
 M-F 7:00AM-9:00PM
 Website: N/A

SPEECH PATHOLOGIST
CLARK, MELISSA

Provider ID: 296920
 Board Certified Specialty: No
 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: Y

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: SU 7:00AM-7:00PM
M-F 7:00AM-7:00PM

🌐 Website: N/A

SPEECH PATHOLOGIST

MADERA RIVERA, PAULA

Provider ID: 296578

Board Certified Specialty: No

📍 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: 1205443769

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 7:00AM-7:00PM

🌐 Website: N/A

SPEECH PATHOLOGIST

MADERA RIVERA, PAULA

Provider ID: 296576

Board Certified Specialty: No

📍 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: 1205443769

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 7:00AM-7:00PM

🌐 Website: N/A

SPEECH PATHOLOGIST

MADERA RIVERA, PAULA

Provider ID: 296575

Board Certified Specialty: No

📍 7510 CLAIREMONT MESA
BLVD STE 103

SAN DIEGO, CA 92111

☎ Phone: (858) 277-2277

Fax: (818) 357-2505

📞 After Hours Phone: (858) 277-2277

Provider Gender: Female

NPI: 1205443769

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 7:00AM-7:00PM

🌐 Website: N/A

SPEECH PATHOLOGIST

O'DORAN, KAYLA

Provider ID: 296586

Board Certified Specialty: No

📍 7510 CLAIREMONT MESA
BLVD STE 103

SAN DIEGO, CA 92111

☎ Phone: (877) 757-8353

Fax: (818) 357-2505

📞 After Hours Phone: (877) 757-8353

Provider Gender: Female

NPI: 1275021438

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish

Cultural Competency: N


Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

 Hours: M-F 7:00AM-7:00PM NPI: 1275021438

 Website: N/A

SPEECH PATHOLOGIST


O'DORAN, KAYLA

Provider ID: 296585

Board Certified Specialty: No

 9655 GRANITE RIDGE DR
STE 200

SAN DIEGO, CA 92123


 Phone: (877) 757-8353


Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1275021438

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Arabic, Armenian,
Farsi, Spanish


Cultural Competency: N


Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 7:00AM-7:00PM


 Website: N/A

SPEECH PATHOLOGIST


O'DORAN, KAYLA

Provider ID: 296588

Board Certified Specialty: No

 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

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Arabic, Armenian,
Farsi, Spanish

Cultural Competency: N


Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 7:00AM-7:00PM

 Website: N/A

SPEECH PATHOLOGIST


SCHIEDERMAYER, BENJAMIN

Provider ID: 288937


Board Certified Specialty: No

 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: Y


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SPEECH PATHOLOGIST


UNGER, LINDSEY

Provider ID: 207202

Board Certified Specialty: No

 8929 UNIVERSITY CENTER
LN STE 200

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1972936813

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Sign Language

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY CARDIOVASCULAR


FOX, KENNETH

Provider ID: 257841

Board Certified Specialty: No

 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

SURGERY CARDIOVASCULAR
GANTA, SRUJAN

Provider ID: 256383
 Board Certified Specialty: No
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-5855
 After Hours Phone: (858) 966-5855
 Provider Gender: Male
 NPI: 1265071005
 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

SURGERY CARDIOVASCULAR
LEWIS, MICHAEL

Provider ID: 296906

Board Certified Specialty: No

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: N
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

SURGERY CARDIOVASCULAR
NIGRO, JOHN

Provider ID: 205367
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

SURGERY COLON SURGERY
EISENSTEIN, SAMUEL

Provider ID: 286384
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

SURGERY COLON SURGERY
EISENSTEIN, SAMUEL

Provider ID: 286363
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL

Provider ID: 286364

Board Certified Specialty: No

📍 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

SURGERY COLON SURGERY

LIU, SHANGLEI

Provider ID: 273363

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1043558653

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UNIVERSITY HSP
OF SAN DIEGO CO

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

SURGERY COLON SURGERY

LOPEZ, NICOLE

Provider ID: 286387

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY COLON SURGERY

LOPEZ, NICOLE

Provider ID: 286366

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A







SURGERY COLON SURGERY

PARRY, LISA

Provider ID: 286341

Board Certified Specialty: No



📍 4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1235369067
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY COLON SURGERY





PARRY, LISA

Provider ID: 278553
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999




American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY COLON SURGERY

RAMAMOORTHY, SONIA



Provider ID: 286370
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N




 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL

AL-NOURI, OMAR





Provider ID: 211903
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL

ARMANI, AVA

Provider ID: 282141
 Board Certified Specialty: No
 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: MEDICAL
 CTR AT UCSF, UCSF Medical
 Center At Mission Bay, UCSF
 MEDICAL CENTER AT MOUNT
 ZION, UCSD LA JOLLA JOHN
 SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL

BARNES, RYAN

Provider ID: 129062
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 9:00AM-4:30PM
 Website: N/A

SURGERY GENERAL

BARNES, RYAN

Provider ID: 299904
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 9:00AM-4:30PM
 Website: N/A

SURGERY GENERAL

BENCH, SHAWN

Provider ID: 299895
 Board Certified Specialty: Yes
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH
 9:00AM-5:00PM
 F 9:00AM-4:00PM
 Website: N/A

SURGERY GENERAL

BENCH, SHAWN

Provider ID: 129060
 Board Certified Specialty: Yes
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM
🌐 Website: N/A

SURGERY GENERAL
BERUMEN, JENNIFER

Provider ID: 260052
Board Certified Specialty: No
📍 8001 FROST ST
SAN DIEGO, CA 92123
📞 Phone: (858) 966-5811
Fax: (858) 966-8035
🕒 After Hours Phone: (858)
966-5811

Provider Gender: Female
NPI: 1558566372
🗣️ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
RADY CHILDRENS HOSPITAL
SAN DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND
Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

SURGERY GENERAL
BRODERICK, RYAN

Provider ID: 247073
Board Certified Specialty: No
📍 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

SURGERY GENERAL
BRODERICK, RYAN

Provider ID: 286342
Board Certified Specialty: No
📍 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

SURGERY GENERAL
BRODERICK, RYAN





Provider ID: 201617
Board Certified Specialty: Yes
📍 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):




N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A




SURGERY GENERAL
BRUBAKER, ALEAH

Provider ID: 285272
Board Certified Specialty: No
📍 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A



SURGERY GENERAL


BRUBAKER, ALEAH
 Provider ID: 289164
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19

American Sign Language (ASL): **CASILLAS BERUMEN, SERGIO**
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL



CASILLAS BERUMEN, SERGIO
 Provider ID: 304608
 Board Certified Specialty: No
 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: PARADISE
 VALLEY HOSPITAL, SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, SCRIPPS MERCY
 HOSPITAL, PALOMAR
 MEDICAL CENTER
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A




SURGERY GENERAL

Provider ID: 304609
 Board Certified Specialty: No
 6402 EL CAJON BLVD STE
 100
 SAN DIEGO, CA 92115
 Phone: (619) 582-4490
 Fax: (619) 501-9702
 After Hours Phone: (619)
 582-4490
 Provider Gender: Male
 NPI: 1437470762

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: PARADISE
 VALLEY HOSPITAL, SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, SCRIPPS MERCY
 HOSPITAL, PALOMAR
 MEDICAL CENTER
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL

FAIRBANKS, TIMOTHY
 Provider ID: 260842
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL
HORGAN, SANTIAGO

Provider ID: 286379
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL
HORGAN, SANTIAGO

Provider ID: 286367
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL
IGNACIO, ROMEO

Provider ID: 217053

Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL
JACOBSEN, GARTH

Provider ID: 286356
 Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1265649966
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON
 Medi-Cal Open Panel: Y

Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL

JACOBSEN, GARTH

Provider ID: 201729
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL

JACOBSEN, GARTH

Provider ID: 286355
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL

MUELLER, GEORGE

Provider ID: 300091
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH
 8:30AM-5:00PM
 F 8:30AM-4:00PM
 Website: N/A

SURGERY GENERAL

MUELLER, GEORGE

Provider ID: 54298
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH
 8:30AM-5:00PM
 F 8:30AM-4:00PM
 Website: N/A

SURGERY GENERAL

POLLACK, LARRY

Provider ID: 54346

Board Certified Specialty: Yes

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM

Website: N/A

SURGERY GENERAL

RASCHKE, ERIC

Provider ID: 270297

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1316386659

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

SANDLER, BRYAN

Provider ID: 286383

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

SANDLER, BRYAN

Provider ID: 286357

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

SANTORELLI, JARRETT

Provider ID: 272303

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL

YU, NICHOLAS


Provider ID: 301960

Board Certified Specialty: No

 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: 1710149950

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL, SCRIPPS


MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

SURGERY GENERAL


VASCULAR

AL-NOURI, OMAR

Provider ID: 275349

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL


VASCULAR

BARLEBEN, ANDREW

Provider ID: 275372

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY HAND

CAGE, DORI NEILL

Provider ID: 296731

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

Email: DCAGE@SDHAND.ORG


SURGERY NEUROLOGICAL


BARBA, DAVID

Provider ID: 244087

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-5720

 After Hours Phone: (619)
543-5720

Provider Gender: Male

NPI: 1093730251

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, SCRIPPS
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY NEUROLOGICAL


BELVERUD, SHAWN

Provider ID: 202333

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


SURGERY NEUROLOGICAL

BEN-HAIM, SHARONA

Provider ID: 304129

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


SURGERY NEUROLOGICAL

LEVY, MICHAEL

Provider ID: 298705

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

SURGERY NEUROLOGICAL

MARSHALL, LAWRENCE

Provider ID: 244150



Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

SURGERY NEUROLOGICAL


OSORIO, JOSEPH

Provider ID: 242007

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT

PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A


SURGERY NEUROLOGICAL

OSORIO, JOSEPH

Provider ID: 304170

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

SURGERY NEUROLOGICAL


PHAM, MARTIN

Provider ID: 244158

Board Certified Specialty: No


 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A


SURGERY NEUROLOGICAL

SOUMEKH, MASSOUD

Provider ID: 257468

Board Certified Specialty: Yes

 8008 FROST ST STE 401
 SAN DIEGO, CA 92123


 Phone: (858) 560-8544

Fax: (858) 560-8546

 After Hours Phone: (858) 560-8544

Provider Gender: Male

NPI: 1265495014

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: ALVARADO HOSP MED CTR, ALVARADO HOSPITAL LLC, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH
9:00AM-4:30PM
🌐 Website: N/A
✉ Email: JSOUMEKH@AOL.COM

SURGERY NEUROLOGICAL

TOMLIN, JEFFREY

Provider ID: 272950
Board Certified Specialty: No
📍 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: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY NEUROLOGICAL

U, HOI

Provider ID: 244132
Board Certified Specialty: No
📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY ORTHOPEDIC

ANDRY, JAMES

Provider ID: 302086
Board Certified Specialty: No
📍 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: SHARP
CHULA VISTA MED CTR,
SHARP CORONADO HOSP
AND HEALTHCARE CTR, Sharp
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

SURGERY ORTHOPEDIC

BALLARD, BROOKE

Provider ID: 262204
Board Certified Specialty: No
📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
9:00AM-5:00PM

🌐 Website: N/A

SURGERY ORTHOPEDIC

BLAIS, MICAH

Provider ID: 299943
Board Certified Specialty: No
📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
 Fax: (888) 539-8781
 📞 After Hours Phone: (800) 926-8273

Provider Gender: Male
 NPI: 1972867562

🗨 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

SURGERY ORTHOPEDIC

BUI, CHRISTOPHER

Provider ID: 241162

Board Certified Specialty: No

📍 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
 8:00AM-5:00PM
 🌐 Website: N/A

SURGERY ORTHOPEDIC

BUKATA, SUSAN

Provider ID: 277948

Board Certified Specialty: No

📍 200 W ARBOR DR
 SAN DIEGO, CA 92103
 ☎ Phone: (800) 926-8273
 Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273

Provider Gender: Female
 NPI: 1932140639

🗨 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
 8:00AM-5:00PM

🌐 Website: N/A

SURGERY ORTHOPEDIC

BUKATA, SUSAN

Provider ID: 304181

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

SURGERY ORTHOPEDIC

CAMPBELL, TANNER

Provider ID: 301633

Board Certified Specialty: No

📍 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: N
 Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

SURGERY ORTHOPEDIC

CHENG, YU TSUN

Provider ID: 301903

Board Certified Specialty: No

📍 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8:00AM-5:00PM
 🌐 Website: N/A

SURGERY ORTHOPEDIC

CHIARAPPA, FRANK

Provider ID: 304174
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🌐 Website: N/A

SURGERY ORTHOPEDIC

CHOI, JIHOON

Provider ID: 284788
 Board Certified Specialty: No
 📍 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🌐 Website: N/A

SURGERY ORTHOPEDIC

CIDAMBI, EMILY

Provider ID: 296446
 Board Certified Specialty: No
 📍 3020 CHILDRENS WAY SAN DIEGO, CA 92123

☎ Phone: (858) 966-8800
 Fax: (858) 966-7433
 ☎ After Hours Phone: (858) 966-8800
 Provider Gender: Female
 NPI: 1659634699
 ☑ Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🌐 Website: N/A

SURGERY ORTHOPEDIC

CIDAMBI, EMILY

Provider ID: 246466
 Board Certified Specialty: No
 📍 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8:00AM-5:00PM
 🌐 Website: N/A

SURGERY ORTHOPEDIC

EDMONDS, ERIC

Provider ID: 205495
 Board Certified Specialty: No
 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: 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: N
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

SURGERY ORTHOPEDIC

EDMONDS, ERIC

Provider ID: 260841
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY ORTHOPEDIC

FLINT, JAMES

Provider ID: 203178
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY ORTHOPEDIC

FLINT, JAMES

Provider ID: 304177
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

SURGERY ORTHOPEDIC

GOEB, YANNICK

Provider ID: 284794
 Board Certified Specialty: No
 200 W 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: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

SURGERY ORTHOPEDIC

JACKSON, MADELEINE

Provider ID: 301818
Board Certified Specialty: No
 *3020 CHILDRENS WAY SAN DIEGO, CA 92123*
 *Phone: (858) 966-8800*
Fax: (858) 966-7433
 *After Hours Phone: (858) 966-8800*
Provider Gender: Female
NPI: 1386140085
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: N
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

SURGERY ORTHOPEDIC




KUSNEZOV, NICHOLAS
Provider ID: 303196
Board Certified Specialty: No
 *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

Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

SURGERY ORTHOPEDIC








MCKNIGHT, BRADEN

Provider ID: 303712
Board Certified Specialty: No
 *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: 1366983587
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP

CORONADO HOSP AND HEALTHCARE CTR, PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

SURGERY ORTHOPEDIC

PRUSS, ERIKA

Provider ID: 303797
Board Certified Specialty: No
 *3030 CHILDRENS WAY FL 3 SAN DIEGO, CA 92123*
 *Phone: (858) 966-6789*
Fax: (858) 966-6706
 *After Hours Phone: (858) 966-6789*
Provider Gender: Female
NPI: 1538402441
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Y
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

SURGERY ORTHOPEDIC

SULLIVAN, THOMAS

Provider ID: 285247
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY ORTHOPEDIC

SULLIVAN, THOMAS

Provider ID: 304164
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

SURGERY ORTHOPEDIC

TAYLOR, MARIO

Provider ID: 304142
 Board Certified Specialty: No
 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: 1407380512

Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

SURGERY ORTHOPEDIC

TAYLOR, MARIO

Provider ID: 299909
 Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781

After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1407380512
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

SURGERY ORTHOPEDIC

UPASANI, VIDYADHAR

Provider ID: 205914
 Board Certified Specialty: No
 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: 1548417652

Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: N
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

SURGERY ORTHOPEDIC

UPASANI, VIDYADHAR

Provider ID: 260953
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

SURGERY PEDIATRIC

BICKLER, STEPHEN
 Provider ID: 270090
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

SURGERY PEDIATRIC

GOSMAN, AMANDA
 Provider ID: 205841
 Board Certified Specialty: Yes
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

SURGERY PEDIATRIC

KELLER, BENJAMIN
 Provider ID: 272196
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

SURGERY PEDIATRIC


KELLER, BENJAMIN
 Provider ID: 285941
 Board Certified Specialty: No
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 966-7711
 Fax: (858) 966-7712
 After Hours Phone: (858) 966-7711
 Provider Gender: Male
 NPI: 1285953364
 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY PEDIATRIC

KLING, KAREN

Provider ID: 283380

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY PEDIATRIC


KLING, KAREN

Provider ID: 205340

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY PEDIATRIC


LAZAR, DAVID

Provider ID: 205606

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


SURGERY PEDIATRIC

LAZAR, DAVID

Provider ID: 283140

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PEDIATRIC

THANGARAJAH, HARIHARAN

Provider ID: 206172

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PEDIATRIC

THANGARAJAH, HARIHARAN

Provider ID: 256194

Board Certified Specialty: No

3030 CHILDRENS WAY FL 1

SAN DIEGO, CA 92123

Phone: (858) 966-7711

After Hours Phone: (858) 966-7711

Provider Gender: Male

NPI: 1598979593

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PLASTIC

HINCHCLIFF, KATHARINE

Provider ID: 277288

Board Certified Specialty: No

200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PLASTIC

HINCHCLIFF, KATHARINE

Provider ID: 277965

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PLASTIC

KOLB, FREDERIC

Provider ID: 255576

Board Certified Specialty: No

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: Y

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

SURGERY PLASTIC

KOLB, FREDERIC

Provider ID: 255575

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

SURGERY PLASTIC

KOLB, FREDERIC

Provider ID: 246240

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

SURGERY PLASTIC

KOLB, FREDERIC

Provider ID: 246239

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

SURGERY PLASTIC

LEWIS, PRIYA

Provider ID: 302132

Board Certified Specialty: No

📍 7920 FROST ST STE 200 SAN DIEGO, CA 92123

☎ Phone: (858) 966-5999

Fax: (858) 966-8394

☎ After Hours Phone: (858) 966-5999

Provider Gender: Female

NPI: 1720465024

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN


DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY PLASTIC

REID, CHRISTOPHER

Provider ID: 245523

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

SURGERY PLASTIC

REID, CHRISTOPHER


Provider ID: 255564

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY PLASTIC


REID, CHRISTOPHER

Provider ID: 224795

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY THORACIC


GANTA, SRUJAN

Provider ID: 275611

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1265071005

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN


DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

TRANSPLANT SURGERY


MEKEEL, KRISTIN


Provider ID: 262109

Board Certified Specialty: Yes

 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

TRANSPLANT SURGERY

SCHNICKEL, GABRIEL

Provider ID: 262192
 Board Certified Specialty: No
 8001 FROST ST
 SAN DIEGO, CA 92123
 Phone: (858) 966-8354
 Fax: (858) 966-5815
 After Hours Phone: (858)
 966-8354
 Provider Gender: Male
 NPI: 1619111440
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON,
 RADY CHILDRENS HOSPITAL
 SAN DIEGO
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

UROLOGY

CHEN, TONY

Provider ID: 283960
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

UROLOGY

KATZ, JONATHAN

Provider ID: 299918
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

UROLOGY

MARIETTI SHEPHERD, SARAH


Provider ID: 265122
 Board Certified Specialty: No
 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: 1801094115
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, UCSF BENIOFF
 CHILDREN'S HOSPITAL
 OAKLAND
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F

8:00AM-5:00PM
 Website: N/A

UROLOGY


MARIETTI SHEPHERD, SARAH


Provider ID: 206244
 Board Certified Specialty: No
 7930 FROST ST STE 407
 SAN DIEGO, CA 92123
 Phone: (858) 279-8527
 After Hours Phone: (858) 279-8527

Provider Gender: Female
 NPI: 1801094115
 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, UCSF BENIOFF
 CHILDREN'S HOSPITAL
 OAKLAND

Medi-Cal Open Panel: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N



 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

UROLOGY

MONGA, MANOJ

Provider ID: 256847
 Board Certified Specialty: No
 200 W 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N



 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

UROLOGY

MONGA, MANOJ

Provider ID: 274480
 Board Certified Specialty: No
 16950 VIA TAZON
 SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273


Provider Gender: Female
 NPI: 1174609127

 Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

UROLOGY

PATEL, DEVIN


Provider ID: 246094
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N



 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A




UROLOGY

SAIDIAN, AVA

Provider ID: 284831
 Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781







 After Hours Phone: (800) 926-8273



Provider Gender: Female
 NPI: 1205281912

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

UROLOGY




SALMASI, AMIRALI



Provider ID: 203122
 Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1609187962
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON,
 GROSSMONT HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM
 Website: N/A



UROLOGY

SALMASI, AMIRALI

Provider ID: 302912
 Board Certified Specialty: No
 11770 BERNARDO PLAZA
 CT STE 270
 SAN DIEGO, CA 92128
 Phone: (858) 485-0554
 After Hours Phone: (858)
 485-0554
 Provider Gender: Male
 NPI: 1609187962




 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi

Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON,
 GROSSMONT HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Website: N/A

UROLOGY



SWORDS, KELLY

Provider ID: 206183
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N


 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

UROLOGY

UNTERBERG, STEPHEN

Provider ID: 284665
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 16\110
 American Sign Language (ASL):

N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F
 8:00AM-5:00PM
 🌐 Website: N/A

UROLOGY

UNTERBERG, STEPHEN

Provider ID: 295834

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N
 ♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
 8:00AM-5:00PM

🌐 Website: N/A

UROLOGY

UNTERBERG, STEPHEN

Provider ID: 295833

Board Certified Specialty: Yes

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
 N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
 8:00AM-5:00PM

🌐 Website: N/A

UROLOGY

UNTERBERG, STEPHEN

Provider ID: 284664

Board Certified Specialty: Yes

📍 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: Y

Min/Max Age: 16\110

American Sign Language (ASL):

N
 ♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
 8:00AM-5:00PM

🌐 Website: N/A

UROLOGY

WANG, LUKE

Provider ID: 299933

Board Certified Specialty: No

📍 200 W 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
 N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

SAN MARCOS

CARDIOLOGY

DO, HULBERT

Provider ID: 295941

Board Certified Specialty: No

📍 955 BOARDWALK STE 100
 SAN MARCOS, CA 92078

☎ Phone: (760) 798-8855

Fax: (619) 616-2104

🕒 After Hours Phone: (760)

798-8855
 Provider Gender: Male
 NPI: 1679733760

Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR, Sharp
 Grossmont Hospital
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

CARDIOLOGY

DO, HULBERT

Provider ID: 291583
 Board Certified Specialty: No
 150 VALPREDA RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 Fax: (760) 736-8740
 After Hours Phone: (760)
 736-6767
 Provider Gender: Male
 NPI: 1679733760

Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR, Sharp
 Grossmont Hospital
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-8:00PM

SA 8:00AM-8:00PM
 Website: N/A

CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 245578
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A

CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 295847
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 291607
 Board Certified Specialty: No
 150 VALPREDA RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 Fax: (760) 736-8740
 After Hours Phone: (760)
 736-6767
 Provider Gender: Female
 NPI: 1811307051
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: Sharp
 Grossmont Hospital, SHARP
 CHULA VISTA MED CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F

8:00AM-5:00PM

 Website: N/A


CARDIOVASCULAR DISEASE

LERNER, JONATHAN

Provider ID: 303448

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED ACUPUNCTURIST

CARRA, BARBARA

Provider ID: 303128

Board Certified Specialty: No

 1595 GRAND AVE STE 100
SAN MARCOS, CA 92078


 Phone: (760) 736-6767


Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1588173629

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Italian, Spanish


Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED ACUPUNCTURIST

GONZALEZ, ANDRES

Provider ID: 298658

Board Certified Specialty: No

 1595 GRAND AVE STE 100
SAN MARCOS, CA 92078


 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1841857729

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

BLAND, JACELIS

Provider ID: 296766

Board Certified Specialty: No

 150 VALPREDA RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1801522859

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

SA 8:00AM-4:30PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

CARROLL, JOSEPH

Provider ID: 297852

Board Certified Specialty: No

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

Fax: (760) 736-8740


 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1598041261

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A


CERTIFIED NURSE PRACTITIONER

FODDA, RAMI
 Provider ID: 296603
 Board Certified Specialty: No
 1595 GRAND AVE STE 106
 SAN MARCOS, CA 92078
 Phone: (760) 736-6767
 Fax: (760) 736-8740
 After Hours Phone: (760)
 736-6767



Provider Gender: Male
 NPI: 1164660452
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-6:00PM
 SA 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER




GARCIA, REGINA
 Provider ID: 297837

Board Certified Specialty: No
 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: 1639673858
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999



American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER


HACINAS, REYNALDO
 Provider ID: 295052
 Board Certified Specialty: No
 150 VALPRED A RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 Fax: (760) 736-8740
 After Hours Phone: (760)
 736-6767


Provider Gender: Male
 NPI: 1215304860
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 4\999

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER




 Hours: M-F
 8:00AM-5:00PM
 SA 8:00AM-4:30PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER


HAN, ANGELA
 Provider ID: 300215
 Board Certified Specialty: No
 150 VALPRED A RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 Fax: (760) 566-1501
 After Hours Phone: (760)
 736-6767

Provider Gender: Female
 NPI: 1629242839
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Korean

Cultural Competency: N
 Hospital Affiliation: JOHN
 MUIR MEDICAL CENTER
 WALNUT CREEK CAMPUS
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

KOHOUT, KATHRYN
 Provider ID: 291105
 Board Certified Specialty: No
 150 VALPRED A RD
 SAN MARCOS, CA 92069

Phone: (760) 736-6767
Fax: (760) 556-1501

After Hours Phone: (760) 736-6767

Provider Gender: Female
NPI: 1316544331

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 14\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

MOONEY, PATRICIA

Provider ID: 280382

Board Certified Specialty: No

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: Y
Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

PARSONS, MEKRAE

Provider ID: 303220

Board Certified Specialty: No

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767
Fax: (760) 736-8740

After Hours Phone: (760) 736-6767

Provider Gender: Female
NPI: 1972090306

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

PRIETO, ALEJANDRA

Provider ID: 297888

Board Certified Specialty: No

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767
Fax: (760) 736-8740

After Hours Phone: (760) 736-6767

Provider Gender: Female
NPI: 1699222620

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish
Cultural Competency: N

Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

VAHDAT, VALERIE

Provider ID: 294758

Board Certified Specialty: No

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: Y
Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 290739

Board Certified Specialty: No

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 566-1501

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1407287469

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CHIROPRACTOR

HINES, TAYTE

Provider ID: 302081

Board Certified Specialty: No

2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069

Phone: (833) 867-4642

Fax: (360) 462-5827

After Hours Phone: (833)
867-4642

Provider Gender: Male

NPI: 1598265647

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CHIROPRACTOR

HINES, TAYTE

Provider ID: 302080

Board Certified Specialty: No

2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069

Phone: (833) 867-4642

Fax: (360) 462-5827

After Hours Phone: (833)
867-4642

Provider Gender: Male

NPI: 1598265647

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CHIROPRACTOR

MOJICA, MARIO

Provider ID: 302487

Board Certified Specialty: No

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1801962477

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 296592

Board Certified Specialty: No

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-6767

After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1275630618

Provider English Spoken: Y
Provider Language(s)
Spoken: Bengali

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 2\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

KAYAL, ANAS

Provider ID: 295512

Board Certified Specialty: No

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: Male
 NPI: 1851376917
 🗣 Provider English Spoken: Y
 🗣 Provider Language(s) Spoken: Arabic
 Cultural Competency: N
 Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER, TEMECULA VALLEY HOSPITAL INC, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8:00AM-5:00PM
 🌐 Website: N/A

INTERNAL MEDICINE

KAYAL, ANAS

Provider ID: 295513
 Board Certified Specialty: No
 📍 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: Male
 NPI: 1851376917
 🗣 Provider English Spoken: Y

🗣 Provider Language(s) Spoken: Arabic
 Cultural Competency: N
 Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER, TEMECULA VALLEY HOSPITAL INC, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8:00AM-5:00PM
 🌐 Website: N/A

INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 299258
 Board Certified Specialty: No
 📍 1595 GRAND AVE STE 100 SAN MARCOS, CA 92078
 ☎ Phone: (760) 520-8200
 Fax: (360) 462-2749
 📞 After Hours Phone: (760) 520-8200
 Provider Gender: Male
 NPI: 1467485078
 🗣 Provider English Spoken: Y
 🗣 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
 🌐 Website: N/A

INTERNAL MEDICINE

TOLENTINO, ARTURO

Provider ID: 298696
 Board Certified Specialty: No
 📍 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
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\17
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8:00AM-5:00PM
 🌐 Website: N/A

INTERVENTIONAL

CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 296052
 Board Certified Specialty: No
 📍 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: Y

Min/Max Age: 15\99

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEUROLOGY

HOSSEIN ZADEH MALEKI, ANA

Provider ID: 304998

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEUROLOGY

SORIA LOPEZ, JOSE

Provider ID: 295745

Board Certified Specialty: No

📍 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: Y

Min/Max Age: 16\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-6:00PM

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

CABRERA, MICHELLE

Provider ID: 303025

Board Certified Specialty: No

📍 150 VALPREDA RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 566-1501

☎ After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1174774723

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Adventist

Health and Rideout

Medi-Cal Open Panel: Y

Min/Max Age: 16\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

HINSHAW, PAUL

Provider ID: 288907

Board Certified Specialty: No

📍 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: Y




Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE



Provider ID: 290189
 Board Certified Specialty: No
 150 VALPRED A RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 Fax: (760) 566-1501
 After Hours Phone: (760)
 736-6767


Provider Gender: Female
 NPI: 1174703680
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: TRI CITY
 MEDICAL CTR, PALOMAR
 MEDICAL CENTER
 Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):




N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-6:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 257452
 Board Certified Specialty: No
 150 VALPRED A RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767


Fax: (760) 566-1501
 After Hours Phone: (760)
 736-6767
 Provider Gender: Female
 NPI: 1174703680
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: TRI CITY
 MEDICAL CTR, PALOMAR
 MEDICAL CENTER
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-6:00PM
 Website: N/A

OPHTHALMOLOGY




GUAN, HOWARD

Provider ID: 302370
 Board Certified Specialty: No
 100 N RANCHO SANTA FE
 RD STE 126
 SAN MARCOS, CA 92069
 Phone: (760) 598-0400
 Fax: (760) 290-7044

 After Hours Phone: (760)
 598-0400
 Provider Gender: Male
 NPI: 1134427636




Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: LOMA
 LINDA UNIVERSITY MED CTR,
 LOMA LINDA UNIVERSITY
 CHILDRENS HOSPITAL,
 RIVERSIDE COUNTY

REGIONAL MED CTR, TRI CITY
 MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 13\999
 American Sign Language (ASL):
 N



 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

GUAN, HOWARD

Provider ID: 303144
 Board Certified Specialty: No
 100 N RANCHO SANTA FE
 RD STE 126
 SAN MARCOS, CA 92069
 Phone: (760) 598-0400
 Fax: (760) 290-7044
 After Hours Phone: (760)
 598-0400

Provider Gender: Male
 NPI: 1134427636
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: LOMA
 LINDA UNIVERSITY MED CTR,
 LOMA LINDA UNIVERSITY
 CHILDRENS HOSPITAL,
 RIVERSIDE COUNTY
 REGIONAL MED CTR, TRI CITY
 MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\0
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F


8:00AM-5:00PM
 Website: N/A


OPHTHALMOLOGY

PRESTERA, TORY

Provider ID: 290590

Board Certified Specialty: Yes

 100 N RANCHO SANTA FE RD STE 126
 SAN MARCOS, CA 92069


 Phone: (760) 598-0400

Fax: (760) 598-5270

 After Hours Phone: (760) 598-0400

Provider Gender: Male

NPI: 1346224557

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish, Thai

Cultural Competency: N

Hospital Affiliation: SHARP


MEMORIAL HOSPITAL

Medi-Cal Open Panel: Y

Min/Max Age: 10\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

Email:


PRESTERA@YAHOO.COM


OPHTHALMOLOGY

PRESTERA, TORY

Provider ID: 204707

Board Certified Specialty: Yes

 100 N RANCHO SANTA FE RD STE 126
 SAN MARCOS, CA 92069


 Phone: (760) 598-0400


Fax: (760) 598-5270

 After Hours Phone: (760) 598-0400

Provider Gender: Male

NPI: 1346224557

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish, Thai

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

 Website: N/A

Email:


PRESTERA@YAHOO.COM


PEDIATRICS

LUM HO, RACHEL

Provider ID: 303150

Board Certified Specialty: No

 150 VALPREDA RD
 SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6797

 After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1215469283

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: PALOMAR


MEDICAL CENTER

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM
 SA 8:00AM-5:00PM

 Website: N/A


PEDIATRICS

LUM HO, RACHEL

Provider ID: 304047

Board Certified Specialty: No

 150 VALPREDA RD
 SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6797

 After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1215469283

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PALOMAR


MEDICAL CENTER


Medi-Cal Open Panel: Y


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM
 SA 8:00AM-5:00PM

 Website: N/A

PEDIATRICS

POSADAS, EMERITO

Provider ID: 257536




Board Certified Specialty: No

 150 VALPREDA RD
 SAN MARCOS, CA 92069

 Phone: (760) 736-6767
 Fax: (760) 566-1501
 After Hours Phone: (760) 736-6767
 Provider Gender: Male
 NPI: 1720093198
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Tagalog
 Cultural Competency: N
 Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\18
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-6:00PM
 Website: N/A

PEDIATRICS






QUINTERO, CAROLYN

Provider ID: 303142
 Board Certified Specialty: No
 150 VALPRED A RD SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 Fax: (760) 736-8740
 After Hours Phone: (760) 736-6767
 Provider Gender: Female
 NPI: 1023033156
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\18
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-6:00PM SA 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT



BERNARDO, RACHELLE

Provider ID: 297083
 Board Certified Specialty: No
 1595 GRAND AVE STE 100 SAN MARCOS, CA 92078
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Provider Gender: Female
 NPI: 1821237678
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: PALOMAR MEDICAL CENTER
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PHYSICIANS ASSISTANT







BERNARDO, RACHELLE

Provider ID: 296584
 Board Certified Specialty: No
 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: 1821237678
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: PALOMAR MEDICAL CENTER
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PHYSICIANS ASSISTANT

CELESTINO, MISHEL

Provider ID: 302439
 Board Certified Specialty: No
 150 VALPRED A RD SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 Fax: (760) 736-8740
 After Hours Phone: (760) 736-6767
 Provider Gender: Female
 NPI: 1578263760
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

GRAF, HALEY

Provider ID: 301290

Board Certified Specialty: No

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 436-6767

Fax: (760) 736-8740

After Hours Phone: (760)
436-6767

Provider Gender: Female

NPI: 1598394371

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 2\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

HERNANDEZ, MIRIAM

Provider ID: 298336

Board Certified Specialty: No

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6767

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1457903700

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

MATHIAS, WILLIAM

Provider ID: 302570

Board Certified Specialty: No

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 566-1501

After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1285806323

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

POLLEY, SHANNON

Provider ID: 296093

Board Certified Specialty: No

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1225608722

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

RAMIREZ, JOSE

Provider ID: 296080

Board Certified Specialty: No

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1497834402

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 14\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:30PM

Website: N/A

PHYSICIANS ASSISTANT

SACRAMENTO, CZAR

Provider ID: 297879

Board Certified Specialty: No

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1316957061

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SERING, MALIA

Provider ID: 297122

Board Certified Specialty: No

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Phone: (760) 738-7600

Fax: (760) 828-9138

After Hours Phone: (760)
738-7600

Provider Gender: Female

NPI: 1013198720

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SERING, MALIA

Provider ID: 269280

Board Certified Specialty: No

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Phone: (760) 738-7600

Fax: (760) 828-9138

After Hours Phone: (760)
738-7600

Provider Gender: Female

NPI: 1013198720

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

ALTAMIRANO, LEON

Provider ID: 290362

Board Certified Specialty: No

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1619271517

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PSYCHOLOGIST

ARIELLA, LYNDA

Provider ID: 299716

Board Certified Specialty: No

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1073518965

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 5\50

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

CORTIZO, ROSA

Provider ID: 290796

Board Certified Specialty: No

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)

736-6767
 Provider Gender: Female
 NPI: 1952316648
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

PSYCHOLOGIST
FLYNN, DANIELLE

Provider ID: 290795
 Board Certified Specialty: No
 150 VALPREDA RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 Fax: (760) 736-8740
 After Hours Phone: (760)
 736-6767
 Provider Gender: Female
 NPI: 1477785137
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

PSYCHOLOGIST
GEORGIEV, MARY JO

Provider ID: 290793
 Board Certified Specialty: No

150 VALPREDA RD
 SAN MARCOS, CA 92069
 Phone: (760) 737-6767
 Fax: (760) 736-8740
 After Hours Phone: (760)
 737-6767
 Provider Gender: Female
 NPI: 1518996875
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

PSYCHOLOGIST
IMAM, SYED

Provider ID: 298174
 Board Certified Specialty: No
 150 VALPREDA RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 Fax: (760) 566-1501
 After Hours Phone: (760)
 736-6767
 Provider Gender: Male
 NPI: 1447428271
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Hindi
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 15\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM

Website: N/A
PSYCHOLOGIST
LOVE, YVONNE
 Provider ID: 301277
 Board Certified Specialty: No
 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: 1902812811
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST
SIMPSON, ERIC
 Provider ID: 290803
 Board Certified Specialty: No
 150 VALPREDA RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 Fax: (760) 736-8740
 After Hours Phone: (760)
 736-6767
 Provider Gender: Male
 NPI: 1710110416
 Provider English Spoken: Y
 Cultural Competency: N

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

**PSYCHOLOGIST
 TORRES, HECTOR**

Provider ID: 290788
 Board Certified Specialty: No
 150 VALPRED A RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 Fax: (760) 736-8740
 After Hours Phone: (760) 736-6767
 Provider Gender: Male
 NPI: 1720265614

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

**RHEUMATOLOGY
 AL NAHLAWI, BASMA**

Provider ID: 290068
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

**RHEUMATOLOGY
 AL NAHLAWI, BASMA**

Provider ID: 295532
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

SAN YSIDRO

**CERTIFIED NURSE
 PRACTITIONER**

IBARRA, MARTHA
 Provider ID: 304292
 Board Certified Specialty: No
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 205-6305
 After Hours Phone: (619) 662-4100
 Provider Gender: Female
 NPI: 1114957289

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CHIROPRACTOR

KELCHNER, MATTHEW

Provider ID: 290508

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 428-4463

Fax: (619) 205-6305

After Hours Phone: (619)
428-4463

Provider Gender: Male

NPI: 1174656755

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 294925

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

FAMILY PRACTICE

ARRIETA, NOEMI

Provider ID: 297794

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM

Website: N/A

FAMILY PRACTICE

DALUGDUGAN, ESTHER

Provider ID: 302285

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6341

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1962662718

Provider English Spoken: Y
Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

FAMILY PRACTICE

MALEKMADANI, ARIENNE

Provider ID: 303333

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6341

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1124648332

Provider English Spoken: Y
Provider Language(s)
Spoken: Persian, Spanish

Cultural Competency: N


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): Provider ID: 295225

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:00PM


 Website: N/A


FAMILY PRACTICE

NAVARRO, VANESSA

Provider ID: 297756

Board Certified Specialty: No

 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100


Fax: (619) 785-3384

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1952563421

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Filipino, Spanish,
Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR


Medi-Cal Open Panel: Y


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


 Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM


 Website: N/A

FAMILY PRACTICE


ORTEGA, LUIS

Board Certified Specialty: No

 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: 1558924936

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Y


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A


FAMILY PRACTICE

ORTIZ ILIZALITURRI, ANA


Provider ID: 296008

Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1316407026

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


FAMILY PRACTICE

VAN PRATT LEVIN, AISHA

Provider ID: 303300

Board Certified Specialty: No

 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: 1821550559

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Y


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

GENERAL PRACTICE

GARCIA-SANDOVAL, DAMARIS

Provider ID: 302644
 Board Certified Specialty: No
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 662-4198
 After Hours Phone: (619) 662-4100

Provider Gender: Female
 NPI: 1447838883
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

INFECTIOUS DISEASE
ALDOUS, JEANNETTE

Provider ID: 290421
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

INTERNAL MEDICINE
BULOW, KWI

Provider ID: 302346
 Board Certified Specialty: No
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 205-6341
 After Hours Phone: (619) 662-4100

Provider Gender: Female
 NPI: 1073608576
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:00PM
 Website: N/A

INTERNAL MEDICINE
PROMER, KATHERINE

Provider ID: 293527
 Board Certified Specialty: No
 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: 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
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-8:00PM SA 8:00AM-2:00PM
 Website: N/A

INTERNAL MEDICINE
RAMIREZ SANCHEZ, CLAUDIA

Provider ID: 296122
 Board Certified Specialty: No
 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: Y
Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM


 Website: N/A


INTERNAL MEDICINE

SY, RAMON

Provider ID: 297757

Board Certified Specialty: No

 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100


Fax: (619) 785-3384

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1982617403

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL,
PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Y


Min/Max Age: 18\999


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

CARSON, LATISA


Provider ID: 290489

Board Certified Specialty: No

 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: 1245229129

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR


Medi-Cal Open Panel: Y

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

DINH, MY

Provider ID: 290490

Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173


 Phone: (619) 428-4463

Fax: (213) 250-3369

 After Hours Phone: (619)
428-4463

Provider Gender: Female

NPI: 1316146996

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Y

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

GOLDSTEIN, EDWARD

Provider ID: 290471

Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1967

 After Hours Phone: (619)
662-4100

Provider Gender: Male

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

Medi-Cal Open Panel: Y

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER
 Hours: M-F
 8:30AM-5:30PM
 SA 8:00AM-2:30PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA

Provider ID: 294885
 Board Certified Specialty: No
 4004 BEYER BLVD STE 400
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 205-6341
 After Hours Phone: (619)
 662-4100

Provider Gender: Female
 NPI: 1255878997

Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 16\999

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Hours: M-F
 8:00AM-8:00PM
 SA 8:00AM-2:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA

Provider ID: 294886
 Board Certified Specialty: No
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 205-1967
 After Hours Phone: (619)
 662-4100

Provider Gender: Female

NPI: 1255878997
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Hours: M-F
 8:00AM-8:00PM
 SA 8:00AM-2:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

JENKINS, ENCHANTA

Provider ID: 290569
 Board Certified Specialty: No
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 428-4463
 Fax: (619) 205-6305
 After Hours Phone: (619)
 428-4463

Provider Gender: Female
 NPI: 1285604702

Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY
 HOSPITAL

Medi-Cal Open Panel: Y
 Min/Max Age: 16\999

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

**MAJERSKI GONZALEZ,
 MANDY**
 Provider ID: 290725
 Board Certified Specialty: No
 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: 1982812392

Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SCRIPPS
 MERCY HOSPITAL CHULA
 VISTA, SHARP CHULA VISTA
 MED CTR

Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Hours: M-F
 8:00AM-8:00PM
 SA 8:00AM-2:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

**MAJERSKI GONZALEZ,
 MANDY**

Provider ID: 290957
 Board Certified Specialty: No
 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: 1982812392

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR
Medi-Cal Open Panel: Y
Min/Max Age: 16\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A






OPHTHALMOLOGY




DE SILVA, NIHAL

Provider ID: 290551
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100
Provider Gender: Male
NPI: 1003834789
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
MARINHEALTH AND
MARINHEALTH MEDICAL
CENTER
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

PEDIATRICS






FUJII, CINDY

Provider ID: 298309
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\18

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM
 Website: N/A

PEDIATRICS

RODRIGUEZ, ALDO








Provider ID: 295779
Board Certified Specialty: No
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 662-6305
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: SU 10:00AM-4:00PM
M 8:30AM-8:00PM
W-F 8:30AM-5:30PM
SA 8:00AM-2:30PM
 Website: N/A

PEDIATRICS

TAYLOR, TASHA

Provider ID: 290077
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

PSYCHOLOGIST

IBANEZ, BERENICE

Provider ID: 290465
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PSYCHOLOGIST

JOHNSON, JENNIFER

Provider ID: 301296
 Board Certified Specialty: No
 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: 1023783248

Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\64
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL

THERAPIST

TORRES, JOANN

Provider ID: 296045
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

SPEECH PATHOLOGIST

HILL, CARLA

Provider ID: 295894
 Board Certified Specialty: No
 3364 BEYER BLVD STE 102-103
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100

Fax: (619) 600-4870
 After Hours Phone: (619) 662-4100
 Provider Gender: Female
 NPI: 1043950751
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

SANTEE

CHIROPRACTOR

KELCHNER, MATTHEW

Provider ID: 290940
 Board Certified Specialty: No
 120 TOWN CENTER PKWY
 SANTEE, CA 92071
 Phone: (619) 662-4100
 Fax: (619) 662-4196
 After Hours Phone: (619) 662-4100
 Provider Gender: Male
 NPI: 1174656755
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

FAMILY PRACTICE

BAIOU, MOHAMED

Provider ID: 302314

Board Certified Specialty: No
 120 TOWN CENTER PKWY
 SANTEE, CA 92071
 Phone: (619) 662-4100
 Fax: (619) 662-4196
 After Hours Phone: (619) 662-4100
 Provider Gender: Male
 NPI: 1447542659
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU 8:00AM-5:00PM
 W 1:00PM-5:00PM
 TH 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

ROSENBLATT, SHERI
 Provider ID: 295738
Board Certified Specialty: No
 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: Y

Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 10:00AM-4:00PM
 M-F 8:30AM-5:30PM
 SA 10:00AM-2:30PM
 Website: N/A

RADIOLOGY DIAGNOSTIC

MOORE, BRIAN
 Provider ID: 243961
Board Certified Specialty: No
 9640 MISSION GORGE RD
 STE H
 SANTEE, CA 92071
 Phone: (619) 460-2770
 Fax: (619) 460-2774
 After Hours Phone: (619) 460-2770
 Provider Gender: Male
 NPI: 1831144005
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: GROSSMONT HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 7:00AM-5:00PM
 Website: N/A

RADIOLOGY DIAGNOSTIC

VENKATESH, VIJAY
 Provider ID: 269661
Board Certified Specialty: No
 9640 MISSION GORGE RD

STE H
 SANTEE, CA 92071
 Phone: (619) 460-2770
 Fax: (619) 460-2774
 After Hours Phone: (619) 460-2770
 Provider Gender: Male
 NPI: 1689627085
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: GROSSMONT HOSPITAL
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

BOUTELLE, DAVID
 Provider ID: 248308
Board Certified Specialty: No
 9830 PROSPECT AVE STE A
 SANTEE, CA 92071
 Phone: (619) 448-4860
 Fax: (619) 448-1639
 After Hours Phone: (760) 591-7750
 Provider Gender: Male
 NPI: 1063461101
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT

PROVIDER
 Hours: M 7:00AM-7:00PM
 TU 7:00AM-5:00PM
 W 7:00AM-7:00PM
 TH 7:00AM-5:00PM
 F 7:00AM-7:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

DANSEY, ASHLEY
 Provider ID: 270339
 Board Certified Specialty: No
 9830 PROSPECT AVE STE A
 SANTEE, CA 92071
 Phone: (619) 448-4860
 Fax: (619) 448-1639
 After Hours Phone: (619) 448-4860
 Provider Gender: Female
 NPI: 1962716076
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

REGISTERED PHYSICAL THERAPIST

LERMA, NICOLE
 Provider ID: 270343
 Board Certified Specialty: No
 9830 PROSPECT AVE STE A
 SANTEE, CA 92071
 Phone: (619) 448-4860
 Fax: (619) 448-1639
 After Hours Phone: (619) 448-4860

Provider Gender: Female
 NPI: 1790155844
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

TEMECULA

CERTIFIED ACUPUNCTURIST

CRAFT, KEVIN
 Provider ID: 290944
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: TU-F 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

MIRACLE, ANGELYN
 Provider ID: 300260
 Board Certified Specialty: No
 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: N
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A




CERTIFIED REGISTERED NURSE MIDWIFE






ZAMORA-FLYR, MARIA
 Provider ID: 290646
 Board Certified Specialty: No
 41840 ENTERPRISE CIR N
 TEMECULA, CA 92590
 Phone: (951) 225-6400
 Fax: (858) 633-4697
 After Hours Phone: (951) 225-6400
 Provider Gender: Female
 NPI: 1194938647
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PHYSICIANS ASSISTANT



ANWAR, YASMIN







Provider ID: 300846
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PODIATRIST





NEGRON, RICARDO

Provider ID: 290468
 Board Certified Specialty: No
 41840 ENTERPRISE CIR N
 TEMECULA, CA 92590
 Phone: (951) 225-6400

Fax: (858) 633-4697
 After Hours Phone: (951)
 225-6400
 Provider Gender: Male
 NPI: 1932548393
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: Providence
 St Joseph Hospital
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST

WOODWORTH, JENNIFER

Provider ID: 290633
 Board Certified Specialty: No
 41840 ENTERPRISE CIR N
 TEMECULA, CA 92590
 Phone: (951) 225-6400
 Fax: (858) 633-4697
 After Hours Phone: (951)
 225-6400
 Provider Gender: Female
 NPI: 1639362494
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH








8:00AM-5:00PM

 Website: N/A

SURGERY GENERAL

VASCULAR

HOWE, STEVEN


Provider ID: 206759
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A








VISTA

ANESTHESIOLOGY PAIN

MANAGEMENT


GUPTA, ANUJ




Provider ID: 297703
 Board Certified Specialty: No
 2023 W VISTA WAY STE D
 VISTA, CA 92083

 Phone: (619) 330-8771
 Fax: (619) 330-8772
 After Hours Phone: (619) 330-8771
 Provider Gender: Male
 NPI: 1073629549
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: POMONA VALLEY HOSP MED CTR, PARADISE VALLEY HOSPITAL, TRI CITY MEDICAL CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 16\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM
 Website: N/A
 Email: CARAMEDBILL@AOL.COM

CARDIOLOGY







PARKS, MONICA


Provider ID: 302414
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A







CARDIOVASCULAR DISEASE

DO, HULBERT





Provider ID: 290574
 Board Certified Specialty: No
 1000 VALE TERRACE DR VISTA, CA 92084
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Provider Gender: Male
 NPI: 1679733760
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 9:00AM-8:00PM

M-TH 9:00AM-8:00PM
 F 9:00AM-5:00PM
 SA 9:00AM-4:00PM
 Website: N/A

CERTIFIED ACUPUNCTURIST
SCARLETT, YVONNE

Provider ID: 290450
 Board Certified Specialty: No
 1000 VALE TERRACE DR VISTA, CA 92084
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Provider Gender: Female
 NPI: 1083026223
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CERTIFIED ACUPUNCTURIST
SONG, CAROL

Provider ID: 290550
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-TH
8:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

AYELE, MAHOGANY

Provider ID: 257587

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

BERNETICH, MEGHAN

Provider ID: 302526

Board Certified Specialty: No

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: Y

Min/Max Age: 0\24

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
9:00AM-5:00PM

SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

BERNETICH, MEGHAN

Provider ID: 304506

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

9:00AM-5:00PM

SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

CARDINELL, ANNA

Provider ID: 291411

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 301311

Board Certified Specialty: No

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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH
 8:00AM-8:00PM
 F 8:00AM-5:00PM
 SA 9:00AM-4:00PM
 Website: N/A




CERTIFIED NURSE PRACTITIONER




CHILAKA, SAMUEL
 Provider ID: 301312
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH
 8:00AM-8:00PM
 F 8:00AM-5:00PM
 SA 9:00AM-4:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER








CHRISTY, TYLER
 Provider ID: 303932
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER




CHRISTY, TYLER
 Provider ID: 303929
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER
 Provider ID: 303928
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER
 Provider ID: 303927
 Board Certified Specialty: No
 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: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

CORY, ALLISON

Provider ID: 245207

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI

Provider ID: 241907

Board Certified Specialty: No

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619246907

Provider English Spoken: Y

Provider Language(s)

Spoken: Mandarin

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-8:00PM

F 9:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HARRIS, PAMELA

Provider ID: 303439

Board Certified Specialty: No

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1407545221

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-7:00PM

F 8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HARRIS, PAMELA

Provider ID: 302286

Board Certified Specialty: No

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1407545221

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-7:00PM

F 8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HARRIS, PAMELA

Provider ID: 302291

Board Certified Specialty: No

105 DURIAN ST STE A
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1407545221

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HARRIS, PAMELA

Provider ID: 302287

Board Certified Specialty: No

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1407545221

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302297

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 304493

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302301

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302296
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 304492
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 298085
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 298083
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

KHUAT, LIEN

Provider ID: 297848
 Board Certified Specialty: No
 134 GRAPEVINE RD
 VISTA, CA 92083
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000

Provider Gender: Female
 NPI: 1366558678

Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH
 8:00AM-8:00PM
 F 8:00AM-5:00PM
 SA 9:00AM-4:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

KHUAT, LIEN

Provider ID: 297847

Board Certified Specialty: No

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: 1366558678

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-8:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

KORMANIK, PATRICIA

Provider ID: 282072

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MONTGOMERY, KEITH ALLEN

Provider ID: 295284

Board Certified Specialty: No

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: Y

Min/Max Age: 6\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:00AM-5:00PM

W 10:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MONTGOMERY, KEITH ALLEN

Provider ID: 295288

Board Certified Specialty: No

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: Y

Min/Max Age: 6\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:00AM-5:00PM

W 10:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

NICHOLAS, ESTELA

Provider ID: 239866

Board Certified Specialty: No

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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M 8:00AM-5:00PM
TU-TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM*
 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

PRITZKER, JOELY
Provider ID: 239773
Board Certified Specialty: No
 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: Y
Min/Max Age: 12\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM*
 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

SHAHBAZ, LINNAE
Provider ID: 304820
Board Certified Specialty: No
 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: 1427712215




 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\18
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: TU-W
0:00PM-8:00PM*
 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

SRILASAK, MICHELE
Provider ID: 281857
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER
Provider ID: 295507
Board Certified Specialty: No
 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: Y
Min/Max Age: 12\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-2:00PM
SA 9:00AM-4:00PM*
 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295504
 Board Certified Specialty: No
 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: Y

Min/Max Age: 12\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
 8:00AM-2:00PM
 SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295502
 Board Certified Specialty: No
 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: Y

Min/Max Age: 12\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
 8:00AM-2:00PM
 SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, JINA

Provider ID: 293676
 Board Certified Specialty: No

134 GRAPEVINE RD
 VISTA, CA 92083

Phone: (760) 631-5000
 Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1225500259

Provider English Spoken: Y
 Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-5:00PM
 TU 10:30AM-7:30PM
 W-F 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

WINDHAM, SUZONNE

Provider ID: 303721
 Board Certified Specialty: No

134 GRAPEVINE RD
 VISTA, CA 92083

Phone: (760) 631-5000
 Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1679926208

Provider English Spoken: Y
 Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 12\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
 8:00AM-5:00PM
 SA 8:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

WINDHAM, SUZONNE

Provider ID: 303840
 Board Certified Specialty: No

134 GRAPEVINE RD
 VISTA, CA 92083

Phone: (760) 631-5000
 Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1679926208

Provider English Spoken: Y
 Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 12\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
 8:00AM-5:00PM
 SA 8:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

WINDHAM, SUZONNE

Provider ID: 303724

Board Certified Specialty: No

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: 1679926208

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 12\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

SA 8:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

WINDHAM, SUZONNE

Provider ID: 303842

Board Certified Specialty: No

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: 1679926208

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 12\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

SA 8:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

WINDHAM, SUZONNE

Provider ID: 303726

Board Certified Specialty: No

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: 1679926208

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 12\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

SA 8:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

YCASAS, EMILY

Provider ID: 298837

Board Certified Specialty: No

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: Y

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM

Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

GUIDI, CASEY

Provider ID: 303315

Board Certified Specialty: No

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: Y


Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER


Hours: M-TH

8:00AM-8:00PM
 F 8:00AM-5:00PM
 SA 9:00AM-4:00PM
 Website: N/A


**CERTIFIED REGISTERED
 NURSE MIDWIFE**

GUIDI, CASEY

Provider ID: 300224
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 12\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-TH
 8:00AM-8:00PM
 F 8:00AM-5:00PM
 SA 9:00AM-4:00PM


 Website: N/A

**CERTIFIED REGISTERED
 NURSE MIDWIFE**

ZAMORA-FLYR, MARIA

Provider ID: 290641
 Board Certified Specialty: No
 134 GRAPEVINE RD
 VISTA, CA 92083
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)

631-5000
 Provider Gender: Female
 NPI: 1194938647

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


 Website: N/A

**CERTIFIED REGISTERED
 NURSE MIDWIFE**

ZAMORA-FLYR, MARIA


Provider ID: 290640
 Board Certified Specialty: No
 1000 VALE TERRACE DR
 VISTA, CA 92084
 Phone: (760) 631-5000
 After Hours Phone: (760)
 631-5000

Provider Gender: Female
 NPI: 1194938647

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N


 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-8:00PM


 Website: N/A

CHIROPRACTOR
CORTEZ, JAIME

Provider ID: 290483
 Board Certified Specialty: No
 1000 VALE TERRACE DR
 VISTA, CA 92084
 Phone: (760) 414-3892
 Fax: (760) 631-5000


 After Hours Phone: (760)
 414-3892

Provider Gender: Male
 NPI: 1508195348

 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F
 8:00AM-5:00PM



 Website: N/A

CHIROPRACTOR
JU, NATHANIEL

Provider ID: 290220
 Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH

8:00AM-8:00PM

F 9:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

CHIROPRACTOR


JU, NATHANIEL

Provider ID: 290222

Board Certified Specialty: No

 134 GRAPEVINE RD

VISTA, CA 92083


 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1972883882

 Provider English Spoken: Y

 Provider Language(s) Spoken: Chinese


Cultural Competency: N


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

FAMILY PRACTICE


HIKES, RYAN

Provider ID: 291652

Board Certified Specialty: No

 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: 1609862358

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

FAMILY PRACTICE


MARTINEZ, LESLY

Provider ID: 298007

Board Certified Specialty: No

 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: 1629509260

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:00AM-5:00PM

TU 10:00AM-7:00PM

W-F 8:00AM-5:00PM

 Website: N/A

FAMILY PRACTICE


MARTINEZ, LESLY

Provider ID: 298003

Board Certified Specialty: No

 134 GRAPEVINE RD

VISTA, CA 92083


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1629509260

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:00AM-5:00PM

TU 10:00AM-7:00PM

W-F 8:00AM-5:00PM

 Website: N/A

FAMILY PRACTICE


VIDAL, MONICA

Provider ID: 293349

Board Certified Specialty: No

 134 GRAPEVINE RD

VISTA, CA 92083

 Phone: (844) 308-5003

Fax: (760) 414-3763

 After Hours Phone: (844) 308-5003

Provider Gender: Female

NPI: 1871791749

 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M 8:00AM-5:00PM
 TU 10:30AM-7:30PM
 W-F 8:00AM-5:00PM
 Website: N/A

FAMILY PRACTICE




VIDAL, MONICA





Provider ID: 293354
 Board Certified Specialty: No
 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: 1871791749
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

HOSPICE AND PALLIATIVE

MEDICINE




RUBENZIK, TAMARA


Provider ID: 282128
 Board Certified Specialty: No
 910 SYCAMORE AVE STE
 102
 VISTA, CA 92081
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1811200652

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

INFECTIOUS DISEASE

HALPERIN, JASON

Provider ID: 296420
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M 8:00AM-5:00PM
 TU 10:30AM-7:30PM
 W-F 8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

CHEN, MAX

Provider ID: 302045
 Board Certified Specialty: No
 105 DURIAN ST STE B
 VISTA, CA 92083
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Provider Gender: Male
 NPI: 1285750356
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Burmese, Chinese,
 Mandarin, Spanish,
 Taiwanese
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TU
 8:00AM-5:00PM
 TH-F 8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

DAO, MARC

Provider ID: 297754

Board Certified Specialty: No

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: Y

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

ARRIETA, IRIS

Provider ID: 290607

Board Certified Specialty: No

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: Y

Min/Max Age: 16\999

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA

Provider ID: 282168

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

DIETERICH, FREDERICK

Provider ID: 304868

Board Certified Specialty: No

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: 1720183650

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Providence
St Jude Medical Center,
PLACENTIA LINDA HOSP,



Foothill Regional Medical
Center, LOS ALAMITOS
MEDICAL CENTER

Medi-Cal Open Panel: Y

Min/Max Age: 16\999





American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-4:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

HAWKINS, MELISSA

Provider ID: 290596
Board Certified Specialty: No
 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
Fax: (760) 414-3755
 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1851620447
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER



Medi-Cal Open Panel: Y
Min/Max Age: 16\999
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

LEON, JOSUE

Provider ID: 290729
Board Certified Specialty: No
 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: 1497799092
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER, TRI CITY
MEDICAL CTR
Medi-Cal Open Panel: Y
Min/Max Age: 16\999



American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

LEONARD, LISA

Provider ID: 290710
Board Certified Specialty: No
 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1477588598

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: Y




Min/Max Age: 16\999
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
9:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM
 Website: N/A



OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 290190
Board Certified Specialty: No
 161 THUNDER DR STE 210
VISTA, CA 92083
 Phone: (760) 757-5841
Fax: (619) 736-8740
 After Hours Phone: (760)
757-5841

Provider Gender: Female
NPI: 1174703680
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: Y
Min/Max Age: 16\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A

OBSTETRICS / GYNECOLOGY

SCHWEIKERT, SUZANNE

Provider ID: 290423
Board Certified Specialty: No

161 THUNDER DR STE 210
VISTA, CA 92083

Phone: (760) 757-5841
Fax: (619) 736-8740

After Hours Phone: (760)
757-5841

Provider Gender: Female

NPI: 1477560142

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Y

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

GEE, JENNIFER

Provider ID: 273114

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM
TU 9:30AM-5:00PM

W 8:00AM-5:00PM

TH 10:00AM-7:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

Website: N/A

OPTOMETRIST

GEE, JENNIFER

Provider ID: 290208

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-TH
8:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

OPTOMETRIST

GEE, JENNIFER

Provider ID: 290209

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM
TU 9:30AM-5:00PM

W 8:00AM-5:00PM

TH 10:00AM-7:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

Website: N/A

OPTOMETRIST

GEE, JENNIFER

Provider ID: 273113
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH
 8:00AM-8:00PM
 F 9:00AM-5:00PM
 SA 9:00AM-4:00PM
 Website: N/A

OPTOMETRIST

KASAI, SARAH
 Provider ID: 302519
 Board Certified Specialty: No
 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: 1023406238
 Provider English Spoken: Y

Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH
 8:00AM-8:00PM
 F 8:00AM-5:00PM
 SA 9:00AM-4:00PM
 Website: N/A

OPTOMETRIST

KASAI, SARAH
 Provider ID: 303740
 Board Certified Specialty: No
 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: 1023406238
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Hours: M-TH
 8:00AM-8:00PM
 F 8:00AM-5:00PM
 SA 9:00AM-4:00PM
 Website: N/A

OPTOMETRIST

KASAI, SARAH
 Provider ID: 302767

Board Certified Specialty: No
 134 GRAPEVINE RD
 VISTA, CA 92083
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Provider Gender: Female
 NPI: 1023406238
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

OPTOMETRIST

KIM, MICHAEL
 Provider ID: 290697
 Board Certified Specialty: No
 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: Y
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-W
 8:00AM-5:00PM
 TH 10:30AM-7:30PM
 F 8:00AM-5:00PM

 Website: N/A


OPTOMETRIST

KIM, MICHAEL

Provider ID: 290903

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 8:00AM-5:00PM
M-F 8:00AM-5:00PM

 Website: N/A


OPTOMETRIST

KIM, MICHAEL

Provider ID: 245239

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-W
8:00AM-5:00PM
TH 10:30AM-7:30PM

F 8:00AM-5:00PM


 Website: N/A


OPTOMETRIST

MORA, WENDY

Provider ID: 242634

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


OPTOMETRIST

MORA, WENDY

Provider ID: 290238

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OPTOMETRIST

MORA, WENDY

Provider ID: 290236

Board Certified Specialty: No

 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):



N

 Accessibility: CONTACT
PROVIDER



 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
 Website: N/A

OPTOMETRIST

TAM, EMILY


Provider ID: 290315
Board Certified Specialty: No
 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: Mandarin

Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 9:00AM-4:00PM
M-TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A



OPTOMETRIST

TAM, EMILY

Provider ID: 290316
Board Certified Specialty: No
 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: Mandarin

Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A



OPTOMETRIST

TAM, EMILY

Provider ID: 277978
Board Certified Specialty: No
 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: Mandarin

Cultural Competency: N
Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 9:00AM-4:00PM
M-TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


OPTOMETRIST

TRAN, JESSICA

Provider ID: 304595
Board Certified Specialty: No
 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
Fax: (760) 414-3702


 After Hours Phone: (760)
631-5000


Provider Gender: Female
NPI: 1457922957

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 303729
Board Certified Specialty: No
 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
Fax: (760) 414-3702

 After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1457922957

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 5\21

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 303733

Board Certified Specialty: No

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: Y

Min/Max Age: 5\21

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 304596

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

PEDIATRICS

RAHIMI, NASSRIN

Provider ID: 257581

Board Certified Specialty: No

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1063438166

Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

PROVIDER

Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

PHYSICIANS ASSISTANT

KUPIS, ROBERT

Provider ID: 291281

Board Certified Specialty: No

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: 1285676353

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 16\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

WALLACE, STEPHANIE

Provider ID: 239770

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:00AM-5:00PM
TU-TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


PODIATRIST

MILLER, JULIE

Provider ID: 290666

Board Certified Specialty: No

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000

Fax: (760) 414-3763

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619115664

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, TRI CITY MEDICAL
CTR


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


PSYCHOLOGIST


GUTIERREZ, VERONICA

Provider ID: 304731

Board Certified Specialty: No


 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1467674176

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST

GUTIERREZ, VERONICA

Provider ID: 304729

Board Certified Specialty: No

 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: 1467674176

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
9:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A

PULMONARY DISEASES

BAUTISTA, JENNIFER

Provider ID: 300864

Board Certified Specialty: No

 2067 W VISTA WAY STE 160
VISTA, CA 92083

 Phone: (760) 230-8994


Fax: (760) 944-1309

 After Hours Phone: (760)
230-8994

Provider Gender: Female

NPI: 1770727034

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL
ENCINITAS, COMMUNITY
HOSPITAL OF THE MONTEREY
PENINSULA, NATIVIDAD
MEDICAL CENTER

Medi-Cal Open Panel: Y

Min/Max Age: 21\199

American Sign Language (ASL):



N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

REGISTERED PHYSICAL

THERAPIST


AMBROSE, CHRISTOPHER




Provider ID: 248009
Board Certified Specialty: No
 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: Y
Min/Max Age: 8\125
American Sign Language (ASL):


N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M 7:00AM-7:00PM TU 7:00AM-5:00PM W 7:00AM-7:00PM TH 7:00AM-5:00PM F 7:00AM-7:00PM*
 *Website: N/A*

SURGERY GENERAL

ARMANI, AVA






Provider ID: 282144
Board Certified Specialty: No
 910 SYCAMORE AVE STE 102 VISTA, CA 92081

 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1861759383
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: MEDICAL CTR AT UCSF, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Y
Min/Max Age: 0\999
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

SURGERY GENERAL

GROVE, JAY

Provider ID: 245227
Board Certified Specialty: No
 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: Y
Min/Max Age: 0\999
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

WILDOMAR

ANESTHESIOLOGY

HYLTON, DIANA

Provider ID: 241737
Board Certified Specialty: No
 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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

KRAUSE, MARTIN

Provider ID: 287654

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

LI, JINGHONG

Provider ID: 255940

Board Certified Specialty: No

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: Y

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PULMONARY DISEASES

KUMAR, AVNEE

Provider ID: 300013

Board Certified Specialty: No

36485 INLAND VALLEY DR
WILDOMAR, CA 92595

Phone: (951) 677-1111

Fax: (951) 677-9757

After Hours Phone: (951)
677-1111

Provider Gender: Female

NPI: 1750745394

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PULMONARY DISEASES

SURI, RAJAT

Provider ID: 283349

Board Certified Specialty: No

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: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SAN DIEGO

ALVARADO HOSPITAL LLC

Provider ID: 170056

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (619) 287-3270

After Hours Phone: (619)
287-3270

Accepting New Patients: N

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: M-F
8:00AM-4:30PM

License Number: N/A

NPI: 1265468946

Website: www.alvaradohospital.com

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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: N

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: N/A

NPI: 1992880512

Website: N/A

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

POWAY

PALOMAR HEALTH

Provider ID: 170052

15615 POMERADO RD
POWAY, CA 92064

Phone: (858) 613-4000

After Hours Phone: (858)
613-4000

Accepting New Patients: N

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: 080000127

NPI: 1376513754

Website: www.palomarhealth.org/facilities/palomar-poway-outpatient

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Birthing Friendly: Y

ESCONDIDO

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: N

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: 080000083

NPI: 1457321317

Website: www.palomarhealth.org/facilities/palomar-medical-center

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

NATIONAL CITY

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: N

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: N/A

NPI: 1356410351

Website: www.paradisevall eyhospital.net

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

SAN DIEGO

**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: N

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:

JCAHO

Hours: 24 Hours / 7
days/week

License Number: N/A

NPI: 1710065933

Website: www.rchsd.org

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

LA JOLLA

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: N

Min/Max Age: 0\150

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/
ocations/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: N

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:

JCAHO

Hours: 24 Hours / 7
days/week

License Number: 080000050

NPI: 1841277704

Website: www.scripps.org/
ocations/hospitals__scripps-
memorial- hospital- la- j
olla

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: N

Min/Max Age: 0\150

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/
ocations/hospitals__scripps-
s- memorial- hospital- enci
nitas

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Birthing Friendly: Y

SAN DIEGO

SCRIPPS MERCY HOSPITAL

Provider ID: 170048

4077 5TH AVE
SAN DIEGO, CA 92103

Phone: (619) 294-8111

After Hours Phone: (619)
294-8111

Accepting New Patients: N

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:

JCAHO

ENCINITAS

🕒 Hours: 24 Hours / 7 days/week

License Number: N/A

NPI: 1659359446

🌐 Website: www.scripps.org/locations/hospitals__scripps-mercy-hospital__scripps-mercy-hospital-san-diego

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Birthing Friendly: Y

CHULA VISTA

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: N

Min/Max Age: 0\150

📄 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status: JCAHO

🕒 Hours: 24 Hours / 7 days/week

License Number: 090000074

NPI: 1659359446

🌐 Website: www.scripps.org/locations/hospitals__scripps-mercy-hospital__scripps-mercy-hospital-chula-vista

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

SAN DIEGO

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: N

Min/Max Age: 0\150

📄 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

CHULA VISTA

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: N

Min/Max Age: 0\150

📄 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status: JCAHO

🕒 Hours: 24 Hours / 7 days/week

License Number: 090000008

NPI: 1396728630

🌐 Website: www.sharp.com/hospitals/chula-vista/

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Birthing Friendly: Y

CORONADO

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: N

Min/Max Age: 0\150

📄 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status: JCAHO

🕒 Hours: 24 Hours / 7 days/week

License Number: N/A

NPI: 1154304475

🌐 Website: www.sharp.com/hospitals/coronado/

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

SAN DIEGO

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: N

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: 080000039

NPI: 1407839921

Website: www.sharp.com

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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: N

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: N/A

NPI: 1407839921

Website: www.sharp.com/hospitals/memorial/

American Sign Language (ASL): Accepting New Patients: N
N

Accessibility: CONTACT
PROVIDER

Birthing Friendly: Y

OCEANSIDE

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: N

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: N/A

NPI: 1801861190

Website: www.tricitymed.org

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Birthing Friendly: Y

LA JOLLA

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

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: 090000101

NPI: 1497021265

Website: N/A

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

SAN DIEGO

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: N

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: 090000101

NPI: 1184722779

Website: <https://health.ucsd.edu/locations/pages/hillcrest.aspx>

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Birthing Friendly: Y

.D5 مقدمو خدمات برنامج الخدمات والدعم طويل الأجل (LTSS)
.A الرعاية الطويلة الأجل (LTC) ومرفق التمريض الماهر (SNF)

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: N

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: N

NPI: 1538142369

Website: www.sharp.com/hospitals/chula-vista/departments/skilled-nursing.cfm

Credentials and/or
certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

SOUTH BAY POST ACUTE CARE

Provider ID: 394308

553 F ST
CHULA VISTA, CA 91910

Phone: (619) 426-8611

Fax: (619) 240-7378

After Hours Phone: (619)
426-8611

Accepting New Patients: N

Hours: M-F
9:00AM-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: N

NPI: 1184607418

Website: www.sharp.com/hospitals/coronado/departments/long-term-care.cfm

Credentials and/or
certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

EL CAJON

AVOCADO POST ACUTE

Provider ID: 171985

510 E WASHINGTON AVE
EL CAJON, CA 92020

Phone: (619) 440-1211

Fax: (619) 956-3929

After Hours Phone: (619)
440-1211

Accepting New Patients: N

NPI: 1568484517

Website: www.avocadopostacute.com

Credentials and/or
certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

COTTONWOOD CANYON HEALTHCARE CENTER

Provider ID: 171983

1391 E MADISON AVE
EL CAJON, CA 92021

Phone: (619) 444-1107

**.D5 مقدمو خدمات برنامج الخدمات والدعم طويل الأجل (LTSS)
.A الرعاية الطويلة الأجل (LTC) ومرفق التمريض الماهر (SNF)**

Fax: (619) 444-1403

☎ After Hours Phone: (619)
444-1107

Accepting New Patients: N

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

Fax: (619) 442-2553

☎ After Hours Phone: (619)
441-8745

Accepting New Patients: N

NPI: 1700973963

🌐 Website: www.countryhills.com

Credentials and/or
certifications:

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
American Sign Language,
Arabic, Korean, Spanish,
Tagalog, Farsi, Vietnamese,
Mandarin

Cultural Competency: N

American Sign Language (ASL):

Y

♿ Accessibility: CONTACT
PROVIDER

COUNTRY HILLS POST ACUTE

Provider ID: 503510

📍 1580 BROADWAY
EL CAJON, CA 92021

☎ Phone: (619) 441-8745

Fax: (619) 441-9029

☎ After Hours Phone: (619)
441-8745

Accepting New Patients: N

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: N

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: N

NPI: 1316340227

🌐 Website: N/A
Credentials and/or

certifications:

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

**PARKSIDE HEALTH AND
WELLNESS CENTER**

Provider ID: 349923

📍 444 W LEXINGTON AVE
EL CAJON, CA 92020

☎ Phone: (619) 442-7744

☎ After Hours Phone: (619)
442-7744

Accepting New Patients: N

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


**.D5 مقدمو خدمات برنامج الخدمات والدعم طويل الأجل (LTSS)
الرعاية الطويلة الأجل (LTC) ومرفق التمريض الماهر (SNF)**

 *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: N

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: (619) 423-3631

 *After Hours Phone: (619) 442-0245*

Accepting New Patients: N

NPI: 1073916987


 *Website: <http://somensetsubacute.com>*

Credentials and/or certifications:

 *Site English Spoken: Y*

Cultural Competency: N


American Sign Language (ASL): American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

THE BRADLEY COURT

Provider ID: 419158

 675 E BRADLEY AVE
EL CAJON, CA 92021

 *Phone: (619) 448-6633*

Fax: (619) 448-5462

 *After Hours Phone: (619) 448-6633*


Accepting New Patients: N

NPI: 1629129267

 *Website: N/A*
Credentials and/or

certifications:

 *Site English Spoken: Y*

 *Site Language(s) Spoken:*

Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL):


N


 *Accessibility: CONTACT PROVIDER*

VICTORIA POST ACUTE CARE

Provider ID: 387720

 654 S ANZA ST
EL CAJON, CA 92020

 *Phone: (619) 440-5005*

 *After Hours Phone: (619) 440-5005*

Accepting New Patients: N

NPI: 1326441239

 *Website: www.VICTORIAPOSTACUTE.com*

Credentials and/or certifications:

 *Site English Spoken: Y*


Cultural Competency: 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: N

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
EL CAJON, CA 92020

 *Phone: (619) 442-0544*

 *After Hours Phone: (619) 442-0544*

Accepting New Patients: N

NPI: 1023048295

 *Website: <http://villalaspalmascares.com>*


Credentials and/or certifications:

 *Site English Spoken: Y*

Cultural Competency: N





American Sign Language (ASL):


**.D5 مقدمو خدمات برنامج الخدمات والدعم طويل الأجل (LTSS)
I. الرعاية الطويلة الأجل (LTC) ومرفق التمريض الماهر (SNF)**

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: N
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: N
 *Hours: M-F 8:00AM-5:00PM*
NPI: 1265415749
 *Website: www.covenantcare.com*

Credentials and/or certifications:
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
Cultural Competency: N
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

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: N
 *Hours: M-F 8:00AM-4:30PM*
NPI: 1588660765
 *Website: <http://escondidopostacute.com>*

Credentials and/or certifications:
 Site English Spoken: Y
 Site Languages(s) Spoken: Tagalog, Spanish
Cultural Competency: N
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

LIFE CARE CENTER OF ESCONDIDO

Provider ID: 172010
 1980 FELICITA RD

ESCONDIDO, CA 92025
 *Phone: (760) 741-6109*
 *After Hours Phone: (760) 741-6109*
Accepting New Patients: N
NPI: 1386681286
 *Website: <http://lifecarecentrofescondido.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*
Fax: (760) 746-1201
 *After Hours Phone: (760) 746-1100*
Accepting New Patients: N
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

**.D5 مقدمو خدمات برنامج الخدمات والدعم طويل الأجل (LTSS)
.A الرعاية الطويلة الأجل (LTC) ومرفق التمريض الماهر (SNF)**

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: N

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: N

Hours: M-F
8:00AM-5:00PM

NPI: 1659369262

Website: www.covenantcare.com

Credentials and/or
certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FALLBROOK

FALLBROOK SKILLED NURSING

Provider ID: 298744

325 POTTER ST
FALLBROOK, CA 92028

Phone: (760) 728-2330

Fax: (909) 863-4644

After Hours Phone: (760)
728-2330

Accepting New Patients: N

Hours: M-F
8:00AM-5:00PM

NPI: 1265823264

Website: www.progressivecarecenters.com

Credentials and/or
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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: N

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: N

Hours: M-F
8:00AM-5:00PM

NPI: 1457486078

Website: www.covenantcare.com

Credentials and/or
certifications:

Site English Spoken: Y

Site Languages(s) Spoken: ,
Spanish

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

THE COVE AT LA JOLLA

Provider ID: 305514

7160 FAY AVE
LA JOLLA, CA 92037

Phone: (858) 459-4361


After Hours Phone: (858)
459-4361

Accepting New Patients: N

Hours: M-F 7:30AM-4:00PM

**.D5 مقدمو خدمات برنامج الخدمات والدعم طويل الأجل (LTSS)
I. الرعاية الطويلة الأجل (LTC) ومرفق التمريض الماهر (SNF)**


NPI: 1588067482

 Website: <http://thecoveatla.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: N
NPI: 1356345706

 Website: www.lifegen.net/arborhills/

Credentials and/or certifications:


Site English Spoken: Y
 Site Language(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: N
NPI: 1235404674

 Website: www.neurorestorative.com

Credentials and/or certifications:


Site English Spoken: Y
Cultural Competency: N



American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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: N
NPI: 1457345001

 Website: N/A
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: N
NPI: 1417930249

 Website: www.sharp.com/hospitals/grossmont/departments/skilled-nursing.cfm

Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

GROSSMONT POST ACUTE CARE

Provider ID: 310488

 8787 CENTER DR
LA MESA, CA 91942

 Phone: (619) 460-4444
Fax: (619) 713-5116

 After Hours Phone: (619) 460-4444


Accepting New Patients: N
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

LA MESA HEALTHCARE CTR

Provider ID: 172022

 3780 MASSACHUSETTS

D5. مقدمو خدمات برنامج الخدمات والدعم طويل الأجل (LTSS)
I. الرعاية الطويلة الأجل (LTC) ومرفق التمريض الماهر (SNF)

AVE
LA MESA, CA 91941
Phone: (619) 465-1313
Fax: (619) 465-8429
After Hours Phone: (619)
465-1313

Accepting New Patients: N
NPI: 1003852666

Website: <http://lamesahealthcare.com>

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PARKWAY HILLS NURSING & REHAB

Provider ID: 417047

7760 PARKWAY DR
LA MESA, CA 91942

Phone: (619) 469-0124
Fax: (619) 828-7654

After Hours Phone: (619)
469-0124

Accepting New Patients: N

Hours: M-TH
9:00AM-5:00PM
F 5:00AM-5:00PM

NPI: 1174926448

Website: N/A

Credentials and/or
certifications:

Site English Spoken: Y

Site Language(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: N

NPI: 1760709687

Website: www.bellavistahealth.com

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

LEMON GROVE CARE AND REHAB CTR

Provider ID: 172013

8351 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 463-0294
Fax: (619) 461-1064

After Hours Phone: (619)
463-0294

Accepting New Patients: N

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: N
NPI: 1497759856

Website: www.lifegen.net/castlemanor/index.html

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FRIENDSHIP MANOR NURSING AND REHABILITATION CTR

Provider ID: 171973

902 EUCLID AVE
NATIONAL CITY, CA 91950

Phone: (619) 791-7700
Fax: (619) 791-7791

After Hours Phone: (619)
791-7700




Accepting New Patients: N





Hours: M-F
9:00AM-5:00PM

NPI: 1235133687






**.D5 مقدمو خدمات برنامج الخدمات والدعم طويل الأجل (LTSS)
 .1 الرعاية الطويلة الأجل (LTC) ومرفق التمريض الماهر (SNF)**

 Website: www.lifegen.net/fr
 iendshipmanor/
 Credentials and/or
 certifications:
 Site English Spoken: Y
 Cultural Competency: N
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER




 Website: www.windsorcare.com
 Credentials and/or
 certifications:
 Site English Spoken: Y
 Cultural Competency: N
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

 After Hours Phone: (760)
 721-1706
 Accepting New Patients: N
 NPI: 1962488007
 Website: N/A
 Credentials and/or
 certifications:
 Site English Spoken: Y
 Cultural Competency: N
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

**PARADISE VALLEY HEALTH
 CARE CENTER**







Provider ID: 171106
 2575 E 8TH ST
 NATIONAL CITY, CA 91950
 Phone: (619) 470-6700
 After Hours Phone: (619)
 470-6700
 Accepting New Patients: N
 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: N
 NPI: 1730176538

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: N
 NPI: 1265462436
 Website: [WWW.LAPALOMA
 HEALTHCARE.COM](http://WWW.LAPALOMAHEALTHCARE.COM)
 Credentials and/or
 certifications:
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish, Armenian, Korean,
 Tagalog
 Cultural Competency: N
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

MCNEALY HOUSE



Provider ID: 662925
 4602 ALLENDE AVE
 OCEANSIDE, CA 92057
 Phone: (760) 721-1706
 Fax: (760) 721-9872

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: N
 NPI: 1962488007
 Website: N/A
 Credentials and/or
 certifications:
 Site English Spoken: Y
 Cultural Competency: N
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

POWAY

BOULDER CREEK POST ACUTE

Provider ID: 276987
 12696 MONTE VISTA RD
 POWAY, CA 92064
 Phone: (858) 487-6242
 Fax: (858) 487-4282

**.D5 مقدمو خدمات برنامج الخدمات والدعم طويل الأجل (LTSS)
.ا الرعاية الطويلة الأجل (LTC) ومرفق التمريض الماهر (SNF)**

☎ After Hours Phone: (858)
487-6242

Accepting New Patients: N

🕒 Hours: M-F
8:00AM-5:30PM

NPI: 1073902672

🌐 Website: [http://bouldercre
ekpa.com](http://bouldercre
ekpa.com)

Credentials and/or
certifications:

☑ Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

**POWAY HEALTHCARE
CENTER**

Provider ID: 171989

📍 15632 POMERADO RD
POWAY, CA 92064

☎ Phone: (858) 485-5153
Fax: (858) 485-7694

☎ After Hours Phone: (858)
485-5153

Accepting New Patients: N
NPI: 1407035512

🌐 Website: [http://powaycare.
com](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: N
NPI: 1619947090

🌐 Website: [www.palomarheal
th.org/skilled-
nursing/villa-
pomerado](http://www.palomarheal
th.org/skilled-
nursing/villa-
pomerado)

Credentials and/or
certifications:

☑ Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

SAN DIEGO

ACCESS TO INDEPENDENCE

Provider ID: 417267

📍 8885 RIO SAN DIEGO DR
STE 131

SAN DIEGO, CA 92108
☎ Phone: (619) 293-3500

Fax: (619) 704-2054

☎ After Hours Phone: (619)
293-3500

Accepting New Patients: N

🕒 Hours: M-F
8:00AM-5:00PM

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: N

🕒 Hours: SU-SA
9:00AM-5:00PM

NPI: 1487640066

🌐 Website: [http://arroyovista
care.com](http://arroyovista
care.com)

Credentials and/or
certifications:

☑ Site English Spoken: Y

☑ Site Languages(s) Spoken:
Mandarin, Spanish,
Vietnamese, Arabic,
Tagalog

Cultural Competency: N

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

**BALBOA NURSING AND
REHAB CTR**

Provider ID: 416840

📍 3520 4TH AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 291-5270

☎ After Hours Phone: (619)
291-5270

Accepting New Patients: N

NPI: 1578521274

🌐 Website: [http://balboahc.c
om](http://balboahc.c
om)

Credentials and/or
certifications:

☑ Site English Spoken: Y

☑ Site Languages(s) Spoken:

**.D5 مقدمو خدمات برنامج الخدمات والدعم طويل الأجل (LTSS)
 .1 الرعاية الطويلة الأجل (LTC) ومرفق التمريض الماهر (SNF)**

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
 Fax: (619) 264-9231
 After Hours Phone: (619)
 263-2166
 Accepting New Patients: N
 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: N
 NPI: 1083727093
 Website: [http://carmelmou
 ntain.net](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: N
 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: N
 Hours: M-F
 8:00AM-5:00PM
 NPI: 1558825067
 Website: N/A
 Credentials and/or
 certifications:
 Site English Spoken: Y
 Cultural Competency: N
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

**JACOB HEALTH CARE CENTER
 LLC**


Provider ID: 172617
 4075 54TH ST
 SAN DIEGO, CA 92105
 Phone: (619) 582-5168
 Fax: (619) 325-0194
 After Hours Phone: (619)
 582-5168
 Accepting New Patients: N
 NPI: 1881684900
 Website: [www.jacobhealthc
 are.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**


**.D5 مقدمو خدمات برنامج الخدمات والدعم طويل الأجل (LTSS)
 .A الرعاية الطويلة الأجل (LTC) ومرفق التمريض الماهر (SNF)**

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: N

NPI: 1669875563

 Website: <http://missionhillspostacute.com>

Credentials and/or
 certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
 Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL):
 N


 Accessibility: CONTACT
 PROVIDER

RADY CHILDRENS

CONVALESCENT HOSPITAL

Provider ID: 172200

 8022 BIRMINGHAM DR
 SAN DIEGO, CA 92123


 Phone: (858) 966-5833

Fax: (858) 966-8558

 After Hours Phone: (858)
 966-5833

Accepting New Patients: N

NPI: 1992881478


 Website: www.rchsd.org

Credentials and/or
 certifications:

Site English Spoken: Y

Cultural Competency: N


American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

REO VISTA HEALTHCARE CTR

Provider ID: 171993

 6061 BANBURY ST
 SAN DIEGO, CA 92139


 Phone: (619) 475-2211

Fax: (619) 479-9126

 After Hours Phone: (619)
 475-2211

Accepting New Patients: N

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: N

NPI: 1972619104

 Website: N/A

Credentials and/or
 certifications: CMS

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):
 N


 Accessibility: CONTACT


PROVIDER

**THE PAVILION AT OCEAN
 POINT**

Provider ID: 262151

 3202 DUKE ST
 SAN DIEGO, CA 92110

 Phone: (619) 224-4141

 After Hours Phone: (619)
 224-4141

Accepting New Patients: N

NPI: 1538174990


 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: N

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

.D5 مقدمو خدمات برنامج الخدمات والدعم طويل الأجل (LTSS)
.A الرعاية الطويلة الأجل (LTC) ومرفق التمريض الماهر (SNF)

American Sign Language (ASL): certifications:

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: N

NPI: 1518063437

Website: www.villaranchobernardo.com

Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

WINDSOR GARDENS CONV AND REHAB OF GOLDEN HILL

Provider ID: 172012

1201 34TH ST
SAN DIEGO, CA 92102

Phone: (619) 232-2946

Fax: (310) 595-3529

After Hours Phone: (619) 232-2946

Accepting New Patients: N

NPI: 1811963028

Website: <https://windsorgoldenhill.com>

Credentials and/or

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

SAN MARCOS

CARLO HOUSE

Provider ID: 662931

411 CARLO ST
SAN MARCOS, CA 92078

Phone: (760) 721-1706

Fax: (760) 721-9872

After Hours Phone: (760) 721-1706

Accepting New Patients: N

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: N

Hours: SU-SA
8:00AM-5:00PM

NPI: 1184628554

Website: www.lifegen.net/stanfordcourt/

Credentials and/or

certifications:

Site English Spoken: Y

Site Languages(s) Spoken: Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

SPRING VALLEY

AMAYA SPRINGS HEALTH CARE CENTER

Provider ID: 420233

8625 LAMAR ST
SPRING VALLEY, CA 91977

Phone: (323) 326-6186

Fax: (619) 461-3575

After Hours Phone: (323) 326-6186

Accepting New Patients: N

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

.D5 مقدمو خدمات برنامج الخدمات والدعم طويل الأجل (LTSS)
.A الرعاية الطويلة الأجل (LTC) ومرفق التمريض الماهر (SNF)

VALLEY

Provider ID: 417094

9009 CAMPO RD
SPRING VALLEY, CA 91977

Phone: (619) 460-2711

Fax: (619) 460-0451

After Hours Phone: (619)
460-2711

Accepting New Patients: N

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: N

Hours: SU-SA
8:00AM-5:00PM

NPI: 1649375403

Website: covlivingmountmiguel.org

Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

**MOUNT MIGUEL COVENANT
VILLAGE HEALTH FAC**

Provider ID: 171969

325 KEMPTON ST
SPRING VALLEY, CA 91977

Phone: (619) 931-1151

Fax: (224) 233-1397

After Hours Phone: (619)

931-1151

Accepting New Patients: N

Hours: SU-SA
8:00AM-5:00PM

NPI: 1649375403

Website: www.mountmiguelcovenantvillage.org

Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

VALLEY CENTER

AMREEN HOME

Provider ID: 658588

13873 OAKWOOD GLEN PL
VALLEY CENTER, CA 92082

Phone: (760) 751-9879

Fax: (760) 749-3019

After Hours Phone: (760)
751-9879

Accepting New Patients: N

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: N

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: N

NPI: 1962488007


Website: N/A

Credentials and/or

certifications:

Site English Spoken: Y


**.D5 مقدمو خدمات برنامج الخدمات والدعم طويل الأجل (LTSS)
I. الرعاية الطويلة الأجل (LTC) ومرفق التمريض الماهر (SNF)**


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: N

 *Hours: SU-SA*
8:30AM-5:00PM

NPI: 1366802696

 *Website: N/A*
Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


LIFE CARE CENTER OF VISTA

Provider ID: 171970


 304 N MELROSE DR
VISTA, CA 92083

 *Phone: (760) 724-8222*


Fax: (760) 941-4870


 *After Hours Phone: (760) 724-8222*

Accepting New Patients: N

 *Hours: SU-SA*
9:00AM-5:00PM

NPI: 1811942063


 *Website: www.lcca.com*
Credentials and/or certifications:

Site English Spoken: Y
 Site Languages(s) Spoken: Tagalog
Cultural Competency: N
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

MARSHALL HOUSE

Provider ID: 662924


 758 S MELROSE DR
VISTA, CA 92081

 *Phone: (760) 721-1706*

Fax: (760) 721-9872

 *After Hours Phone: (760) 721-1706*

Accepting New Patients: N
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: N
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: N
NPI: 1962488007

 *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: N
NPI: 1093137762

 *Website: N/A*
Credentials and/or certifications:


Site English Spoken: Y

.D5 مقدمو خدمات برنامج الخدمات والدعم طويل الأجل (LTSS)
أ. الرعاية الطويلة الأجل (LTC) ومرفق التمريض الماهر (SNF)

Cultural Competency: N

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

VISTA HEALTHCARE CENTER

Provider ID: 171990


 247 E BOBIER DR
VISTA, CA 92084

 Phone: (760) 945-3033

Fax: (760) 724-3169

 After Hours Phone: (760)
945-3033

Accepting New Patients: N

 Hours: M-F
8:00AM-5:00PM


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: N

NPI: 1962488007

 Website: N/A

Credentials and/or

certifications:

 Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

VISTA KNOLL SPECIALIZED CARE FACILITY

Provider ID: 172017


 2000 WESTWOOD RD
VISTA, CA 92083

 Phone: (760) 630-2273

Fax: (760) 630-0913

 After Hours Phone: (760)
630-2273

Accepting New Patients: N

 Hours: SU-SA
8:30AM-5:00PM


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

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

**.D5 مقدمو خدمات برنامج الخدمات والدعم طويل الأجل (LTSS)
 .III خدمات البالغين المجتمعية (CBAS) - خدمات نهائية للكبار**

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: N

NPI: 1598882169

Accessibility: CONTACT
 PROVIDER

American Sign Language (ASL):

N

Language line interpreter
 services: N

Cultural Competency: N

Facility has access to skilled

medical interpreters on site?: N

Interpreter Non-English

Languages: N

Website: http://openarmsa
 dhc.com

American Sign Language (ASL): Provider ID: 408541

N

Language line interpreter
 services: N

Cultural Competency: N

Facility has access to skilled

medical interpreters on site?: N

Interpreter Non-English

Languages: N

Website: https://sites.googl
 e.com/site/westernadhcec/c
 ontact- us

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: N

Hours: M-F
 8:00AM-4:00PM

License Number: 60000821

NPI: 1487864468

Accessibility: CONTACT
 PROVIDER

American Sign Language (ASL):

N

Language line interpreter
 services: N

Cultural Competency: N

Facility has access to skilled

medical interpreters on site?: N

Interpreter Non-English

Languages: N

Website: http://magnoliaa
 dhc.com

EL CAJON

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: N

Hours: M-F
 8:00AM-3:30PM

NPI: 1821125550

Accessibility: CONTACT
 PROVIDER

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: N

Hours: SU-SA
 9:00AM-3:00PM

License Number: 550008511

NPI: 1184207631

Accessibility: CONTACT
 PROVIDER

American Sign Language (ASL):

N

Language line interpreter
 services: N

Cultural Competency: N

Facility has access to skilled

medical interpreters on site?: N

Interpreter Non-English

Languages: N

Website: N/A

**MAGNOLIA ADULT DAY
 HEALTH CARE**

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: N

NPI: 1093921900

Accessibility: CONTACT
 PROVIDER

American Sign Language (ASL):

N

**.D5 مقدمو خدمات برنامج الخدمات والدعم طويل الأجل (LTSS)
III. خدمات البالغين المجتمعية (CBAS) - خدمات نهائية للكبار**

Language line interpreter services: N
Cultural Competency: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English
Languages: N
Website: N/A

NATIONAL CITY

HORIZON CBAS

Provider ID: 642082
1035 HARBISON AVE
NATIONAL CITY, CA 91950
Phone: (619) 474-1822
Fax: (619) 474-1826
After Hours Phone: (619) 474-1822
Accepting New Patients: N
License Number: 060000582
NPI: 1396476388
Accessibility: CONTACT PROVIDER

American Sign Language (ASL): N
Language line interpreter services: N
Cultural Competency: 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: N
License Number: 60000822
NPI: 1568659977
Accessibility: CONTACT PROVIDER

American Sign Language (ASL): N
Website: Sandiegofamilycircle.com

Language line interpreter services: N
Cultural Competency: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English
Languages: N
Website: N/A

SAN DIEGO

SAN DIEGO FAMILY CIRCLE ADULT DAY HEALTH CARE

Provider ID: 539018
4428 CONVOY ST STE 288
SAN DIEGO, CA 92111
Phone: (858) 244-4555
Fax: (858) 724-3302
After Hours Phone: (858) 244-4555
Accepting New Patients: N
Site Language(s) Spoken: Vietnamese, Mandarin, Spanish
Hours: M-F
8:00AM-5:00PM
License Number: 550005837
NPI: 1396201828

Accessibility: CONTACT PROVIDER

American Sign Language (ASL): N
Language line interpreter services: Y
Cultural Competency: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English
Languages: Y
Website: Sandiegofamilycircle.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: N
Hours: SU-SA
8:30AM-4:00PM
NPI: 1346455961
Accessibility: CONTACT PROVIDER

American Sign Language (ASL): N
Language line interpreter services: N
Cultural Competency: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English
Languages: N
Website: www.lovingcareadhc.com

CASA PACIFICA ADHCC

Provider ID: 417303

D5. مقدمو خدمات برنامج الخدمات والدعم طويل الأجل (LTSS)
III. خدمات البالغين المجتمعية (CBAS) - خدمات نهائية للكبار

 1424 30TH ST STE C
SAN DIEGO, CA 92154
 Phone: (619) 424-8181
 After Hours Phone: (619)
424-8181


Accepting New Patients: N
NPI: 1609920305


 Accessibility: CONTACT
PROVIDER

American Sign Language (ASL):
N

Language line interpreter
services: N

Cultural Competency: N
Facility has access to skilled
medical interpreters on site?: N
Interpreter Non-English
Languages: N


 Website: www.casa- pacific
a.com


Cultural Competency: N
Facility has access to skilled
medical interpreters on site?: N
Interpreter Non-English
Languages: N
 Website: www.americaread
hc.com


SAN MARCOS

AMERICARE ADULT DAY HEALTH CARE CENTER

Provider ID: 420060

 340 RANCHEROS DR STE
196
SAN MARCOS, CA 92069

 Phone: (760) 682-2424
Fax: (760) 471-5104

 After Hours Phone: (760)
682-2424

Accepting New Patients: N
License Number: 060000832
NPI: 1528271186

 Accessibility: CONTACT
PROVIDER

American Sign Language (ASL):
N

Language line interpreter
services: N

ALPINE

FRITZ, JENNIFER

Provider Gender: Female
 License Number: PSY24350
 NPI: 1013071497
 Provider English Spoken: Y
 Cultural Competency: N
 JENNIFER K FRITZ

1620 ALPINE BLVD STE 110
 ALPINE, CA 91901
 Phone: (619) 662-4100
 Fax: (916) 205-6305
 After Hours Phone: (619) 662-4100
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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: Y

Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM

SMITH, STEPHANIE

Provider Gender: Female
 License Number: PSY30779
 NPI: 1346700325
 Provider English Spoken: Y
 Cultural Competency: N
 STEPHANIE L SMITH

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CHULA VISTA

BAYLON, ALDO



































Provider Gender: Male
 License Number: PSY29904
 NPI: 1649429150
 Provider English Spoken: Y
 Cultural Competency: N

ALDO BAYLON
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 Fax: (619) 425-6941
 After Hours Phone: (619) 662-4100
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-8:00PM
 SA 8:00AM-4:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):

- N**
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-8:00PM SA 8:00AM-4:00PM*
- DE LEEUW, KELLEY**
Provider Gender: Female License Number: A114857 NPI: 1720395361 Provider English Spoken: Y Spanish Cultural Competency: N
KELLEY J DE LEEUW
 678 THIRD AVE
 CHULA VISTA, CA 91910
 *Phone: (619) 662-4100*
Fax: (619) 336-2323
 *After Hours Phone: (619) 662-4100*
 *Website: N/A*
Accepting New Patients: Y
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:30AM-5:30PM SA 8:00AM-2:30PM*
- 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: Y
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
- GOMEZ-NARANJO, PATRICIA**
Provider Gender: Female License Number: A55544 NPI: 1053324541 Provider English Spoken: Y Spanish Cultural Competency: N
PATRICIA A GOMEZ-NARANJO
 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: Y
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
- 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: Y
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: SU 10:00AM-4:00PM M-F 8:30AM-5:30PM SA 8:00AM-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: Y
 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999
 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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-8:00PM
 SA 8:00AM-4:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

MARTINEZ, STEPHANIE

Provider Gender: Female
 License Number: A152787
 NPI: 1699126367
 Provider English Spoken: Y
 Spanish
 Cultural Competency: N
 STEPHANIE MARTINEZ

678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 Fax: (619) 271-0260
 After Hours Phone: (619) 662-4100
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: SU 10:00AM-4:00PM
 M-F 8:30AM-5:30PM
 SA 8:00AM-2:30PM

OJHA, PRITI

Provider Gender: Female
 License Number: A139807
 NPI: 1760897284
 Provider English Spoken: Y
 Cultural Competency: N
 PRITI OJHA




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: Y
 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: SU 10:00AM-4:00PM
 M-TU 8:30AM-8:00PM
 W-F 8:30AM-5:30PM
 SA 8:00AM-2:00PM

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: Y

 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM








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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-8:00PM
 SA 8:00AM-4:00PM

WIJAYARATNE, IMANIE

Provider Gender: Male
 License Number: PSY25044
 NPI: 1932358355
 Provider English Spoken: Y
 Cultural Competency: N

IMANIE S WIJAYARATNE
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 Fax: (619) 271-0260
 After Hours Phone: (619)
 662-4100
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT

PROVIDER

ARNOLD, REBECCA

Provider Gender: Female
 License Number: MFC95778
 NPI: 1225580350
 Provider English Spoken: Y
 Cultural Competency: N
 REBECCA L ARNOLD

 855 E MADISON AVE
 EL CAJON, CA 92020
 Phone: (619) 440-0251
 Fax: (858) 633-4692
 After Hours Phone: (619)
 440-0251
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

BENNETT, WILLIAM

Provider Gender: Male
 License Number: C55097
 NPI: 1568542462
 Provider English Spoken: Y
 Cultural Competency: N
 WILLIAM R BENNETT

 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: Y
 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

CASEY, SHANNON

Provider Gender: Female

License Number: PSY31889

NPI: 1548873755

Provider English Spoken: Y

Cultural Competency: N

SHANNON K CASEY

215 W MADISON AVE
EL CAJON, CA 92020

Phone: (619) 667-6125

Fax: (619) 590-9036

After Hours Phone: (619)
667-6125

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

CRUZ, GUADALUPE

Provider Gender: Male

License Number: LCS101900

NPI: 1649727942

Provider English Spoken: Y

Spanish

Cultural Competency: N

GUADALUPE A CRUZ

855 E MADISON AVE
EL CAJON, CA 92020

Phone: (619) 440-2751

Fax: (360) 462-2746

After Hours Phone: (619)
440-2751

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

DIA, ALI

Provider Gender: Male

License Number: A47803

NPI: 1912031030

Provider English Spoken: Y

Arabic

Cultural Competency: N

ALI R DIA

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

Fax: (619) 785-3356

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:30AM-5:30PM

FRAGOSO, DOMINIQUE

Provider Gender: Female

License Number: LCS12601

NPI: 1518521830

Provider English Spoken: Y

Cultural Competency: N

DOMINIQUE C FRAGOSO

215 W MADISON AVE
EL CAJON, CA 92020

Phone: (619) 667-6125

Fax: (619) 590-9036

After Hours Phone: (619)
667-6125

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

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: (858) 633-4692

After Hours Phone: (619)
440-2751

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999








American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*



KOH, STEVE

*Provider Gender: Male
License Number: A103468
NPI: 1467650473
Provider English Spoken: Y
Korean
Cultural Competency: N
STEVE H KOH*



 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: Y
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*



MATIALEU, LEOPOLDINE

*Provider Gender: Female
License Number: A152369
NPI: 1255759718
Provider English Spoken: Y
French
Cultural Competency: N*

LEOPOLDINE P MATIALEU
 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: Y
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*

MAXWELL, MELISSA

*Provider Gender: Female
License Number: LCS90791
NPI: 1275182826
Provider English Spoken: Y
Cultural Competency: N
MELISSA K MAXWELL*







 215 W MADISON AVE
EL CAJON, CA 92020
 *Phone: (619) 667-6125*
Fax: (619) 590-9036
 *After Hours Phone: (619) 667-6125*
 *Website: N/A*
Accepting New Patients: Y
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

MISHRA, GAURAV

*Provider Gender: Male
License Number: A129941
NPI: 1689804866
Provider English Spoken: Y*

Hindi, Kannada

*Cultural Competency: N
GAURAV MISHRA*



 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: Y
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

ORLANDO, FRANCESCA

*Provider Gender: Female
License Number: LCS107210
NPI: 1275097081
Provider English Spoken: Y
Cultural Competency: N
FRANCESCA A ORLANDO*

 215 W MADISON AVE
EL CAJON, CA 92020
 *Phone: (619) 401-6236*
Fax: (619) 590-9036
 *After Hours Phone: (619) 401-6236*
 *Website: N/A*
Accepting New Patients: Y
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*

8:00AM-5:00PM

POSTLETHWAITE, ALEJANDRA

Provider Gender: Female
License Number: A88938
NPI: 1750566915
Provider English Spoken: Y
Cultural Competency: N

ALEJANDRA POSTLETHWAITE

855 E MADISON AVE
EL CAJON, CA 92020
Phone: (619) 440-2751
Fax: (858) 633-4692
After Hours Phone: (619) 440-2751
Website: N/A
Accepting New Patients: Y
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SANDERS, ROBERT

Provider Gender: Male
License Number: 20A5544
NPI: 1144264300
Provider English Spoken: Y
Spanish
Cultural Competency: N
ROBERT B SANDERS

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

SANDERS, ROBERT

Provider Gender: Male
License Number: 20A5544
NPI: 1144264300
Provider English Spoken: Y
Spanish
Cultural Competency: N
ROBERT B SANDERS

225 W MADISON AVE STE 2
EL CAJON, CA 92020
Phone: (619) 401-6236
Fax: (760) 741-2782

After Hours Phone: (619) 334-7542

Website: N/A
Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 18\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH
10:30AM-3:30PM

TAYAG, DYLAN

Provider Gender: Male
License Number: LCS96462
NPI: 1902281983
Provider English Spoken: Y
Cultural Competency: N
DYLAN S TAYAG

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

THOMAS, DALIA

Provider Gender: Female
License Number: LCS82132
NPI: 1104151372
Provider English Spoken: Y
Cultural Competency: N
DALIA M THOMAS

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

THOMAS, DALIA


Provider Gender: Female
 License Number: LCS82132
 NPI: 1104151372
 Provider English Spoken: Y
 Cultural Competency: N
 DALIA M THOMAS

 436 S MAGNOLIA AVE STE 101
 EL CAJON, CA 92020
 Phone: (619) 662-4100
 Fax: (619) 401-7411
 After Hours Phone: (619) 662-4100
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

WEAVER, MARINEL






Provider Gender: Female
 License Number: LCS15627
 NPI: 1871786558
 Provider English Spoken: Y
 Cultural Competency: N
 MARINEL E AVER

 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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM




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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 11\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

ENCINITAS

GARCIA, ROSEMARIE

Provider Gender: Female
 License Number: MFC123590
 NPI: 1710410980
 Provider English Spoken: Y
 Cultural Competency: N
 ROSEMARIE C GARCIA

 1130 2ND ST
 ENCINITAS, CA 92024
 Phone: (760) 736-6767
 Fax: (760) 736-8740
 After Hours Phone: (760) 736-6767
 Website: N/A

Accepting New Patients: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

GOMEZ, JUANITA

Provider Gender: Female
 License Number: PSY27439
 NPI: 1790915759
 Provider English Spoken: Y
 Cultural Competency: N
 JUANITA GOMEZ

1505 ENCINITAS BLVD
 ENCINITAS, CA 92024
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

LOPEZ, JOANNA

Provider Gender: Female
 License Number: MFC50381
 NPI: 1275664385
 Provider English Spoken: Y
 Cultural Competency: N
 JOANNA M LOPEZ
 1130 2ND ST
 ENCINITAS, CA 92024
 Phone: (760) 736-6767
 Fax: (760) 736-8740
 After Hours Phone: (760) 736-6767
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 18\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

BECERRA, GABRIEL

Provider Gender: Male
 License Number: LCS114743
 NPI: 1205313319
 Provider English Spoken: Y
 Spanish
 Cultural Competency: N
 GABRIEL CELESTINO

BECERRA
 425 N DATE ST
 ESCONDIDO, CA 92025
 Phone: (760) 520-8340
 Fax: (360) 462-2752
 After Hours Phone: (760) 520-8340
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 7:00AM-7:30PM
 TU 7:00AM-4:30PM
 W 7:00AM-7:30PM
 TH-F 7:00AM-4:30PM

BELINSKY, MARIA



Provider Gender: Female
 License Number: LCS69175
 NPI: 1760867824
 Provider English Spoken: Y
 Spanish
 Cultural Competency: N
 MARIA T BELINSKY
 460 N ELM ST
 ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 Fax: (858) 633-4691
 After Hours Phone: (760) 520-8100
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 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: (760) 520-8100

 *After Hours Phone: (760) 737-6900*


 *Website: N/A*

Accepting New Patients: Y

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999


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

 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: Y

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999



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: (360) 462-2752

 *After Hours Phone: (760) 520-8340*

 *Website: N/A*

Accepting New Patients: Y

 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Spanish*

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM


CASTILLO, TIFFANY


*Provider Gender: Female
License Number: A158480
NPI: 1114459252*

*Provider English Spoken: Y
Spanish*

Cultural Competency: N

TIFFANY A CASTILLO

 425 N DATE ST
ESCONDIDO, CA 92025

 *Phone: (760) 520-8340*


Fax: (360) 462-2752

 *After Hours Phone: (760) 520-8340*

 *Website: N/A*

Accepting New Patients: Y

 *Site English Spoken: Y*


 *Site Languages(s) Spoken: Spanish*

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

CASTILLO, TIFFANY


*Provider Gender: Female
License Number: A158480
NPI: 1114459252*

*Provider English Spoken: Y
Spanish*

Cultural Competency: N

TIFFANY A CASTILLO

 425 N DATE ST
ESCONDIDO, CA 92025

 *Phone: (760) 520-8340*

Fax: (360) 462-2752



 *After Hours Phone: (760) 520-8340*

 *Website: N/A*

Accepting New Patients: Y

 *Site English Spoken: Y*

 *Site Languages(s) Spoken:*

Spanish
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM



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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:30AM-5:00PM


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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM



ESTRADA PATINO, ANGELA






Provider Gender: Female
 License Number: PSY31789
 NPI: 1629339015
 Provider English Spoken: Y
 Spanish
 Cultural Competency: N
 ANGELA J ESTRADA PATINO
 460 N ELM ST
 ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 Fax: (760) 466-1373
 After Hours Phone: (760)
 520-8100
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 TDD: U
 Min/Max Age: 14\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 SA 8:00AM-0:00PM


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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM

GARCIA, JANET


Provider Gender: Female
 License Number: LCS91462
 NPI: 1790144756
 Provider English Spoken: Y
 Spanish
 Cultural Competency: N
 JANET A GARCIA
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025

 Phone: (760) 489-6380
 Fax: (760) 740-0837

 After Hours Phone: (760) 489-6380

 Website: N/A


Accepting New Patients: Y

 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

GUZZO, RICHARD

Provider Gender: Male

License Number: LCS8288


NPI: 1497898431


Provider English Spoken: Y


Cultural Competency: N

RICHARD L GUZZO


 1002 E GRAND AVE
 ESCONDIDO, CA 92025

 Phone: (760) 737-6960

 After Hours Phone: (760) 737-6960


 Website: N/A


Accepting New Patients: Y

 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:30AM-5:00PM

HARRIS, LAURA

Provider Gender: Female

License Number: LCS18214


NPI: 1255640280


Provider English Spoken: Y

Cultural Competency: N

LAURA S HARRIS

 1002 E GRAND AVE
 ESCONDIDO, CA 92025


 Phone: (760) 741-2660

 Fax: (760) 741-2647

 After Hours Phone: (760) 741-2660

 Website: N/A


Accepting New Patients: Y

 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

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: Y

 Site English Spoken: Y


 Site Languages(s) Spoken:
 Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

MACIAS, ZIRLEY

Provider Gender: Female

License Number: LCS96997


NPI: 1245616887


Provider English Spoken: Y

Cultural Competency: N

ZIRLEY S MACIAS

 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: Y

 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

MAGOS, DANIEL

Provider Gender: Male

License Number: LCS88270


NPI: 1578983664

Provider English Spoken: Y

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER







MARTINEZ, NORAYMA

Provider Gender: Female
 License Number: LCS100019
 NPI: 1669808267
 Provider English Spoken: Y
 Cultural Competency: N
 NORAYMA MARTINEZ

 728 E VALLEY PKWY
 ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 Fax: (360) 462-2748
 After Hours Phone: (760) 737-6900
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

POSTLETHWAITE, ALEJANDRA



Provider Gender: Female

License Number: A88938
 NPI: 1750566915
 Provider English Spoken: Y
 Cultural Competency: N
 ALEJANDRA POSTLETHWAITE
 425 N DATE ST
 ESCONDIDO, CA 92025
 Phone: (760) 520-8300
 Fax: (858) 633-4698
 After Hours Phone: (760) 520-8300
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\19
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

PRATHER, ALLYSON



Provider Gender: Female
 License Number: MFC45441
 NPI: 1083725006
 Provider English Spoken: Y
 Cultural Competency: N
 ALLYSON M PRATHER

 425 N DATE ST
 ESCONDIDO, CA 92025
 Phone: (760) 520-8300
 Fax: (858) 633-4698
 After Hours Phone: (760) 520-8300
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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: Y


 Site English Spoken: Y


 Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

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: Y


 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M 7:00AM-7:30PM

TU 7:00AM-4:30PM

W 7:00AM-7:30PM

TH-F 7:00AM-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: Y


 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

SCHEUBER, TIMOTHY

Provider Gender: Male

License Number: PSY26681



NPI: 1083017396

Provider English Spoken: Y

Cultural Competency: N

TIMOTHY A SCHEUBER

 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: Y


 Site English Spoken: Y


 Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M 7:00AM-7:30PM
 TU 7:00AM-4:30PM

W 7:00AM-7:30PM

TH-F 7:00AM-4:30PM

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: Y

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

STREET, KYLE

Provider Gender: Male

License Number: 20A21304

NPI: 1457912131

Provider English Spoken: Y

Cultural Competency: N

KYLE A STREET

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8300

Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

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: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

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: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

TIZNADO, MONICA

Provider Gender: Female

License Number: MFC81074

NPI: 1497895197

Provider English Spoken: Y

Spanish

Cultural Competency: N

MONICA M TIZNADO

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8340

Fax: (360) 462-2752

After Hours Phone: (760)
520-8340

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

TIZNADO, MONICA

Provider Gender: Female

License Number: MFC81074

NPI: 1497895197

Provider English Spoken: Y
Spanish

Cultural Competency: N

MONICA M TIZNADO

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8340
Fax: (360) 462-2752

After Hours Phone: (760)
520-8340

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

VALLEZ-BARLAM, ANDREA

Provider Gender: Female

License Number: PSY9962

NPI: 1710902143

Provider English Spoken: Y

German, Spanish

Cultural Competency: N

ANDREA VALLEZ-BARLAM

426 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 690-5900
Fax: (858) 633-4693

After Hours Phone: (760)
690-5900

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
German, Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

VAQUERO, JUANA

Provider Gender: Female

License Number: PSY28364

NPI: 1023459708

Provider English Spoken: Y

Cultural Competency: N

JUANA VAQUERO

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8300
Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

VENNAM, VAMSI

Provider Gender: Male

License Number: 20A19415

NPI: 1679070569

Provider English Spoken: Y

Cultural Competency: N

VAMSI K VENNAM

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8300
Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

WOODWORTH, JENNIFER

Provider Gender: Female



License Number: PSY26963

NPI: 1639362494
 Provider English Spoken: Y
 Cultural Competency: N
JENNIFER WOODWORTH
 425 N DATE ST
 ESCONDIDO, CA 92025
 Phone: (760) 520-8340
 Fax: (858) 633-4698
 After Hours Phone: (760)
 520-8340
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

FALLBROOK

CARDOZA, CLAUDIA
 Provider Gender: Female
 License Number: LCS82778
 NPI: 1871084715
 Provider English Spoken: Y
 Spanish
 Cultural Competency: N
CLAUDIA J CARDOZA
 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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 TDD: U







Min/Max Age: 6\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM

GILROY, LAURA
 Provider Gender: Female
 License Number: LCS27123
 NPI: 1437427978
 Provider English Spoken: Y
 Cultural Competency: N
LAURA L GILROY
 1328 S MISSION RD
 FALLBROOK, CA 92028
 Phone: (760) 451-4720
 Fax: (760) 457-4700

 After Hours Phone: (760)
 451-4720
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 12\999
 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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

IMPERIAL BEACH

GONZALEZ, CLAUDIA

Provider Gender: Female

License Number: LCS100328

NPI: 1770055543

Provider English Spoken: Y

Cultural Competency: N

CLAUDIA GONZALEZ

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)
429-3733

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ZUREK, BEDEANIA

Provider Gender: Female

License Number: LCS74215

NPI: 1942375811

Provider English Spoken: Y

Cultural Competency: N

BEDEANIA R ZUREK

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)
429-3733

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

BOOTH, CHRISTOPHER

Provider Gender: Male

License Number: PSY26073

NPI: 1568893162







Provider English Spoken: Y

Cultural Competency: N

CHRISTOPHER R BOOTH








8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM







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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM


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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER





 Hours: M-F
 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM








BRAR, SIMERJEET

Provider Gender: Female
 License Number: A144765
 NPI: 1417393307
 Provider English Spoken: Y
 Cultural Competency: N
 SIMERJEET K BRAR
 8950 VILLA LA JOLLA DR
 STE C101
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM

CHESHER, NICHOLAS

Provider Gender: Male
 License Number: PSY29290
 NPI: 1124539697
 Provider English Spoken: Y
 Cultural Competency: N
 NICHOLAS J CHESHER

 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM

CLAUDAT, KIMBERLY

Provider Gender: Female
 License Number: PSY28581
 NPI: 1699200949
 Provider English Spoken: Y

Cultural Competency: N
 KIMBERLY B CLAUDAT
 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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 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

 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
 926-8273
 Website: N/A



Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM

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: Y
 Site English Spoken: Y


TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

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: Y

 Site English Spoken: Y


TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

EICHEN, DAWN

Provider Gender: Female

License Number: PSY27823


NPI: 1861043366

Provider English Spoken: Y

Cultural Competency: N


DAWN M EICHEN

 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Y

 Site English Spoken: Y


TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

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: Y

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

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 ELLEDGE

 8950 VILLA LA JOLLA DR
STE 101
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Y

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

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: Y

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

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: Y

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

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: Y

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

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: Y

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F

8:00AM-5:00PM

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: Y


 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM



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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM

MAGINOT-CHESSER, TAMARA

Provider Gender: Female
 License Number: PSY28678
 NPI: 1043441165
 Provider English Spoken: Y
 Cultural Competency: N
 TAMARA R MAGINOT
 CHESSER
 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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM

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: Y

📄 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

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: Y

📄 Site English Spoken: Y
TDD: U

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
9:00AM-5:00PM

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: Y

📄 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

MOORE, SHAVON

Provider Gender: Female

License Number: A152789

NPI: 1053682773

Provider English Spoken: Y

Cultural Competency: N

SHAVON C MOORE

📍 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

🌐 Website: N/A

Accepting New Patients: Y

📄 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

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: Y

📄 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

NGUYEN, HOANG

Provider Gender: Male

License Number: G83977

NPI: 1720011620

Provider English Spoken: Y

Vietnamese

Cultural Competency: N

HOANG A NGUYEN

8:00AM-5:00PM

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (619) 497-6673

After Hours Phone: (619)
497-6673

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

REED, KRISTIE

Provider Gender: Female

License Number: PSY30934

NPI: 1679869556

Provider English Spoken: Y
Cultural Competency: N

KRISTIE L REED

8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

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

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

TARVER, LESLIE

Provider Gender: Female

License Number: A169181






NPI: 1811300957

Provider English Spoken: Y







Cultural Competency: N

LESLIE B TARVER

8950 VILLA LA JOLLA DR
STE C101








LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM

LAKESIDE

BRUNETTO, HEIDI

Provider Gender: Female
 License Number: PSY26809
 NPI: 1023250453
 Provider English Spoken: Y
 Cultural Competency: N
 HEIDI M BRUNETTO
 10039 VINE ST
 LAKESIDE, CA 92040
 Phone: (619) 390-9975
 Fax: (858) 633-4690
 After Hours Phone: (619) 390-9975
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH
 8:00AM-5:00PM

NATIONAL CITY

FLANIGAN, MARILYN

Provider Gender: Female
 License Number: MFC97326
 NPI: 1588996912
 Provider English Spoken: Y
 Cultural Competency: N
 MARILYN Y FLANIGAN
 2743 HIGHLAND AVE
 NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
 Fax: (858) 578-4417
 After Hours Phone: (844) 200-2426
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-6:00PM

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: Y

Site English Spoken: Y

Site Language(s) Spoken:
Spanish, Portuguese

TDD: U

Min/Max Age: 18\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

9:00AM-5:00PM

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: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F

8:30AM-5:30PM

SA 8:00AM-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: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

OCEANSIDE

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: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

SA 9:00AM-4:00PM

ACOSTA, AZUCENA

Provider Gender: Female

License Number: LCS98304

NPI: 1255937496

Provider English Spoken: Y

Spanish

Cultural Competency: N

AZUCENA ACOSTA

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU

8:00AM-5:00PM

W 8:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

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: Y
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

CHALMERS, VIRGINIA

Provider Gender: Female
License Number: LCS28053
NPI: 1265613715
Provider English Spoken: Y
Spanish
Cultural Competency: N

VIRGINIA C CHALMERS

619 CROUCH ST
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 566-1501

After Hours Phone: (760) 736-6767

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

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

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male
License Number: 20A9664
NPI: 1932359445

Provider English Spoken: Y
Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Y

☐ Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): Spanish

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

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: Y

☐ Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): Spanish

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y

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: Y

☐ Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y

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: Y

☐ Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

COOK, SHERYL

Provider Gender: Female

License Number: PSY15449

NPI: 1750420816

Provider English Spoken: Y

Cultural Competency: N

SHERYL G COOK

📍 619 CROUCH ST STE 100
OCEANSIDE, CA 92054

☎ Phone: (760) 736-6767

Fax: (760) 736-8740

📞 After Hours Phone: (760) 736-6767

🌐 Website: N/A

Accepting New Patients: Y

☐ Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 9:00AM-6:15PM
W 9:00AM-6:00PM

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH
9:00AM-7:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 4\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH
9:00AM-7:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CRUZ, VANESSA

Provider Gender: Female
License Number: LCS87166
NPI: 1285170662

Provider English Spoken: Y
Cultural Competency: N

VANESSA Y CRUZ

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

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: Y
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

DOUGHERTY, CHRISTINE

Provider Gender: Female
License Number: LCS26686
NPI: 1003194960

Provider English Spoken: Y
Cultural Competency: N

CHRISTINE A DOUGHERTY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Y
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


GODINEZ, BRENDA

Provider Gender: Female
License Number: LCS88306

NPI: 1568918647
Provider English Spoken: Y
Spanish

Cultural Competency: N

BRENDA GODINEZ

 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: Y
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

GODINEZ, BRENDA

Provider Gender: Female
License Number: LCS88306
NPI: 1568918647

Provider English Spoken: Y
Spanish

Cultural Competency: N

BRENDA GODINEZ

 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: Y
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

GODINEZ, BRENDA

Provider Gender: Female
License Number: LCS88306
NPI: 1568918647

Provider English Spoken: Y
Spanish

Cultural Competency: N

BRENDA GODINEZ

 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: Y
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER




GUTIERREZ, VERONICA

Provider Gender: Female
License Number: PSY21413
NPI: 1467674176

Provider English Spoken: Y
Spanish

Cultural Competency: N







VERONICA GUTIERREZ

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000

 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER







GUTIERREZ, VERONICA

Provider Gender: Female
 License Number: PSY21413
 NPI: 1467674176
 Provider English Spoken: Y
 Spanish
 Cultural Competency: N
 VERONICA GUTIERREZ

 4700 N RIVER RD
 OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

GUTIERREZ, VERONICA

Provider Gender: Female
 License Number: PSY21413
 NPI: 1467674176
 Provider English Spoken: Y
 Spanish
 Cultural Competency: N
 VERONICA GUTIERREZ

 517 N HORNE ST
 OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER




JENSEN, BRIAN

Provider Gender: Male
 License Number: PSY26041
 NPI: 1518138049






Provider English Spoken: Y
 Cultural Competency: N
 BRIAN M JENSEN
 619 CROUCH ST
 OCEANSIDE, CA 92054
 Phone: (760) 566-1620
 Fax: (760) 433-4040
 After Hours Phone: (760) 566-1620
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

KRAPES, MICHAEL

Provider Gender: Male
 License Number: PSY25077
 NPI: 1215233028

Provider English Spoken: Y
 Cultural Competency: N
 MICHAEL B KRAPES
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054
 Phone: (760) 736-6767
 Fax: (760) 566-1501
 After Hours Phone: (760) 736-6767
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

MAUHILI, KENNA

Provider Gender: Female
 License Number: PSY23713
 NPI: 1386949360
 Provider English Spoken: Y
 Cultural Competency: N
 KENNA M MAUHILI
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054
 Phone: (760) 736-6767
 Fax: (760) 736-8740
 After Hours Phone: (760) 736-6767
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F

8:00AM-5:00PM

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

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: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

MONTEZ, REBECCA

Provider Gender: Female

License Number: LCS26869

NPI: 1396047809

Provider English Spoken: Y

Spanish

Cultural Competency: N

REBECCA MONTEZ

2210 MESA DR STE 5
OCEANSIDE, CA 92054

Phone: (760) 757-5841

Fax: (619) 736-8740

After Hours Phone: (760)
757-5841

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

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: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

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: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

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: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

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) 566-1501

After Hours Phone: (760)

736-6767
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:00AM-5:00PM
 TU 10:00AM-7:00PM
 W-F 8:00AM-5:00PM
 SA 9:00AM-4:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:00AM-5:00PM
 TU 10:00AM-7:00PM
 W-F 8:00AM-5:00PM
 SA 9:00AM-4:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 18\999
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:00AM-5:00PM
 TU 10:00AM-7:00PM
 W-F 8:00AM-5:00PM
 SA 9:00AM-4:00PM


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
 Website: N/A

Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-4:00PM






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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

SMITH, SONYA







Provider Gender: Female
 License Number: LCS82598
 NPI: 1902070857
 Provider English Spoken: Y
 Spanish
 Cultural Competency: N
SONYA L SMITH

 818 PIER VIEW WAY
 OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER


SMITH, SONYA

Provider Gender: Female
 License Number: LCS82598
 NPI: 1902070857
 Provider English Spoken: Y
 Spanish
 Cultural Competency: N
SONYA L SMITH

 4700 N RIVER RD
 OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

WILSON, CARLENE

Provider Gender: Female
 License Number: LCS74685
 NPI: 1508327081
 Provider English Spoken: Y
 Cultural Competency: N
CARLENE WILSON

 4700 N RIVER RD
 OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 Fax: (760) 414-3892

📞 After Hours Phone: (760) 631-5000
 🌐 Website: N/A
 Accepting New Patients: Y
 🗣️ Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 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: Y
 🗣️ Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 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: Y
 🗣️ Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT PROVIDER

POWAY

ANDERSEN, CLAIRE

Provider Gender: Female
 License Number: A125942
 NPI: 1831418664
 Provider English Spoken: Y
 Spanish
 Cultural Competency: N

CLAIRE E ANDERSEN

📍 13020 POWAY RD
 POWAY, CA 92064
 📞 Phone: (760) 737-6960
 Fax: (760) 741-2782
 📞 After Hours Phone: (760) 737-6960
 🌐 Website: N/A
 Accepting New Patients: Y
 🗣️ Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
 8:00AM-5:00PM

ANDERSEN, CLAIRE

Provider Gender: Female
 License Number: A125942
 NPI: 1831418664
 Provider English Spoken: Y
 Spanish
 Cultural Competency: N
CLAIRE E ANDERSEN

📍 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: Y
 🗣️ Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT PROVIDER

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

MODHWADIA, MAMTA

Provider Gender: Female
 License Number: A113990
 NPI: 1043353667
 Provider English Spoken: Y
 German
 Cultural Competency: N
 MAMTA D MODHWADIA
 13010 POWAY RD
 POWAY, CA 92064
 Phone: (858) 218-3000
 Fax: (360) 462-2742
 After Hours Phone: (858) 218-3000
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 TDD: U
 Min/Max Age: 16\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 TDD: U
 Min/Max Age: 16\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM

PEDERSEN, SUESAN

Provider Gender: Female

License Number: A138369
 NPI: 1558603837
 Provider English Spoken: Y
 Cultural Competency: N
 SUESAN M PEDERSEN

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9:00AM-5:00PM

POSTLETHWAITE, ALEJANDRA

Provider Gender: Female
 License Number: A88938
 NPI: 1750566915
 Provider English Spoken: Y
 Cultural Competency: N
 ALEJANDRA POSTLETHWAITE

13010 POWAY RD
 POWAY, CA 92064
 Phone: (858) 218-3000
 Fax: (858) 633-4688
 After Hours Phone: (858) 218-3000
 Website: N/A
 Accepting New Patients: Y

Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999
 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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 TDD: U

Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 9:00AM-5:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-5:30PM
 SA 8:30AM-4:00PM

ABERCROMBIE, SHERI



Provider Gender: Female
 License Number: PSY18536
 NPI: 1932292422

Provider English Spoken: Y
 Cultural Competency: N

SHERI ABERCROMBIE

 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 810-8787
 Fax: (858) 987-5825
 After Hours Phone: (858)
 810-8787
 Website: N/A

Accepting New Patients: Y

 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER



ALVAREZ, IRAIDA

Provider Gender: Female
 License Number: MFC105698
 NPI: 1174683189

Provider English Spoken: Y
 Spanish

Cultural Competency: N


IRAIDA ALVAREZ

 3025 BEYER BLVD
 SAN DIEGO, CA 92154
 Phone: (619) 662-4100

 After Hours Phone: (619)
 662-4100

 Website: N/A

Accepting New Patients: Y

 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999

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: Y

 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999

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: Y
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

BANKS, SARAH

Provider Gender: Female
License Number: PSY30296
NPI: 1164701132
Provider English Spoken: Y
Cultural Competency: N

SARAH J BANKS

4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Y
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

BANKS, SARAH

Provider Gender: Female
License Number: PSY30296
NPI: 1164701132
Provider English Spoken: Y
Cultural Competency: N

SARAH J BANKS

6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Y
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
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: Y
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

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: Y
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

BASS, GURGIANA








Provider Gender: Male
License Number: PSY24750
NPI: 1639325277
Provider English Spoken: Y
Cultural Competency: N

GURGIANA BASS

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8787
Fax: (858) 987-5825
After Hours Phone: (858)









810-8787
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

BRAR, SIMERJEET






Provider Gender: Female
 License Number: A144765
 NPI: 1417393307
 Provider English Spoken: Y
 Cultural Competency: N
 SIMERJEET K BRAR
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 576-1700
 Fax: (858) 966-8164
 After Hours Phone: (858) 576-1700
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM



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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N







 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM

CASTELLANOS, GRACIELA








Provider Gender: Female
 License Number: MFC114148
 NPI: 1033484530
 Provider English Spoken: Y
 Spanish
 Cultural Competency: N
 GRACIELA CASTELLANOS
 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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

CEBALLOS, JACQUELINE CAMILLE
 Provider Gender: Female
 License Number: LCS110194
 NPI: 1093350258
 Provider English Spoken: Y
 Cultural Competency: N
 JACQUELINE CAMILLE
 CEBALLOS




 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 279-9676
 Fax: (858) 633-4680
 After Hours Phone: (858) 279-9676
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

CEBALLOS, JACQUELINE CAMILLE
 Provider Gender: Female
 License Number: LCS110194
 NPI: 1093350258
 Provider English Spoken: Y
 Cultural Competency: N
 JACQUELINE CAMILLE
 CEBALLOS

 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 Fax: (858) 633-4680
 After Hours Phone: (858) 810-8700
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

CLEMENT, LUIS

Provider Gender: Male

License Number: PSY28534

NPI: 1235364712

Provider English Spoken: Y

Cultural Competency: N

LUIS F CLEMENT

2630 1ST AVE

SAN DIEGO, CA 92103

Phone: (619) 234-2158

Fax: (619) 234-0505

After Hours Phone: (619)
234-2158

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CRISOL, CAROLINE

Provider Gender: Female

License Number: MFC88616

NPI: 1962663617

Provider English Spoken: Y
Spanish

Cultural Competency: N

CAROLINE M CRISOL LMFT
INC

950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

Fax: (619) 205-1952

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

DE LEEUW, KELLEY

Provider Gender: Female

License Number: A114857

NPI: 1720395361

Provider English Spoken: Y
Spanish

Cultural Competency: N

KELLEY J DE LEEUW

1685 HOLLISTER ST
SAN DIEGO, CA 92154

Phone: (619) 662-4100

Fax: (619) 336-2323

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

DE LEEUW, KELLEY

Provider Gender: Female

License Number: A114857

NPI: 1720395361

Provider English Spoken: Y

Spanish

Cultural Competency: N

KELLEY J DE LEEUW

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: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM

SA 8:00AM-4:30PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

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 9:00AM-4:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

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 9:00AM-4:00PM

DEL AGUILA, FABIOLA

Provider Gender: Female

License Number: PSY24471

NPI: 1720283211

Provider English Spoken: Y

Spanish

Cultural Competency: N

FABIOLA DEL AGUILA

1016 OUTER RD
SAN DIEGO, CA 92154

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)
429-3733

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

DIAZ, JAENAI

Provider Gender: Female
 License Number: LCS80689
 NPI: 1508241811
 Provider English Spoken: Y
 Spanish

Cultural Competency: N

JAENAI DIAZ

350 DICKINSON ST
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999

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) 234-0505
 After Hours Phone: (619)
 234-2158

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999

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: Y

Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Hours: M-F
 8:00AM-6:00PM

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: Y

Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999

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: Y

Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Hours: M-F
 8:00AM-5:00PM

ESCAMILLA, KARLA

Provider Gender: Female
 License Number: LCS87168
 NPI: 1134613946

Provider English Spoken: Y

Cultural Competency: N

KARLA B. ESCAMILLA

950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

Fax: (619) 205-1952

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

SA 8:00AM-4:00PM

ESTAVILLO, SAUL

Provider Gender: Male

License Number: MFC102610

NPI: 1528330073

Provider English Spoken: Y

Spanish

Cultural Competency: N

SAUL J ESTAVILLO

286 EUCLID AVE STE 309
SAN DIEGO, CA 92114

Phone: (619) 527-7390

Fax: (619) 527-7394

After Hours Phone: (619)
527-7390

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FIRESTONE, MICHELLE

Provider Gender: Female

License Number: PSY33081

NPI: 1114687803

Provider English Spoken: Y

Cultural Competency: N

MICHELLE E FIRESTONE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

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: Y

Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Hours: M-F
 8:00AM-5:00PM

FLANIGAN, MARILYN

Provider Gender: Female
 License Number: MFC97326
 NPI: 1588996912

Provider English Spoken: Y
 Cultural Competency: N

MARILYN Y FLANIGAN

10737 CAMINO RUIZ STE
 235
 SAN DIEGO, CA 92126

Phone: (844) 200-2426
 Fax: (858) 578-4417

After Hours Phone: (844)
 200-2426

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Hours: M-F
 8:00AM-6:00PM

FORZANI, CHRISTINA

Provider Gender: Female
 License Number: PSY25710
 NPI: 1902939630

Provider English Spoken: Y
 Cultural Competency: N

CHRISTINA A FORZANI

4290 POLK AVE
 SAN DIEGO, CA 92105

Phone: (619) 961-1497
 Fax: (858) 633-4682

After Hours Phone: (619)
 961-1497

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999

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: Y

Site English Spoken: Y
 TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Hours: M-F
 8:00AM-5:00PM

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: Y

Site English Spoken: Y
 TDD: U

Min/Max Age: 12\999

American Sign Language (ASL):
 N








Accessibility: CONTACT
 PROVIDER

Hours: M-F
 8:00AM-5:00PM



GARCIA, RICHARD







Provider Gender: Male
 License Number: LCS28742
 NPI: 1881198554

Provider English Spoken: Y



Cultural Competency: N
RICHARD R GARCIA
 2630 1ST AVE
 SAN DIEGO, CA 92103
 Phone: (619) 234-2158
 Fax: (619) 234-0505
 After Hours Phone: (619)
 234-2158
 Website: N/A
Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-4:30PM







GARCIA, JENNI
Provider Gender: Female
License Number: LPCC10346
NPI: 1437775863
Provider English Spoken: Y
 Spanish
Cultural Competency: N
JENNI GARCIA
 3025 BEYER BLVD
 SAN DIEGO, CA 92154
 Phone: (619) 662-4100
 Fax: (619) 662-4119
 After Hours Phone: (619)
 662-4100
 Website: N/A
Accepting New Patients: Y
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 TDD: U
 Min/Max Age: 0\999
American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
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) 810-8787
 Fax: (858) 987-5825
 After Hours Phone: (858)
 810-8787

 Website: N/A
Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

GOMEZ, JUANITA
Provider Gender: Female
License Number: PSY27439
NPI: 1790915759
Provider English Spoken: Y
Cultural Competency: N
JUANITA GOMEZ
 6030 VILLAGE WAY
 SAN DIEGO, CA 92130
 Phone: (800) 926-8372
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8372
 Website: N/A
Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

GULOTTA, SAMANTHA
Provider Gender: Female
License Number: MFC134199
NPI: 1790407732
Provider English Spoken: Y
Cultural Competency: N
SAMANTHA L GULOTTA
 9909 MIRA MESA BLVD

STE 200
SAN DIEGO, CA 92131
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Y
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

HANNA-HADDAD, WEGDAN

Provider Gender: Female
License Number: PSY26481
NPI: 1457769333
Provider English Spoken: Y
Arabic
Cultural Competency: N
WEGDAN HANNA-HADDAD
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: Y
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

HERNANDEZ, SILVIA

Provider Gender: Female
License Number: MFC51787
NPI: 1982821179
Provider English Spoken: Y
Cultural Competency: N
SILVIA E HERNANDEZ
3025 BEYER BLVD
SAN DIEGO, CA 92154
Phone: (760) 520-8340
Fax: (619) 662-4119
After Hours Phone: (760) 520-8340
Website: N/A
Accepting New Patients: Y
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

JALBERT, KATIE

Provider Gender: Female
License Number: LCS112693
NPI: 1134825979
Provider English Spoken: Y
Cultural Competency: N
KATIE L JALBERT
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: Y
Site English Spoken: Y
Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

JALBERT, KATIE

Provider Gender: Female
License Number: LCS112693
NPI: 1134825979
Provider English Spoken: Y
Cultural Competency: N
KATIE L JALBERT
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: Y
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

JOSHI, YASH

Provider Gender: Male
License Number: A147156
NPI: 1598151433
Provider English Spoken: Y
Cultural Competency: N

YASH B JOSHI

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
 Website: N/A

Accepting New Patients: Y

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

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: Y


 Site English Spoken: Y


TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

KHAFAJA, MOHAMAD

Provider Gender: Male

License Number: A115892

NPI: 1780867119


Provider English Spoken: Y

Arabic

Cultural Competency: N

MOHAMAD H KHAFAJA

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Y

 Site English Spoken: Y


TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

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: Y

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

KLUEMPER, NICOLE

Provider Gender: Female

License Number: PSY27064


NPI: 1902125818

Provider English Spoken: Y

Cultural Competency: N

NICOLE S KLUEMPER

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 279-0377

 After Hours Phone: (858)
810-8700

 Website: N/A

Accepting New Patients: Y

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER







LABIB, MICHAEL

Provider Gender: Male
 License Number: PSY34180
 NPI: 1609055797
 Provider English Spoken: Y
 Arabic
 Cultural Competency: N
 MICHAEL LABIB


 1666 PRECISION PARK LN
 SAN DIEGO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 785-3384
 After Hours Phone: (619)
 662-4100
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM


LIDLAW, JOHN

Provider Gender: Male
 License Number: MFC44560

NPI: 1689790073
 Provider English Spoken: Y
 Cultural Competency: N
 JOHN K LAIDLAW
 10737 CAMINO RUIZ STE
 235
 SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 After Hours Phone: (844)
 200-2426
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
 8:00AM-5:00PM




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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM



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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):


N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM

LIU, TIMOTHY

Provider Gender: Male
 License Number: A105535
 NPI: 1720262801
 Provider English Spoken: Y
 Mandarin, Yue Chinese
 Cultural Competency: N
 TIMOTHY C LIU
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111


 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858) 279-0925

 Website: N/A

Accepting New Patients: Y

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

LIU, TIMOTHY

Provider Gender: Male

License Number: A105535

NPI: 1720262801


Provider English Spoken: Y

Mandarin, Yue Chinese

Cultural Competency: N

TIMOTHY C LIU

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 810-8700

Fax: (858) 279-0377

 After Hours Phone: (858) 810-8700

 Website: N/A


Accepting New Patients: Y

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

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: Y

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

MAGINOT-CHESHER, TAMARA

Provider Gender: Female

License Number: PSY28678

NPI: 1043441165


Provider English Spoken: Y

Cultural Competency: N


TAMARA R MAGINOT


CHESHER

 4510 EXECUTIVE DR
SAN DIEGO, CA 92121


 Phone: (858) 534-8019

Fax: (858) 534-6727

 After Hours Phone: (858) 534-8019

 Website: N/A

Accepting New Patients: Y


 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

MALAK, LAWRENCE

Provider Gender: Male

License Number: A115345


NPI: 1467773028

Provider English Spoken: Y

Cultural Competency: N

LAWRENCE T MALAK

 4290 POLK AVE
SAN DIEGO, CA 92105


 Phone: (619) 563-0250

Fax: (858) 633-4681

 After Hours Phone: (619) 563-0250

 Website: N/A


Accepting New Patients: Y


 Site English Spoken: Y
TDD: U

Min/Max Age: 14\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

SA 8:00AM-2:00PM

MARTINEZ, STEPHANIE

Provider Gender: Female

License Number: A152787

NPI: 1699126367



Provider English Spoken: Y

Spanish

Cultural Competency: N

STEPHANIE MARTINEZ


 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 280-2058
 Fax: (858) 633-4682

 After Hours Phone: (619) 280-2058

 Website: N/A


Accepting New Patients: Y

 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM
 SA 8:00AM-2:00PM

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: Y

 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999

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: Y

 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

MCCULLUM, TIFFANY

Provider Gender: Female

License Number: PSY29329



NPI: 1528306206

Provider English Spoken: Y

Cultural Competency: N

TIFFANY MCCULLUM


 286 EUCLID AVE STE 302
 SAN DIEGO, CA 92114

 Phone: (619) 662-4100
 Fax: (619) 205-1949

 After Hours Phone: (619) 662-4100

 Website: N/A


Accepting New Patients: Y

 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

MEYER, AARON

Provider Gender: Male

License Number: A133702



NPI: 1538505425

Provider English Spoken: Y

Cultural Competency: N

AARON A MEYER


 200 W ARBOR DR FL 7
 SAN DIEGO, CA 92103

 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

 Website: N/A


Accepting New Patients: Y

 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:00AM-5:00PM

MEYER, AARON

Provider Gender: Male

License Number: A133702

NPI: 1538505425



Provider English Spoken: Y



Cultural Competency: N

AARON A MEYER

 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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM SA 8:00AM-2:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

MONTOYA, JESSICA

Provider Gender: Female
License Number: PSY31647
NPI: 1003421256
Provider English Spoken: Y
Cultural Competency: N
JESSICA L MONTOYA

 4168 FRONT ST FL 3
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273




 Website: N/A
Accepting New Patients: Y
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT



PROVIDER
 Hours: M-F
 8:00AM-5:00PM








NAKAMURA, TIFFANY
 Provider Gender: Female
 License Number: LPCC4383
 NPI: 1356846349
 Provider English Spoken: Y
 Cultural Competency: N
TIFFANY NAKAMURA

 4510 EXECUTIVE DR STE
 315
 SAN DIEGO, CA 92121
 Phone: (858) 534-8019
 After Hours Phone: (858)
 534-8019
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM

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: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

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

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: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

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: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

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: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

OJHA, PRITI

Provider Gender: Female

License Number: A139807

NPI: 1760897284

Provider English Spoken: Y

Cultural Competency: N

PRITI OJHA

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: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

OJHA, PRITI

Provider Gender: Female

License Number: A139807

NPI: 1760897284

Provider English Spoken: Y

Cultural Competency: N





PRITI OJHA

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM







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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PATTERSON-HYATT, KIMBERLY







Provider Gender: Female
 License Number: PSY31903
 NPI: 1780997742
 Provider English Spoken: Y
 Cultural Competency: N
 KIMBERLY G

PATTERSON-HYATT
 4690 EL CAJON BLVD
 SAN DIEGO, CA 92115
 Phone: (619) 662-4100
 Fax: (619) 205-6305
 After Hours Phone: (619) 662-4100
 Website: N/A
 Accepting New Patients: Y


 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDERSEN, SUESAN

Provider Gender: Female
 License Number: A138369
 NPI: 1558603837
 Provider English Spoken: Y
 Cultural Competency: N
 SUESAN M PEDERSEN
 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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 TDD: U



Min/Max Age: 0\999
 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 9:00AM-4:00PM





PEDERSEN, SUESAN



Provider Gender: Female
 License Number: A138369
 NPI: 1558603837
 Provider English Spoken: Y
 Cultural Competency: N
 SUESAN M PEDERSEN
 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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 TDD: U
 Min/Max Age: 0\999

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 9:00AM-4:00PM

PEDERSEN, SUESAN




Provider Gender: Female
 License Number: A138369
 NPI: 1558603837
 Provider English Spoken: Y
 Cultural Competency: N
 SUESAN M PEDERSEN
 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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 TDD: U
 Min/Max Age: 0\999

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 9:00AM-4:00PM

PEDERSEN, SUESAN



Provider Gender: Female
 License Number: A138369
 NPI: 1558603837
 Provider English Spoken: Y
 Cultural Competency: N
 SUESAN M PEDERSEN
 4290 POLK AVE
 SAN DIEGO, CA 92105
 Phone: (619) 563-2050
 Fax: (858) 633-4681




 After Hours Phone: (619) 563-2050
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-6:00PM

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

RADOJEVIC, NATASHA

Provider Gender: Female

License Number: PSY28495

NPI: 1821365008

Provider English Spoken: Y

Cultural Competency: N

NATASHA RADOJEVIC

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 279-0377

After Hours Phone: (858) 810-8700

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

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: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

RICHARD, MARLA

Provider Gender: Female

License Number: G65188

NPI: 1578720934

Provider English Spoken: Y

Cultural Competency: N

MARLA G RICHARD

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

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: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:30AM-5:30PM

SA 8:00AM-2:30PM

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: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

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: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

SAWYER, CAROLYN

Provider Gender: Female

License Number: A149116

NPI: 1043653249

Provider English Spoken: Y

Cultural Competency: N

CAROLYN M SAWYER

7920 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 246-0794

Fax: (858) 496-9257

After Hours Phone: (858)
246-0794

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

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: Y

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


SCHELLINGER, KRISTON

Provider Gender: Female
License Number: PSY26313
NPI: 1710234273


Provider English Spoken: Y
Cultural Competency: N

KRISTON B SCHELLINGER

 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
 Phone: (858) 246-1979
 After Hours Phone: (858)
246-1979


 Website: N/A


Accepting New Patients: Y

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

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: Y

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


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: Y

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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: Y

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Hours: M-F
8:00AM-5:00PM

SILVEY, CHRISTOPHER

Provider Gender: Male
License Number: LCS85942
NPI: 1932793502

Provider English Spoken: Y
Cultural Competency: N


CHRISTOPHER J SILVEY

 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
 Phone: (858) 578-4220
 Fax: (858) 578-4417




 After Hours Phone: (858)
578-4220

 Website: N/A

Accepting New Patients: Y

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999


American Sign Language (ASL):  Website: N/A
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM


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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999


American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

SUAREZ, ROBERTO

Provider Gender: Male
 License Number: MFC25098
 NPI: 1386785160

Provider English Spoken: Y
 Cultural Competency: N
 ROBERTO SUAREZ

 3025 BEYER BLVD
 SAN DIEGO, CA 92154
 Phone: (619) 662-4100
 Fax: (619) 662-4119
 After Hours Phone: (619)
 662-4100

Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N



 Accessibility: CONTACT PROVIDER

SWEIGERT, JAMIE



Provider Gender: Female
 License Number: LCS112304
 NPI: 1396353595

Provider English Spoken: Y
 Cultural Competency: N
 JAMIE L SWEIGERT

 2630 1ST AVE
 SAN DIEGO, CA 92103
 Phone: (619) 234-2158
 Fax: (619) 234-0505
 After Hours Phone: (619)
 234-2158
 Website: N/A







Accepting New Patients: Y
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 TDD: U

Min/Max Age: 0\999
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM

TARLE, STEPHANIE




Provider Gender: Female
 License Number: PSY32155
 NPI: 1659920403
 Provider English Spoken: Y



Cultural Competency: N
 STEPHANIE J TARLE
 6655 ALVARADO RD
 SAN DIEGO, CA 92120
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER



TAYAG, DYLAN

Provider Gender: Male
 License Number: LCS96462
 NPI: 1902281983

Provider English Spoken: Y
 Cultural Competency: N
 DYLAN S TAYAG

 286 EUCLID AVE STE 302
 SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 Fax: (619) 205-1949
 After Hours Phone: (619)
 662-4100

 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: SU 10:00AM-4:00PM
 M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

THIESSEN, KAREN

Provider Gender: Female
 License Number: MFC52523
 NPI: 1184798241
 Provider English Spoken: Y
 Cultural Competency: N
 KAREN A THIESSEN

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM

TILTON, PETER

Provider Gender: Male
 License Number: G27781
 NPI: 1538258694
 Provider English Spoken: Y
 Cultural Competency: N

PETER A TILTON
 2630 1ST AVE
 SAN DIEGO, CA 92103
 Phone: (619) 234-2158
 Fax: (619) 234-0505
 After Hours Phone: (619) 234-2158
 Website: N/A
 Accepting New Patients: Y

Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

TO, TUAN

Provider Gender: Male
 License Number: PSY30204
 NPI: 1255696183
 Provider English Spoken: Y
 Cultural Competency: N
 TUAN TO

4290 POLK AVE
 SAN DIEGO, CA 92105
 Phone: (619) 563-0250
 Fax: (858) 633-4681
 After Hours Phone: (619) 563-0250
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

TO, TUAN

Provider Gender: Male
 License Number: PSY30204
 NPI: 1255696183
 Provider English Spoken: Y
 Cultural Competency: N
 TUAN TO

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

TO, TUAN

Provider Gender: Male
 License Number: PSY30204
 NPI: 1255696183
 Provider English Spoken: Y
 Cultural Competency: N
 TUAN TO

7011 LINDA VISTA RD
 SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 Fax: (858) 633-4680
 After Hours Phone: (858) 810-8700
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 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

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

VANFOSSEN, BRIAN

Provider Gender: Male

License Number: PSY23462

NPI: 1396072500

Provider English Spoken: Y

Cultural Competency: N

BRIAN VANFOSSEN

3434 MIDWAY DR STE 2001

SAN DIEGO, CA 92110

Phone: (619) 325-1161

Fax: (619) 325-1717

After Hours Phone: (619) 325-1161

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

VIERLING, SABRINA

Provider Gender: Female

License Number: PSY26117

NPI: 1215288238

Provider English Spoken: Y

Cultural Competency: N

SABRINA C VIERLING

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

WEISSMAN, CORY

Provider Gender: Male

License Number: A174625

NPI: 1528720661

Provider English Spoken: Y

Cultural Competency: N

CORY R WEISSMAN

16918 DOVE CANYON RD STE 100

SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999
 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: Y
 Site English Spoken: Y
 Site Language(s) Spoken: Spanish
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

ZAPATEL, JUAN

Provider Gender: Male
 License Number: LCS78174
 NPI: 1043446644
 Provider English Spoken: Y
 Cultural Competency: N
 JUAN P ZAPATEL

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

ZAYAS, MARIO

Provider Gender: Male
 License Number: MFC111273
 NPI: 1275943557
 Provider English Spoken: Y
 Cultural Competency: N
 MARIO E ZAYAS

3025 BEYER BLVD STE E-101
 SAN DIEGO, CA 92154
 Phone: (619) 662-4100
 Fax: (619) 428-5535
 After Hours Phone: (619) 662-4100
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU

9:00AM-7:00PM
W-F 9:00AM-6:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

SAN MARCOS

ALTAMIRANO, LEON

Provider Gender: Male
License Number: PSY23734
NPI: 1619271517

Provider English Spoken: Y
Spanish

Cultural Competency: N

LEON ALTAMIRANO

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767
Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

ARIELLA, LYNDA

Provider Gender: Female
License Number: PSY19450
NPI: 1073518965

Provider English Spoken: Y
Cultural Competency: N

LYNDA R ARIELLA

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767
Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 5\50

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

CORTIZO, ROSA

Provider Gender: Female
License Number: PSY22278
NPI: 1952316648

Provider English Spoken: Y
Spanish

Cultural Competency: N

ROSA CORTIZO


150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767
Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Website: N/A







Accepting New Patients: Y

 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

FLYNN, DANIELLE

Provider Gender: Female
 License Number: PSY26184
 NPI: 1477785137
 Provider English Spoken: Y
 Cultural Competency: N



DANIELLE I FLYNN

 150 VALPRED A RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 Fax: (760) 736-8740
 After Hours Phone: (760) 736-6767
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 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) 737-6767









Fax: (760) 736-8740
 After Hours Phone: (760) 737-6767
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

IMAM, SYED




Provider Gender: Male
 License Number: PSY27695
 NPI: 1447428271
 Provider English Spoken: Y
 Hindi
 Cultural Competency: N
SYED IMAM

 150 VALPRED A RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 Fax: (760) 566-1501
 After Hours Phone: (760) 736-6767
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 TDD: U
 Min/Max Age: 15\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

LOVE, YVONNE

Provider Gender: Female
 License Number: PSY18321
 NPI: 1902812811
 Provider English Spoken: Y
 Spanish
 Cultural Competency: N
YVONNE R LOVE
 2085 MONTIEL RD STE 102
 SAN MARCOS, CA 92069
 Phone: (833) 867-4642
 Fax: (360) 462-5827
 After Hours Phone: (833) 867-4642
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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) 566-1501
 After Hours Phone: (760) 736-6767
 Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 8:00AM-5:00PM

SIMPSON, ERIC

Provider Gender: Male

License Number: PSY28885

NPI: 1710110416

Provider English Spoken: Y

Cultural Competency: N

ERIC SIMPSON

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

SOLORIO JR, ROBERTO

Provider Gender: Male

License Number: LCS102729

NPI: 1972088185

Provider English Spoken: Y

Cultural Competency: N

ROBERTO SOLORIO JR

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

TONG, GARRICK

Provider Gender: Male

License Number: A102192

NPI: 1831361278

Provider English Spoken: Y

Cultural Competency: N

GARRICK G TONG

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 4\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-8:00PM

SA 8:00AM-5:00PM

TORRES, HECTOR

Provider Gender: Male

License Number: PSY13309

NPI: 1720265614

Provider English Spoken: Y
Spanish

Cultural Competency: N

HECTOR M TORRES

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

SAN YSIDRO

AGUILAR, DIANA

Provider Gender: Female

License Number: LCS83063

NPI: 1194065813

Provider English Spoken: Y
Spanish

Cultural Competency: N

DIANA A AGUILAR

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: Y

🗨 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: SU 10:00AM-4:00PM

M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

ALVAREZ, IRAIDA

Provider Gender: Female

License Number: MFC105698

NPI: 1174683189

Provider English Spoken: Y

Spanish

Cultural Competency: N

IRAIDA ALVAREZ

📍 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: Y

🗨 Site English Spoken: Y

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

BALTRUS, JUSTINE

Provider Gender: Female

License Number: MFC132018

NPI: 1285040709

Provider English Spoken: Y

Cultural Competency: N

JUSTINE 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: Y

🗨 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

CARBAJAL, OSCAR

Provider Gender: Male

License Number: MFC118465

NPI: 1871966283

Provider English Spoken: Y

Spanish

Cultural Competency: N

OSCAR A CARBAJAL

📍 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

Fax: (619) 205-6374

☎ After Hours Phone: (619) 662-4100

🌐 Website: N/A

Accepting New Patients: Y

🗨 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

CRAWFORD-DAY, ANN

Provider Gender: Female

License Number: A166646

NPI: 1386149706

Provider English Spoken: Y

Spanish

Cultural Competency: N

ANN E CRAWFORD-DAY

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

Fax: (619) 205-6341

☎ After Hours Phone: (619) 662-4100

🌐 Website: N/A

Accepting New Patients: Y

🗨 Site English Spoken: Y

🗨 Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-8:00PM

SA 8:00AM-2:00PM





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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 TDD: U
 Min/Max Age: 0\999
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM

DIA, ALI

Provider Gender: Male
License Number: A47803
NPI: 1912031030
Provider English Spoken: Y
 Arabic
Cultural Competency: N


ALI R DIA

 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 205-6305
 After Hours Phone: (619)
 662-4100
 Website: N/A
Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
American Sign Language (ASL):



N
 Accessibility: CONTACT
 PROVIDER

FONTANA, LOUIS

Provider Gender: Male
License Number: G49072
NPI: 1780734343
Provider English Spoken: Y
Cultural Competency: N
 LOUIS A FONTANA



 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 205-6305
 After Hours Phone: (619)
 662-4100
 Website: N/A
Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-8:00PM
 SA 8:00AM-2:00PM

GOMEZ-NARANJO, PATRICIA

Provider Gender: Female
License Number: A55544
NPI: 1053324541
Provider English Spoken: Y
 Spanish
Cultural Competency: N
 PATRICIA A GOMEZ-NARANJO

 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 428-4463
 Fax: (619) 205-6305


 After Hours Phone: (619)
 428-4463
 Website: N/A
Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

**GONZALEZ-GARCIA,
 CAROLINA**



Provider Gender: Female
License Number: MFC41111
NPI: 1215321955
Provider English Spoken: Y
 Spanish
Cultural Competency: N

CAROLINA GONZALES GARCIA

 3364 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 565-2373
 After Hours Phone: (619)
 662-4100
 Website: N/A
Accepting New Patients: Y

 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999
American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM

GUTIERREZ, SARAHI

Provider Gender: Female
License Number: LCS82040

NPI: 1174909071
 Provider English Spoken: Y
 Cultural Competency: N

SARAH M GUTIERREZ

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: Y

Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
 8:00AM-5:00PM

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: Y

Site English Spoken: Y
 TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

JENNINGS, AMY

Provider Gender: Female
 License Number: LCS100075
 NPI: 1609549161

Provider English Spoken: Y
 Cultural Competency: N

AMY E JENNINGS

4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 205-6305

After Hours Phone: (619) 662-4100
 Website: N/A

Accepting New Patients: Y
 Site English Spoken: Y

Site Languages(s) Spoken: Spanish
 TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
 8:00AM-8:00PM
 SA 8:00AM-2:00PM

JOHNSON, JENNIFER

Provider Gender: Female
 License Number: PSY33295
 NPI: 1023783248

Provider English Spoken: Y
 Cultural Competency: N

JENNIFER JOHNSON

4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100

Fax: (619) 205-6341

After Hours Phone: (619) 662-4100

Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\64

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
 8:00AM-5:00PM

LOPEZ, MARIBEL

Provider Gender: Female
 License Number: LCS86171
 NPI: 1669180600

Provider English Spoken: Y
 Cultural Competency: N

MARIBEL, LOPEZ

4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 205-6341

After Hours Phone: (619) 662-4100
 Website: N/A

Accepting New Patients: Y
 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
 8:00AM-8:00PM
 SA 8:00AM-2:00PM

MISHRA, GAURAV

Provider Gender: Male
 License Number: A129941
 NPI: 1689804866
 Provider English Spoken: Y
 Hindi, Kannada
 Cultural Competency: N

GAURAV MISHRA

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 5\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 10:00AM-4:00PM
 M-F 8:30AM-5:30PM
 SA 10:00AM-4:00PM

MONTES, DENISE

Provider Gender: Female
 License Number: LCS115972
 NPI: 1003694167
 Provider English Spoken: Y
 Cultural Competency: N

DENISE F MONTES

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

PALAZUELOS, MARGARITA

Provider Gender: Female
 License Number: LCS117172
 NPI: 1104379791
 Provider English Spoken: Y
 Spanish
 Cultural Competency: N

MARGARITA C PALAZUELOS

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 TDD: U
 Min/Max Age: 6\21
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

VALLEY CENTER

PLASCENCIA, CINDY

Provider Gender: Female
 License Number: MFC113536
 NPI: 1952723736
 Provider English Spoken: Y
 Cultural Competency: N

CINDY PLASCENCIA

28477 LIZARD ROCKS RD
 VALLEY CENTER, CA 92082
 Phone: (760) 742-9919
 Fax: (360) 462-2750
 After Hours Phone: (760) 742-9919
 Website: N/A

SANTEE

Accepting New Patients: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-2:00PM
F 8:00AM-5:00PM
SA 9:00AM-6:00PM

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: Y

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

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: Y

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999



American Sign Language (ASL):
N



Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM





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: Y
 Site English Spoken: Y
 TDD: U





Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH
 8:00AM-7:00PM
 F 8:00AM-5:00PM
 SA 9:00AM-4:00PM





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: Y
 Site English Spoken: Y

TDD: U
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH
 8:00AM-7:00PM
 F 8:00AM-5:00PM
 SA 9:00AM-4:00PM





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: Y
 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\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TU
 8:00AM-8:00PM
 W 9:00AM-7:00PM
 TH 8:00AM-8:00PM
 F 8:00AM-5:00PM

SA 9:00AM-4:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Vietnamese, Chinese,
 Estonian, Farsi, French,
 Hindi, Korean, Marathi,
 Spanish, Tagalog, Telugu
 TDD: U

Min/Max Age: 4\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TU
 8:00AM-8:00PM
 W 9:00AM-7:00PM
 TH 8:00AM-8:00PM
 F 8:00AM-5:00PM
 SA 9:00AM-4:00PM

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: Y
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-TH
9:00AM-7:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

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: Y
Site English Spoken: Y
TDD: U
Min/Max Age: 4\999
American Sign Language (ASL):
N
Accessibility: CONTACT

PROVIDER

Hours: M-TH
9:00AM-7:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

DOUGHERTY, CHRISTINE

Provider Gender: Female
License Number: LCS26686
NPI: 1003194960

Provider English Spoken: Y
Cultural Competency: N

CHRISTINE A DOUGHERTY

134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Y

Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
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) 414-3891
After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Y

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\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
9:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

GODINEZ, BRENDA

Provider Gender: Female
License Number: LCS88306
NPI: 1568918647

Provider English Spoken: Y
Spanish
Cultural Competency: N

BRENDA GODINEZ

1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (562) 264-6000
Fax: (760) 414-3892

After Hours Phone: (562) 264-6000


Website: N/A

Accepting New Patients: Y

Site English Spoken: Y
Site Languages(s) Spoken:
Farsi, Spanish, Vietnamese,
Chinese, Estonian, Telugu,
Hindi, Korean, French,
Marathi, Tagalog

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):  1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3702
After Hours Phone: (760)
631-5000
Website: N/A
Accepting New Patients: Y
Site English Spoken: Y
Site Languages(s) Spoken:
Hindi, Korean, Chinese,
Farsi, Tagalog, Estonian,
French, Marathi, Spanish,
Telugu, Vietnamese
TDD: U
Min/Max Age: 0\999

GODINEZ, BRENDA

Provider Gender: Female
License Number: LCS88306
NPI: 1568918647
Provider English Spoken: Y
Spanish
Cultural Competency: N


BRENDA GODINEZ

 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: Y
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

GUTIERREZ, VERONICA

Provider Gender: Female
License Number: PSY21413
NPI: 1467674176
Provider English Spoken: Y
Spanish
Cultural Competency: N
VERONICA GUTIERREZ

GUTIERREZ, VERONICA

Provider Gender: Female
License Number: PSY21413
NPI: 1467674176
Provider English Spoken: Y
Spanish
Cultural Competency: N
VERONICA GUTIERREZ
 134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760)
631-5000
Website: N/A
Accepting New Patients: Y
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER


MENDEZ, ADRIANA


Provider Gender: Female
License Number: LCS86435
NPI: 1356777361
Provider English Spoken: Y
Spanish
Cultural Competency: N
ADRIANA J MENDEZ

 1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
After Hours Phone: (760)
631-5000
Website: N/A
Accepting New Patients: Y
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999


American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-8:00PM
SA 9:00AM-4:00PM

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: Y

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

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

 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: Y

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

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: Y

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

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: Y

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

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: Y


 Site English Spoken: Y


 Site Languages(s) Spoken:
Arabic, Chinese, Lithuanian,
Farsi, Spanish, Tagalog,
Urdu, Vietnamese

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:00PM

PATEL, MITESH

Provider Gender: Male

License Number: A181164


NPI: 1568880292

Provider English Spoken: Y

Cultural Competency: N

MITESH K PATEL

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000







Fax: (760) 414-3892






 After Hours Phone: (760)


631-5000
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:00AM-5:00PM
 TU 10:00AM-7:00PM
 W-F 8:00AM-5:00PM
 SA 9:00AM-4:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 18\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:00AM-5:00PM
 TU 10:00AM-7:00PM
 W-F 8:00AM-5:00PM
 SA 9:00AM-4:00PM

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: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 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
 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: Y
 Site English Spoken: Y

TDD: U
 Min/Max Age: 0\999
 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
 1000 VALE TERRACE DR
 VISTA, CA 92084
 Phone: (760) 631-5000
 After Hours Phone: (760)
 631-5000
 Website: N/A
 Accepting New Patients: Y
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\999
 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: Y

🗨 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

SRIVASTAVA, RAJEEV

Provider Gender: Male

License Number: C176037

NPI: 1437489770

Provider English Spoken: Y

Cultural Competency: N

RAJEEV SRIVASTAVA

📍 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: Y

🗨 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

WILSON, CARLENE

Provider Gender: Female

License Number: LCS74685

NPI: 1508327081

Provider English Spoken: Y

Cultural Competency: N

CARLENE WILSON

📍 134 GRAPEVINE RD
VISTA, CA 92083

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

🌐 Website: N/A

Accepting New Patients: Y

🗨 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

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: Y

🗨 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH
8:00AM-8:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

ALPINE

AOTO, KIM, OD

Provider Gender: Female
License Number: 14524
NPI: 1780935650
Provider English Spoken: Y
Spanish, Vietnamese
Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619) 445-2687

Accepting New Patients: Y

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

BINDER, NICHOLAS, MD

Provider Gender: Male
License Number: A124698
NPI: 1306076716
Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)

445-2687

Accepting New Patients: Y

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

DEAN, MOENA, OD

Provider Gender: Female

License Number: 33955

NPI: 1265927578

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619) 445-2687

Accepting New Patients: Y

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619) 445-2687

Accepting New Patients: Y

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Arabic

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619) 445-2687

Accepting New Patients: Y

Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: M 9:00AM-5:00PM
 TU 10:00AM-6:00PM
 W 9:00AM-5:00PM
 TH 8:00AM-5:00PM
 F 9:00AM-4:00PM

KATZMAN, BARRY, MD

Provider Gender: Male
 License Number: A34834
 NPI: 1760473797
 Provider English Spoken: Y
 Spanish
 Cultural Competency: Y
 WEST COAST EYE CARE
 1620 ALPINE BLVD STE 117
 ALPINE, CA 91901
 Phone: (619) 445-2687
 Fax: (619) 445-0801
 After Hours Phone: (619)
 445-2687

Accepting New Patients: Y

Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: M 9:00AM-5:00PM
 TU 10:00AM-6:00PM
 W 9:00AM-5:00PM
 TH 8:00AM-5:00PM
 F 9:00AM-4:00PM

KHALIL, VADY, OD

Provider Gender: Male
 License Number: 35137
 NPI: 1275263584
 Provider English Spoken: Y
 Arabic
 Cultural Competency: Y
 WEST COAST EYE CARE
 1620 ALPINE BLVD STE 117
 ALPINE, CA 91901
 Phone: (619) 445-2687
 Fax: (619) 445-0801
 After Hours Phone: (619)
 445-2687

Accepting New Patients: Y

Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: M 9:00AM-5:00PM
 TU 10:00AM-6:00PM
 W 9:00AM-5:00PM
 TH 8:00AM-5:00PM
 F 9:00AM-4:00PM

MARR, RYAN, OD

Provider Gender: Male
 License Number: 35302
 NPI: 1235857525
 Provider English Spoken: Y
 Cultural Competency: Y
 WEST COAST EYE CARE
 1620 ALPINE BLVD STE 117
 ALPINE, CA 91901
 Phone: (619) 445-2687
 Fax: (619) 445-0801
 After Hours Phone: (619)
 445-2687

Accepting New Patients: Y

Site English Spoken: Y

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
 TU 10:00AM-6:00PM
 W 9:00AM-5:00PM
 TH 8:00AM-5:00PM
 F 9:00AM-4:00PM

MCGRAW, JOSEPH, MD

Provider Gender: Male
 License Number: A155228
 NPI: 1588624852

Provider English Spoken: Y
 Cultural Competency: Y
 WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
 ALPINE, CA 91901
 Phone: (619) 445-2687
 Fax: (619) 445-0801

After Hours Phone: (619)
 445-2687

Accepting New Patients: Y

Site English Spoken: Y
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
 TU 10:00AM-6:00PM
 W 9:00AM-5:00PM
 TH 8:00AM-5:00PM
 F 9:00AM-4:00PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Indonesian, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Y

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

PATEL, SARJAN, MD

Provider Gender: Male

License Number: A114976

NPI: 1316199326

Provider English Spoken: Y

Gujarati, Hindi, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Y

Site English Spoken: Y

American Sign Language (ASL): NPI: 1982872552

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

PATEL, GITANE, MD

Provider Gender: Male

License Number: A108603

NPI: 1710171434

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Y

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

Provider English Spoken: Y

Spanish

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Y

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801


After Hours Phone: (619)
445-2687

Accepting New Patients: Y

Site English Spoken: Y




American Sign Language (ASL):


N


 **Accessibility:** CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 **Hours:** M 9:00AM-5:00PM
 TU 10:00AM-6:00PM
 W 9:00AM-5:00PM
 TH 8:00AM-5:00PM
 F 9:00AM-4:00PM


VIVIRITO, MARY, OD

Provider Gender: Female
License Number: 33798
NPI: 1477968667
Provider English Spoken: Y
 Spanish

Cultural Competency: Y
 WEST COAST EYE CARE
 1620 ALPINE BLVD STE 117
 ALPINE, CA 91901
 **Phone:** (619) 445-2687
Fax: (619) 445-0801
 **After Hours Phone:** (619) 445-2687

Accepting New Patients: Y
 **Site English Spoken:** Y
American Sign Language (ASL):
 N

 **Accessibility:** CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U



 **Hours:** M 9:00AM-5:00PM
 TU 10:00AM-6:00PM
 W 9:00AM-5:00PM
 TH 8:00AM-5:00PM
 F 9:00AM-4:00PM

BONITA


CHA, DANIEL, OD


Provider Gender: Male

License Number: 14779
NPI: 1386078020
Provider English Spoken: Y
 Spanish

Cultural Competency: Y
 EYECARE OF BONITA
 4502 BONITA RD
 BONITA, CA 91902
 **Phone:** (619) 479-7334
Fax: (619) 475-3456

 **After Hours Phone:** (619) 479-7334
Accepting New Patients: Y
 **Site English Spoken:** Y
 **Site Languages(s) Spoken:**
 Spanish
American Sign Language (ASL):
 N



 **Accessibility:** CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T




 **Hours:** M 8:00AM-6:30PM
 W 8:00AM-6:00PM
 TH 12:30AM-6:00PM
 F 8:00AM-6:00PM
 SA 9:00AM-2:00PM

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: Y
 **Site English Spoken:** Y
 **Site Languages(s) Spoken:**
 Spanish, Vietnamese
American Sign Language (ASL):
 N




 **Accessibility:** CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 **Hours:** TU 9:00AM-5:00PM
 W 10:00AM-6:00PM
 TH 9:00AM-5:00PM
 F 8:00AM-4:00PM
 SA 9:00AM-3:00PM



CHULA VISTA



CASTILLEJOS, DAVID, MD

Provider Gender: Male
License Number: A44482
NPI: 1558446401
Provider English Spoken: Y
 French, Portuguese, Spanish, Tagalog
Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE
 MED GROUP


 342 F ST
 CHULA VISTA, CA 91910
 **Phone:** (619) 422-1471
Fax: (619) 271-7044
 **After Hours Phone:** (619) 422-1471

Accepting New Patients: Y
 **Site English Spoken:** Y
 **Site Languages(s) Spoken:**
 French, Spanish, Tagalog
American Sign Language (ASL):
 N

 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: M 8:00AM-5:00PM
TU 7:00AM-5:00PM
W-F 8:00AM-5:00PM**

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: Y

 Site English Spoken: Y
 Site Languages(s) Spoken: French, Spanish, Tagalog

American Sign Language (ASL): N

 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T



 **Hours: M 8:00AM-5:00PM
TU 7:00AM-5:00PM
W-F 8:00AM-5:00PM**

CHAN, KWOK FUNG, OD

Provider Gender: Male
License Number: 35087
NPI: 1407508385
Provider English Spoken: Y

Cultural Competency: Y
VILLA OPTOMETRY INC
 531 TELEGRAPH CANYON RD
CHULA VISTA, CA 91910
 Phone: (619) 482-2020
Fax: (619) 482-2671
 After Hours Phone: (619) 482-2020


Accepting New Patients: Y

 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1T


 **Hours: M-F
9:00AM-6:00PM**

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: Y

 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Vietnamese


American Sign Language (ASL): N


 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: M 9:00AM-5:00PM
TU 9:00AM-6:00PM
W 9:00AM-5:00PM
TH 9:00AM-6:00PM
F 8:00AM-4:00PM
SA 9:00AM-2:00PM**

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: Y

 Site English Spoken: Y
 Site Languages(s) Spoken: Arabic, Hindi, Spanish

American Sign Language (ASL): N

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1U

 **Hours: SU 10:00AM-4:00PM
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM**

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Arabic, Hindi, Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: SU 10:00AM-4:00PM
 M-F 9:00AM-7:00PM
 SA 9:00AM-5:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Arabic, Hindi, Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: SU 10:00AM-4:00PM
 M-F 9:00AM-7:00PM
 SA 9:00AM-5:00PM

MASCARENO, EFRAIN, OD

Provider Gender: Male
 License Number: 10906
 NPI: 1457507279
 Provider English Spoken: Y
 Cultural Competency: Y
 EASTLAKE VISION CENTER DR
 MASCARENO

2260 OTAY LAKES RD STE 111
 CHULA VISTA, CA 91915
 Phone: (619) 421-5550
 Fax: (619) 421-6022
 After Hours Phone: (619) 421-5550

Accepting New Patients: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
 9:00AM-6:00PM
 SA 9:00AM-3:00PM

MASCARENO, EFRAIN, OD

Provider Gender: Male
 License Number: 10906
 NPI: 1457507279
 Provider English Spoken: Y
 Cultural Competency: Y
 CLEAR VISION OPTOMETRY
 DR MASCARENO
 440 4TH AVE
 CHULA VISTA, CA 91910
 Phone: (619) 427-2020
 Fax: (866) 254-5707

After Hours Phone: (619) 427-2020
 Accepting New Patients: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TH
 9:00AM-6:00PM
 F 9:00AM-5:00PM

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: Y

Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-TH
10:00AM-3:00PM

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: Y

Site English Spoken: Y
Site Languages(s) Spoken: Arabic, Hindi, Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: SU 10:00AM-4:00PM
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM

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: Y

Site English Spoken: Y
Site Languages(s) Spoken: French, Spanish, Tagalog
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 8:00AM-5:00PM
TU 7:00AM-5:00PM
W-F 8:00AM-5:00PM

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: Y

Site English Spoken: Y
Site Languages(s) Spoken: French, Spanish, Tagalog

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 8:00AM-5:00PM
TU 7:00AM-5:00PM
W-F 8:00AM-5:00PM

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: Y

Site English Spoken: Y
Site Languages(s) Spoken: Arabic, Hindi, Spanish

American Sign Language (ASL):

N
 ♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 ⌚ Hours: SU 10:00AM-4:00PM
 M-F 9:00AM-7:00PM
 SA 9:00AM-5:00PM

TOUBIA, ELIAS, OD

Provider Gender: Male
 License Number: 33758
 NPI: 1740701481
 Provider English Spoken: Y
 Arabic
 Cultural Competency: Y
 OTAY RANCH EYEWORKS
 OPTOMETRY

📍 1741 EASTLAKE PKWY STE 101
 CHULA VISTA, CA 91915
 📞 Phone: (619) 421-6600
 Fax: (619) 421-6006
 ⌚ After Hours Phone: (619) 421-6600

Accepting New Patients: Y

☐ Site English Spoken: Y
 ☐ Site Languages(s) Spoken: Arabic, Hindi, Spanish
 American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U

⌚ Hours: SU 10:00AM-4:00PM
 M-F 9:00AM-7:00PM
 SA 9:00AM-5:00PM

VILLA, ANGELICA, OD

Provider Gender: Female
 License Number: 10561

NPI: 1962544965
 Provider English Spoken: Y
 Spanish
 Cultural Competency: Y
 VILLA OPTOMETRY INC
 📍 531 TELEGRAPH CANYON RD
 CHULA VISTA, CA 91910
 📞 Phone: (619) 482-2020
 Fax: (619) 482-2671

⌚ After Hours Phone: (619) 482-2020

Accepting New Patients: Y

☐ Site English Spoken: Y
 ☐ Site Languages(s) Spoken: Spanish
 American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T

⌚ Hours: M-F 9:00AM-6:00PM

CORONADO

KATZMAN, LEE, MD

Provider Gender: Male
 License Number: A135673
 NPI: 1912297284
 Provider English Spoken: Y
 Cultural Competency: Y
 ALVARADO EYE ASSOCIATES
 MED CLINIC INC

📍 801 ORANGE AVE STE 204
 CORONADO, CA 92118
 📞 Phone: (619) 437-4406
 Fax: (619) 522-7983

⌚ After Hours Phone: (619) 437-4406

Accepting New Patients: Y

☐ Site English Spoken: Y
 American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U

⌚ Hours: M 9:00AM-4:30PM
 TU 9:00AM-3:00PM
 W-TH 9:00AM-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: Y

☐ Site English Spoken: Y
 American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U

⌚ Hours: M 9:00AM-4:30PM
 TU 9:00AM-3:00PM
 W-TH 9:00AM-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: Y
 Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U
 Hours: M 9:00AM-4:30PM
 TU 9:00AM-3:00PM
 W-TH 9:00AM-4:30PM

YOUNG, ALLA, OD

Provider Gender: Female
 License Number: 34191
 NPI: 1285085142
 Provider English Spoken: Y
 Russian

Cultural Competency: Y
 ALVARADO EYE ASSOCIATES
 MED CLINIC INC
 801 ORANGE AVE STE 204
 CORONADO, CA 92118
 Phone: (619) 437-4406
 Fax: (619) 522-7983

After Hours Phone: (619) 437-4406
 Accepting New Patients: Y
 Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U
 Hours: M 9:00AM-4:30PM
 TU 9:00AM-3:00PM
 W-TH 9:00AM-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: Y
 Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:30AM-6:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:30AM-6:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:30AM-6:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 9:00AM-5:00PM
 SA 9:00AM-12:00AM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken:

Italian, Spanish
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M 9:00AM-5:00PM
 TU 10:00AM-5:00PM
 W-TH 9:00AM-5:00PM
 F 8:00AM-2:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:30AM-6:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:30AM-6:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

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: Y
📄 Site English Spoken: Y
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

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: Y
📄 Site English Spoken: Y
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

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: Y

📄 Site English Spoken: Y
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

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: Y
📄 Site English Spoken: Y
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM



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: Y
📄 Site English Spoken: Y
American Sign Language (ASL): N







 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F*
8:30AM-6:00PM

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: Y
 *Site English Spoken: Y*
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F*
8:30AM-6:00PM


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: Y
 *Site English Spoken: Y*
 *Site Languages(s) Spoken: Italian, Spanish*
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M 9:00AM-5:00PM*
TU 10:00AM-5:00PM
W-TH 9:00AM-5:00PM
F 8:00AM-2:00PM

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: Y
 *Site English Spoken: Y*
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-F*
8:30AM-6:00PM

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: Y
 *Site English Spoken: Y*
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F*
8:30AM-6:00PM

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: Y

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F

8:30AM-6:00PM

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: Y

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F

8:30AM-6:00PM

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: Y

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F

8:30AM-6:00PM

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: Y

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F

8:30AM-6:00PM

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: Y

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F

8:30AM-6:00PM

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: Y

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Italian, Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M 9:00AM-5:00PM
TU 10:00AM-5:00PM
W-TH 9:00AM-5:00PM
F 8:00AM-2:00PM

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: Y

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Italian, Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M 9:00AM-5:00PM
TU 10:00AM-5:00PM
W-TH 9:00AM-5:00PM
F 8:00AM-2:00PM

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: Y

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

ZVANUT, DONALD, OD

Provider Gender: Male

License Number: 8642

NPI: 1336211804

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

☎ After Hours Phone: (619) 440-5400

Accepting New Patients: Y

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

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: Y

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

AOTO, KIM, OD

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-5:00PM



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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-5:00PM

CHIU, STEPHAN, MD


Provider Gender: Male
 License Number: A172634
 NPI: 1053846956
 Provider English Spoken: Y
 Spanish
 Cultural Competency: Y
 ACUITY EYE GROUP
 320 SANTA FE DR STE 104
 ENCINITAS, CA 92024
 Phone: (760) 943-7141
 Fax: (760) 943-0371
 After Hours Phone: (760)
 943-7141
 Accepting New Patients: Y
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 American Sign Language (ASL):
 N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F*
8:00AM-5:00PM

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: Y


 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Spanish*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Public transportation (within 1/2 mile from Site): 1T


 *Hours: M-F*
8:00AM-5:00PM

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: Y


 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Spanish*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Public transportation (within 1/2 mile from Site): 1T


 *Hours: M-F*
8:00AM-5:00PM

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: Y


 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Spanish*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T


 *Hours: M-F*
8:00AM-5:00PM


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: Y


 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Spanish*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Public transportation (within 1/2 mile from Site): 1T


 *Hours: M-F*
8:00AM-5:00PM


KALBAKJI, NATALY, OD

Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Arabic

Cultural Competency: Y
 ACUITY EYE GROUP

 320 SANTA FE DR STE 104
 ENCINITAS, CA 92024

 *Phone: (760) 943-7141*
Fax: (760) 943-0371

 *After Hours Phone: (760) 943-7141*

Accepting New Patients: Y

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8:00AM-5:00PM

MARR, RYAN, OD

Provider Gender: Male
 License Number: 35302
 NPI: 1235857525
 Provider English Spoken: Y
 Cultural Competency: Y
 ACUITY EYE GROUP
 320 SANTA FE DR STE 104 ENCINITAS, CA 92024
 Phone: (760) 943-7141
 Fax: (760) 943-0371
 After Hours Phone: (760) 943-7141
 Accepting New Patients: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

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: Y

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

**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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

O HALLORAN, HENRY, MD

Provider Gender: Male

License Number: A73282

NPI: 1235287947

Provider English Spoken: Y

German, Spanish

Cultural Competency: Y

**RADY CHILDRENS HOSPITAL
ENCINITAS**

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

Phone: (858) 309-7702
Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Accepting New Patients: Y

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): IT

Hours: M-F
 8:00AM-5:00PM

VIVIRITO, MARY, OD

Provider Gender: Female
 License Number: 33798
 NPI: 1477968667
 Provider English Spoken: Y
 Spanish

Cultural Competency: Y
 ACUITY EYE GROUP

320 SANTA FE DR STE 104
 ENCINITAS, CA 92024
 Phone: (760) 943-7141
 Fax: (760) 943-0371

After Hours Phone: (760) 943-7141

Accepting New Patients: Y

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): IT

Hours: M-F
 8:00AM-5:00PM

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): IT

Hours: M-F
 8:00AM-5:00PM

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): IT

Hours: M-F
 8:00AM-5:00PM

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: Y

Site English Spoken: Y
 American Sign Language (ASL):






N

 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: M-F 8:30AM-4:30PM**



ASIS, STEPHANIE, OD

Provider Gender: Female
License Number: 34013
NPI: 1902383540
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY STE 200 ESCONDIDO, CA 92026
 **Phone: (760) 743-5872**
Fax: (760) 743-5879
 **After Hours Phone: (760) 743-5872**
Accepting New Patients: Y
 **Site English Spoken: Y**
 **Site Language(s) Spoken: Spanish**
American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: M-F 8:00AM-5:00PM**

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: Y
 **Site English Spoken: Y**
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: Y
 **Site English Spoken: Y**
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: Y
 **Site English Spoken: Y**
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: Y

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:00AM-5:00PM

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: Y

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:00AM-5:00PM

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: Y

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-4:30PM

GOLDSTONE, ADAM, OD

Provider Gender: Male

License Number: 11051

NPI: 1316972995

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 700 W EL NORTE PKWY STE 200

ESCONDIDO, CA 92026

☎ Phone: (760) 743-5872

Fax: (760) 743-5879

☎ After Hours Phone: (760) 743-5872

Accepting New Patients: Y

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:00AM-5:00PM

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: Y

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F

8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL): Cultural Competency: Y

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F

8:00AM-5:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL): Cultural Competency: Y

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F

8:00AM-5:00PM

KARAPETIAN, ELENA, OD

Provider Gender: Female

License Number: 34514

NPI: 1184250417

Provider English Spoken: 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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F

8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N
 ♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 ⌚ Hours: M-F
 8:00AM-5:00PM

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: Y
 📄 Site English Spoken: Y
 📄 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL):

N
 ♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 ⌚ Hours: M-F
 8:00AM-5:00PM

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: Y

📄 Site English Spoken: Y
 📄 Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N
 ♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 ⌚ Hours: M-F
 8:00AM-5:00PM

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: Y

📄 Site English Spoken: Y
 American Sign Language (ASL):

N
 ♿ Accessibility: CONTACT PROVIDER
 Public transportation (within

1/2 mile from Site): 1T
 ⌚ Hours: M-F
 8:30AM-4:30PM

LE, TAM, OD

Provider Gender: Female
 License Number: 12951
 NPI: 1235268707
 Provider English Spoken: Y
 Spanish, Vietnamese

Cultural Competency: Y

TAM T LE OD INC

📍 1711 E VALLEY PKWY STE 109
 ESCONDIDO, CA 92027
 📞 Phone: (760) 737-6064
 Fax: (760) 737-6064

⌚ After Hours Phone: (760) 737-6064

Accepting New Patients: Y

📄 Site English Spoken: Y
 📄 Site Languages(s) Spoken: Spanish, Vietnamese

American Sign Language (ASL):

N
 ♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T

⌚ Hours: M-TH
 9:00AM-5:30PM
 F 9:00AM-1:00PM

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: Y

Site English Spoken: Y

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F

8:00AM-5:00PM

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: Y

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): IT

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: Y

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): IT

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

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: Y

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): IT

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: Y

Site English Spoken: Y
Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): IT

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

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) 738-9933
 After Hours Phone: (760) 738-9931

Accepting New Patients: Y
 Site English Spoken: Y
 Site Languages(s) Spoken:

Spanish, Vietnamese
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TU 9:30AM-5:00PM TH 10:00AM-5:30PM F 9:30AM-5:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

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: Y

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-4:30PM

VERRET, ERIC, OD

Provider Gender: Male

License Number: 11401

NPI: 1194891853

Provider English Spoken: Y
French, Spanish

Cultural Competency: Y

ESCONDIDO EYECARE

613 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (760) 747-7979

Fax: (760) 747-7799

After Hours Phone: (760)
747-7979

Accepting New Patients: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Arabic, French, Spanish

American Sign Language (ASL): Provider English Spoken: Y

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
9:00AM-6:00PM
W-TH 9:00AM-8:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish




American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: M-F**
8:00AM-5:00PM



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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: M-F**
8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1U
 **Hours: M-F**
8:00AM-5:00PM


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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

 **Accessibility: CONTACT PROVIDER**
Public transportation (within

1/2 mile from Site): 1U
 **Hours: M-F**
8:00AM-5:00PM



CONNOR, JEFFREY, OD

Provider Gender: Male
License Number: 33683
NPI: 1063968980
Provider English Spoken: Y
Spanish

Cultural Competency: Y
INLAND EYE SPECIALISTS
 521 E ELDER ST STE 102
FALLBROOK, CA 92028
 **Phone: (760) 728-5728**
Fax: (760) 728-5934
 **After Hours Phone: (760) 728-5728**



Accepting New Patients: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1U
 **Hours: M-F**
8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 1:00PM-5:00PM TU 9:00AM-6:00PM W-TH 9:00AM-5:00PM F 9:00AM-1:00PM SA 9:00AM-1:00PM

GEORGE, KENDALL, OD

Provider Gender: Male

License Number: 34270

NPI: 1619529948

Provider English Spoken: Y

Spanish

Cultural Competency: Y

BRUCE D GEORGE OD

1102 S MAIN AVE FALLBROOK, CA 92028

Phone: (760) 723-8417

Fax: (760) 758-2063

After Hours Phone: (760)

723-8417

Accepting New Patients: Y

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 1:00PM-5:00PM TU 9:00AM-6:00PM W-TH 9:00AM-5:00PM F 9:00AM-1:00PM SA 9:00AM-1:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8:00AM-5:00PM

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
 8:00AM-5:00PM

IMPERIAL BEACH

HANONO, HELFON, OD

Provider Gender: Male
 License Number: 6681
 NPI: 1619942034
 Provider English Spoken: Y
 Spanish
 Cultural Competency: Y

IMPERIAL BEACH

OPTOMETRY INC APC

894 PALM AVE STE B
 IMPERIAL BEACH, CA 91932

Phone: (619) 424-9333

Fax: (619) 424-3356

After Hours Phone: (619) 424-9333

Accepting New Patients: Y

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
 9:00AM-6:00PM

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
 9:00AM-6:00PM

LA JOLLA

CHIU, STEPHAN, MD

Provider Gender: Male
 License Number: A172634
 NPI: 1053846956
 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: Y

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
 8:00AM-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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
 8:00AM-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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-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

534-6290
 Accepting New Patients: Y
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-4:30PM
 SA 8:00AM-2:00PM

HO, AMIEE, OD

Provider Gender: Female
 License Number: 14527
 NPI: 1396009478
 Provider English Spoken: Y
 Cultural Competency: Y
 PERLMAN
 OPHTHALMOLOGY-UCSD
 9350 CAMPUS POINT DR STE 1B
 LA JOLLA, CA 92037
 Phone: (858) 534-6290
 Fax: (858) 732-0921
 After Hours Phone: (858) 534-6290
 Accepting New Patients: Y
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-4:30PM

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: Y

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-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: Y

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-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: Y

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

HUSTANA, LARA, OD

Provider Gender: Female

License Number: 11472

NPI: 1235161597

Provider English Spoken: Y

French

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B

LA JOLLA, CA 92037

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Y

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-4:30PM

KALBAKJI, NATALY, OD

Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Arabic

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

📞 Phone: (858) 457-3010
Fax: (858) 457-0028

🕒 After Hours Phone: (858)
457-3010

Accepting New Patients: Y

📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-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: Y

📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-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: Y

📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

KIM, PHILIP, OD

Provider Gender: Male
License Number: 33893
NPI: 1376929034
Provider English Spoken: Y
Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

📍 9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037

📞 Phone: (858) 534-6290
Fax: (858) 732-0921

🕒 After Hours Phone: (858)
534-6290

Accepting New Patients: Y

📄 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-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: Y

☐ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

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: Y

☐ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

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: Y

☐ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-4:30PM

LAM, ANNE, OD

Provider Gender: Female

License Number: 12810

NPI: 1174550768

Provider English Spoken: Y

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

📍 9350 CAMPUS POINT DR
STE 1B

LA JOLLA, CA 92037

☎ Phone: (858) 534-6290

Fax: (858) 732-0921

☎ After Hours Phone: (858) 534-6290

Accepting New Patients: Y

☐ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-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: Y

☐ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

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: Y

☐ Site English Spoken: Y
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
9:00AM-5:00PM

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: Y

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Tagalog

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-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: Y

☐ Site English Spoken: Y
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-4:30PM

MIZOGUCHI, LIANNE, OD

Provider Gender: Female

License Number: 10104

NPI: 1619900313

Provider English Spoken: Y

Cultural Competency: Y

UCSD SHILEY EYE CENTER

📍 9415 CAMPUS POINT DR LA JOLLA, CA 92093

☎ Phone: (858) 534-6290

Fax: (858) 732-0921

📞 After Hours Phone: (858) 534-6290

Accepting New Patients: Y

☐ Site English Spoken: Y
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

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: Y

☐ Site English Spoken: Y
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-4:30PM

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: Y

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-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: Y

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

**MORRISON REYES, JOSHUA,
MD**

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Indonesian, Spanish

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER
Public transportation (within
1/2 mile from Site): 1U
⌚ Hours: M-F
8:00AM-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: Y
📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish, Tagalog
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
⌚ Hours: M-F
8:00AM-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: Y
📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish, Tagalog
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
⌚ Hours: M-F
8:00AM-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: Y
📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish, Tagalog
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Public transportation (within

1/2 mile from Site): 1U
⌚ Hours: M-F
8:00AM-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: Y
📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish, Tagalog
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
⌚ Hours: M-F
8:00AM-4:30PM

VO, ANDREW MINH, OD

Provider Gender: Male
License Number: 33869
NPI: 1790291565
Provider English Spoken: Y
Vietnamese

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B

LA JOLLA, CA 92037

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Y

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-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: Y

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

SA 8:00AM-2:00PM

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: Y

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

SA 8:00AM-2:00PM

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: Y

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8:00AM-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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

ASIS, STEPHANIE, OD
 Provider Gender: Female
 License Number: 34013
 NPI: 1902383540
 Provider English Spoken: Y
 Cultural Competency: Y
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942
 Phone: (619) 722-8460
 Fax: (619) 722-8465
 After Hours Phone: (619) 722-8460

Accepting New Patients: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken:

Spanish
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 ⌚ Hours: M-F
 8:00AM-5:00PM

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 ⌚ Hours: M-F
 8:00AM-5:00PM

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL):
 N

♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 ⌚ Hours: M-TU
 9:00AM-5:30PM
 W 8:00AM-5:00PM
 TH 9:00AM-6:00PM
 F 8:00AM-1:00PM

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 ⌚ Hours: M-F
 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 ⌚ Hours: M-F
 8:00AM-5:00PM

CHIU, STEPHAN, MD

Provider Gender: Male
 License Number: A172634
 NPI: 1053846956

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: Y
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
Hours: M-F
8:00AM-5:00PM

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: Y
Site English Spoken: Y

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
Hours: M-F
8:30AM-4:30PM

DEAN, MOENA, OD

Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP
5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619)
465-2020

Accepting New Patients: Y
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
Hours: M-F
8:00AM-5:00PM

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: Y
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

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: Y
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

DYER, SHARON, OD

Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
📞 Phone: (619) 465-2020
Fax: (619) 698-1189

🕒 After Hours Phone: (619) 465-2020

Accepting New Patients: Y

📄 Site English Spoken: Y
📄 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

GILES, GREGORY, OD

Provider Gender: Male
License Number: 11362
NPI: 1114931250
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: Y

📄 Site English Spoken: Y
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 8:00AM-4:00PM
TU 9:00AM-6:00PM
W 8:00AM-4:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM
SA 8:00AM-1:00PM

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: Y

📄 Site English Spoken: Y
📄 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

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: Y

📄 Site English Spoken: Y
📄 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

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: Y

Site English Spoken: Y
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U

Hours: M 8:00AM-4:00PM
 TU 9:00AM-6:00PM
 W 8:00AM-4:00PM
 TH 9:00AM-6:00PM

F 9:00AM-5:00PM
SA 8:00AM-1:00PM

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: Y

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

HUDSON, HENRY, MD

Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460
Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Y

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:

Spanish
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 8:30AM-4:30PM

KATZMAN, BARRY, MD

Provider Gender: Male
 License Number: A34834
 NPI: 1760473797
 Provider English Spoken: Y
 Spanish
 Cultural Competency: Y
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942
 Phone: (619) 722-8460
 Fax: (619) 722-8465
 After Hours Phone: (619) 722-8460
 Accepting New Patients: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-5:00PM

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: Y
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-5:00PM

LEE, SALLY, DO

Provider Gender: Female
License Number: 20A8088
NPI: 1457468514
Provider English Spoken: Y
Spanish, Chinese
Cultural Competency: Y

SAN DIEGO EYE PROFESSIONALS

5500 GROSSMONT CENTER DR # 326
LA MESA, CA 91942
Phone: (619) 583-4295
Fax: (619) 825-7300
After Hours Phone: (619) 583-4295
Accepting New Patients: Y
Site English Spoken: Y
Site Languages(s) Spoken: Spanish

American Sign Language (ASL): PHILLIP A LEVY OD
N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 10:00AM-5:00PM
SA 10:00AM-7:00PM

LEE, JENNIFER, OD

Provider Gender: Female
License Number: 33443
NPI: 1891147351
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: Y
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM

LEVY, PHILLIP, OD

Provider Gender: Male
License Number: 4884
NPI: 1528189115
Provider English Spoken: Y
Cultural Competency: Y

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: Y
Site English Spoken: Y
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 10:00AM-5:00PM
TU-TH 9:00AM-6:00PM
F 10:00AM-5:00PM

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: Y
Site English Spoken: Y
Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

MARR, RYAN, OD

Provider Gender: Male
License Number: 35302
NPI: 1235857525

Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460
Fax: (619) 722-8465

🕒 After Hours Phone: (619)
722-8460

Accepting New Patients: Y

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

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: Y

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

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: Y

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

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: Y

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License Number: A125435
NPI: 1235366782

Provider English Spoken: Y
Indonesian, Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460
Fax: (619) 722-8465

☎ After Hours Phone: (619) 722-8460

Accepting New Patients: Y

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:00AM-5:00PM

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: Y

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8:00AM-5:00PM

NEWMAN, DAVID, OD

Provider Gender: Male

License Number: 7296

NPI: 1508856378

Provider English Spoken: Y

Cultural Competency: Y

DAVID M NEWMAN OD

📍 5642 LAKE MURRAY BLVD LA MESA, CA 91942

☎ Phone: (619) 589-6263

Fax: (619) 589-6264

☎ After Hours Phone: (619) 589-6263

Accepting New Patients: Y

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M 10:00AM-4:00PM W 10:00AM-4:00PM F 10:00AM-4:00PM

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: Y

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:00AM-5:00PM

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: Y

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8:30AM-4:30PM

PANDYA, BHUMIKA, OD

Provider Gender: Female

License Number: 35025

NPI: 1063182822

Provider English Spoken: Y

Hindi

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
9:00AM-5:30PM
W 8:00AM-5:00PM
TH 9:00AM-6:00PM
F 8:00AM-1:00PM

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: Y

Site English Spoken: Y

- Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8:00AM-5:00PM
- 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: Y
- Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM
- SAMUEL, MICHAEL, MD**
Provider Gender: Male
License Number: A83237
NPI: 1730175670
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
 5565 GROSSMONT CENTER DR # 551 LA MESA, CA 91942
 Phone: (619) 465-2020
Fax: (619) 698-1189
 After Hours Phone: (619) 465-2020
Accepting New Patients: Y
- Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM
- 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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8:00AM-5:00PM
- 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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM
- TILLMAN, SYLVIA, OD**
Provider Gender: Female
License Number: 9726
NPI: 1174730824
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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

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

☎ Phone: (619) 465-2020
Fax: (619) 698-1189

📞 After Hours Phone: (619)
465-2020

Accepting New Patients: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y
Spanish

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT
CENTER DR # 551

LA MESA, CA 91942

☎ Phone: (619) 465-2020
Fax: (619) 698-1189

📞 After Hours Phone: (619)
465-2020

Accepting New Patients: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y
Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460
Fax: (619) 722-8465

☎ After Hours Phone: (619) 722-8460

Accepting New Patients: Y

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:00AM-5:00PM

WONG, SHARON, OD

Provider Gender: Female

License Number: 15137

NPI: 1497159552

Provider English Spoken: Y Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

☎ After Hours Phone: (619) 722-8460

Accepting New Patients: Y

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:00AM-5:00PM

YOUNG, ALLA, OD

Provider Gender: Female

License Number: 34191

NPI: 1285085142

Provider English Spoken: Y

Russian

Cultural Competency: Y

ALVARADO EYE ASSOCIATES

MED CLINIC INC

📍 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: Y

☐ Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8:30AM-4:30PM

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: Y

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8:00AM-5:00PM

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: Y

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: M-TH
 9:00AM-5:00PM
 F 9:00AM-4:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: M-TH
 9:00AM-5:00PM
 F 9:00AM-4:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: M-TH
 9:00AM-5:00PM
 F 9:00AM-4:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-4:30PM

BINDER, NICHOLAS, MD

Provider Gender: Male
 License Number: A124698
 NPI: 1306076716
 Provider English Spoken: Y
 Cultural Competency: Y
 WEST COAST EYE CARE
 2240 E PLAZA BLVD STE FG
 NATIONAL CITY, CA 91950
 Phone: (619) 470-2700
 Fax: (619) 267-8221
 After Hours Phone: (619)
 470-2700
 Accepting New Patients: Y
 Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: M-F

8:00AM-4:30PM

DEAN, MOENA, OD

Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Y

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-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: Y

Site English Spoken: Y

Site Languages(s) Spoken:

Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

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: Y

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

GOLLOGLY, HEIDRUN, MD

Provider Gender: Female

License Number: A134761

NPI: 1477879823

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL): Provider Gender: Male

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

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: Y

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

American Sign Language (ASL): Provider Gender: Female

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

HUDSON, HENRY, MD

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: Y

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

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: Y

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-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: Y

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Arabic

Cultural Competency: Y
WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Y

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):
Cultural Competency: Y
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: SU 10:00AM-4:00PM
M-F 9:00AM-6:00PM
SA 9:00AM-5:00PM

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: Y

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

KEDDINGTON, JOAN, OD

Provider Gender: Female

License Number: 6263

NPI: 1992872691

Provider English Spoken: Y
Spanish

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: SU 10:00AM-4:00PM
M-F 9:00AM-6:00PM
SA 9:00AM-5:00PM

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: Y

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER
Public transportation (within
1/2 mile from Site): 1U
⌚ Hours: M-F
8:00AM-4:30PM

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

⌚ Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

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: Y

Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

⌚ Hours: M-F
8:00AM-4:30PM

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1T

⌚ Hours: SU 10:00AM-4:00PM
M-F 9:00AM-6:00PM
SA 9:00AM-5:00PM

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

⌚ Hours: TU 10:00AM-5:00PM
W-F 9:30AM-5:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M 10:00AM-6:00PM
 W 10:00AM-6:00PM
 F 10:00AM-6:00PM
 SA 10:00AM-2:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TU
 8:00AM-6:00PM
 W 8:30AM-5:00PM
 TH 8:00AM-6:00PM
 F 8:00AM-5:00PM

MCGRAW, JOSEPH, MD

Provider Gender: Male
 License Number: A155228
 NPI: 1588624852
 Provider English Spoken: Y
 Cultural Competency: Y
 WEST COAST EYE CARE
 2240 E PLAZA BLVD STE FG
 NATIONAL CITY, CA 91950
 Phone: (619) 470-2700
 Fax: (619) 267-8221
 After Hours Phone: (619) 470-2700
 Accepting New Patients: Y
 Site English Spoken: Y

MCGRAW, JOSEPH, MD

Provider Gender: Male

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

MCGRAW, JOSEPH, MD

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TU
 8:00AM-6:00PM
 W 8:30AM-5:00PM
 TH 8:00AM-6:00PM
 F 8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-TU
10:00AM-5:00PM
TH-F 10:00AM-5:00PM

**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: Y

Site English Spoken: Y

Site Languages(s) Spoken:

Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

**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: Y

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: SU 10:00AM-4:00PM
M-F 9:00AM-6:00PM
SA 9:00AM-5:00PM

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: Y

Site English Spoken: Y


American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M-F*
8:00AM-4:30PM

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: Y

 *Site English Spoken: Y*
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1U


 *Hours: M-F*
8:00AM-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: Y

 *Site English Spoken: Y*
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Public transportation (within 1/2 mile from Site): 1U

 *Hours: M-F*
8:00AM-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: Y

 *Site English Spoken: Y*
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1U

 *Hours: M-F*
8:00AM-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: Y

 *Site English Spoken: Y*
 *Site Language(s) Spoken: Spanish*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-TU*
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

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: Y

 *Site English Spoken: Y*

American Sign Language (ASL): Provider English Spoken: Y
N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

Hours: SU 10:00AM-4:00PM
M-F 9:00AM-6:00PM
SA 9:00AM-5:00PM

VINH, JOHN, OD

Provider Gender: Male
License Number: 14177
NPI: 1003102724

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: Y

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

VINH, JOHN, OD

Provider Gender: Male
License Number: 14177
NPI: 1003102724
Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP
 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 Phone: (619) 472-1010
Fax: (619) 479-5233

After Hours Phone: (619)
472-1010

Accepting New Patients: Y

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Public transportation (within

1/2 mile from Site): 1T
 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

VIVIRITO, MARY, OD

Provider Gender: Female
License Number: 33798
NPI: 1477968667

Provider English Spoken: Y

Spanish

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Y

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F

8:00AM-4:30PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: TU 10:00AM-5:00PM
W-F 9:30AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

OCEANSIDE

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
9:00AM-6:00PM
W 10:00AM-7:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM

RING, ROBERT, OD

Provider Gender: Male

License Number: 6781

NPI: 1336228840

Provider English Spoken: Y

Cultural Competency: Y

ROBERT A RING OD

3998 VISTA WAY STE 204
OCEANSIDE, CA 92056

Phone: (760) 726-9383

Fax: (760) 726-9897

After Hours Phone: (760)
726-9383

Accepting New Patients: Y

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1T

🕒 Hours: M 10:00AM-6:00PM
TU 9:00AM-4:00PM
W 9:00AM-5:00PM
F 9:00AM-12:00AM

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: Y

📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU
9:00AM-6:00PM
W 10:00AM-7:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM

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: Y

📄 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-11:00AM

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: Y

📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M 8:00AM-5:00PM
TU-TH 9:00AM-6:00PM
F 8:00AM-5:00PM

ADAMS, MONA, OD

Provider Gender: Female
License Number: 14457
NPI: 1942564521

Provider English Spoken: Y
Cultural Competency: Y

RADY CHILDRENS
SPECIALISTS

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123
📞 Phone: (858) 309-7702
Fax: (858) 966-8901

🕒 After Hours Phone: (858)
309-7702

Accepting New Patients: Y

📄 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
7:00AM-5:00PM

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: Y
📄 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

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: Y
📄 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

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: Y
📄 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM
SA 8:30AM-2:00PM

BANSAL, PREETI, MD

Provider Gender: Female
License Number: A90890
NPI: 1871664631

Provider English Spoken: Y
Spanish

Cultural Competency: Y
RADY CHILDRENS

SPECIALISTS

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123
☎ Phone: (858) 309-7702
☎ Fax: (858) 966-8901

🕒 After Hours Phone: (858)
309-7702

Accepting New Patients: Y

📄 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
7:00AM-5:00PM

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: Y

📄 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
7:00AM-5:00PM

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: Y

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
7:00AM-5:00PM

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: Y

Site English Spoken: Y

American Sign Language (ASL): NPI: 1588656151

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

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: Y

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

BOECK, CARL, OD

Provider Gender: Male
License Number: 6620

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: Y

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 8:00AM-5:00PM
TU-TH 9:00AM-6:00PM
F 8:00AM-5:00PM

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 10:00AM-7:00PM
 SA 10:00AM-7:00PM

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
 9:00AM-5:30PM
 SA 9:00AM-3:00PM

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: Y

Site English Spoken: Y
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F
 9:30AM-6:00PM
 SA 9:00AM-3:00PM

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TU
 9:00AM-5:00PM
 W 10:00AM-6:00PM
 F 9:00AM-5:00PM
 SA 9:00AM-1:00PM

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-W
 9:00AM-5:00PM
 TH 9:00AM-1:30PM

F 9:00AM-5:00PM
SA 9:00AM-1:00PM

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: Y

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM
SA 8:30AM-2:00PM

COOPER, MICHAEL, OD

Provider Gender: Male
License Number: 10476
NPI: 1164586244
Provider English Spoken: Y
Cultural Competency: Y
EYELUX OPTOMETRY

16615 DOVE CANYON RD
STE 105

SAN DIEGO, CA 92127

Phone: (858) 487-7900

Fax: (858) 487-1896

After Hours Phone: (858)

487-7900

Accepting New Patients: Y

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM
SA 8:30AM-2:00PM

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: Y

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

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: Y

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
10:00AM-7:00PM
SA 10:00AM-7:00PM

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: Y

☐ Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

DUONG, KIM, OD

Provider Gender: Female
License Number: 34222
NPI: 1114448651
Provider English Spoken: Y
Vietnamese
Cultural Competency: Y
RADY CHILDRENS
SPECIALISTS

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123
☎ Phone: (858) 309-7702
Fax: (858) 966-8901
🕒 After Hours Phone: (858)
309-7702
Accepting New Patients: Y
☐ Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F
7:00AM-5:00PM

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: Y
☐ Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F
8:00AM-5:00PM
SA 8:30AM-2:00PM

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: Y
☐ Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

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: Y
☐ Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

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: Y

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:00PM

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

Fax: (519) 590-9312

After Hours Phone: (619)
590-1994

Accepting New Patients: Y

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: TH-F
9:00AM-5:00PM

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: Y

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T


Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish, Vietnamese
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1T
 Hours: M-F
 9:00AM-5:00PM
 SA 9:00AM-1:00PM






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: Y
 Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT

PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: M-TH
 9:00AM-5:00PM
 F 9:00AM-4:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-4:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: M 7:30AM-4:30PM
 TU 8:00AM-5:00PM
 W 8:30AM-5:00PM
 TH 8:00AM-6:00PM
 F 8:00AM-4:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-4:00PM

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: Y
📄 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F
8:00AM-5:00PM

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: Y

📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Tagalog

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M 9:00AM-4:00PM
TU 7:00AM-1:00PM
W-TH 10:00AM-7:00PM
F 10:00AM-3:00PM
SA 9:00AM-2:00PM

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: Y

📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish, Tagalog,
Vietnamese

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

HUYNH, CHI, OD

Provider Gender: Female
License Number: 12901
NPI: 1922187426
Provider English Spoken: Y
Vietnamese
Cultural Competency: Y
CRYSTAL EYESITE
OPTOMETRY

📍 9225 MIRA MESA BLVD STE
108

SAN DIEGO, CA 92126
📞 Phone: (858) 547-3988
Fax: (844) 367-5161

🕒 After Hours Phone: (858)
547-3988

Accepting New Patients: Y

📄 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 9:30AM-6:00PM
W 9:30AM-6:00PM
TH-F 10:00AM-6:00PM
SA 9:00AM-3:00PM

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: Y

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

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: Y

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

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: Y

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

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: Y

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

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: Y

Site English Spoken: Y

Site Language(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N
 ♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 ⌚ Hours: M-F
 9:00AM-5:00PM
 SA 9:00AM-1:00PM

KHALIL, VADY, OD

Provider Gender: Male
 License Number: 35137
 NPI: 1275263584
 Provider English Spoken: Y
 Arabic

Cultural Competency: Y
 WEST COAST EYE CARE
 📍 6945 EL CAJON BLVD
 SAN DIEGO, CA 92115
 📞 Phone: (619) 697-4600
 Fax: (619) 697-2410
 ☎ After Hours Phone: (619) 697-4600

Accepting New Patients: Y
 📄 Site English Spoken: Y
 American Sign Language (ASL):

N
 ♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 ⌚ Hours: M 7:30AM-4:30PM
 TU 8:00AM-5:00PM
 W 8:30AM-5:00PM
 TH 8:00AM-6:00PM
 F 8:00AM-4:00PM

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: Y

📄 Site English Spoken: Y
 American Sign Language (ASL):

N
 ♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 ⌚ Hours: M 10:00AM-6:00PM
 TU 8:30AM-5:00PM
 W 7:30AM-4:00PM
 TH 9:30AM-5:00PM
 F 8:00AM-4:00PM

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: Y

📄 Site English Spoken: Y
 📄 Site Language(s) Spoken: Bengali, Hindi, Spanish

American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 ⌚ Hours: M-TH
 8:00AM-5:00PM
 F 8:00AM-4:00PM

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: Y
 📄 Site English Spoken: Y
 American Sign Language (ASL):

N
 ♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 ⌚ Hours: M 10:00AM-6:00PM
 TU 8:30AM-5:00PM
 W 7:30AM-4:00PM
 TH 9:30AM-5:00PM
 F 8:00AM-4:00PM

KHINDA, SUNEHA, OD

Provider Gender: Female
 License Number: 35494
 NPI: 1750066726
 Provider English Spoken: Y

Cultural Competency: Y
EYELUX OPTOMETRY
 16615 DOVE CANYON RD
 STE 105
 SAN DIEGO, CA 92127
 Phone: (858) 487-7900
 Fax: (858) 487-1896
 After Hours Phone: (858) 487-7900
 Accepting New Patients: Y
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-5:00PM
 SA 8:30AM-2:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within

1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-4:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 7:00AM-5:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-4:00PM

LAM, ANNE, OD
 Provider Gender: Female
 License Number: 12810
 NPI: 1174550768
 Provider English Spoken: Y
 Cultural Competency: Y
HILLCREST EYE CENTER-UCSD

4060 4TH AVE STE 610
 SAN DIEGO, CA 92103
 Phone: (619) 543-6244
 Fax: (619) 295-5034
 After Hours Phone: (619) 543-6244
 Accepting New Patients: Y
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-4:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: TU-F
9:00AM-3:00PM
SA 10:00AM-2:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL): NPI: 1821001645
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
10:00AM-7:00PM
SA 10:00AM-7:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

LAU, KUEN CHINE, OD

Provider Gender: Male

License Number: 11166

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: Y

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:30AM-6:00PM
SA 9:00AM-3:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N
 ♿ *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 ⌚ *Hours: M-TU*
9:00AM-5:00PM
W 10:00AM-6:00PM
TH 9:00AM-5:00PM
F 10:00AM-6:00PM

LE, JACQUELIN, OD

Provider Gender: Female
License Number: 10962
NPI: 1487610432
Provider English Spoken: Y
Spanish, Vietnamese
Cultural Competency: Y
 SAN DIEGO VISION CARE
 OPTOMETRY

📍 3807 FAIRMOUNT AVE STE 200
 SAN DIEGO, CA 92105
 📞 *Phone: (619) 508-5678*
Fax: (619) 501-0686
 ☎ *After Hours Phone: (619) 508-5678*

Accepting New Patients: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Vietnamese
American Sign Language (ASL):

N
 ♿ *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 ⌚ *Hours: M-F*
9:00AM-5:00PM

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: Y
 Site English Spoken: Y
American Sign Language (ASL):
N

♿ *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 ⌚ *Hours: M-F*
7:00AM-5:00PM

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL):

N
 ♿ *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 ⌚ *Hours: M-F*
9:00AM-5:30PM
SA 9:00AM-3:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL):
N
 ♿ *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T
 ⌚ *Hours: M-F*
10:00AM-7:00PM
SA 10:00AM-7:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1T
 Hours: M-F
 9:30AM-6:00PM
 SA 9:00AM-3:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish, Tagalog
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1T
 Hours: M-TH
 11:00AM-6:00PM
 F 1:00PM-5:00PM
 SA 9:00AM-1:00PM

MARR, RYAN, OD

Provider Gender: Male
 License Number: 35302
 NPI: 1235857525
 Provider English Spoken: Y
 Cultural Competency: Y
 WEST COAST EYE CARE
 4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111
 Phone: (858) 565-8822
 Fax: (858) 565-2449
 After Hours Phone: (858)
 565-8822

Accepting New Patients: Y
 Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: M 10:00AM-6:00PM
 TU 8:30AM-5:00PM
 W 7:30AM-4:00PM
 TH 9:30AM-5:00PM
 F 8:00AM-4:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: M 7:30AM-4:30PM
 TU 8:00AM-5:00PM
 W 8:30AM-5:00PM
 TH 8:00AM-6:00PM
 F 8:00AM-4:00PM

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: Y

☐ Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-4:00PM

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: Y

☐ Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

☎ Phone: (858) 565-8822

Fax: (858) 565-2449

☎ After Hours Phone: (858) 565-8822

Accepting New Patients: Y

☐ Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

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: Y

☐ Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-4:00PM

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: Y

☐ Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
7:00AM-5:00PM

MOOR, TRACY, OD

Provider Gender: Female

License Number: 35085

NPI: 1184283277

Provider English Spoken: Y

Cultural Competency: Y

UC SAN DIEGO HEALTH

📍 16950 VIA TAZON

SAN DIEGO, CA 92127
 Phone: (858) 534-6290
 Fax: (858) 732-0921
 After Hours Phone: (858) 534-6290
 Accepting New Patients: Y
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-4:00PM

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: Y

Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M 7:30AM-4:30PM
 TU 8:00AM-5:00PM
 W 8:30AM-5:00PM
 TH 8:00AM-6:00PM
 F 8:00AM-4:00PM

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: Y
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M 10:00AM-6:00PM
 TU 8:30AM-5:00PM
 W 7:30AM-4:00PM
 TH 9:30AM-5:00PM
 F 8:00AM-4:00PM

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: Y
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Vietnamese
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-W

9:00AM-6:00PM
TH-F 9:00AM-5:00PM
SA 8:00AM-3:00PM

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: Y

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-TU
9:00AM-5:00PM
W 10:00AM-6:00PM
TH 9:00AM-5:00PM
F 10:00AM-6:00PM

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: Y

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

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: Y

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

NGUYEN, KELVIN, OD

Provider Gender: Male
License Number: 11085
NPI: 1518923572

Provider English Spoken: Y
Spanish

Cultural Competency: Y

**SAN DIEGO VISION CARE
OPTOMETRY**

3807 FAIRMOUNT AVE STE
200
SAN DIEGO, CA 92105
Phone: (619) 508-5678
Fax: (619) 501-0686

After Hours Phone: (619)
508-5678

Accepting New Patients: Y

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM

NGUYEN, HOA PHUONG, OD

Provider Gender: Female
License Number: 12630
NPI: 1962439265

Provider English Spoken: Y
Vietnamese

Cultural Competency: Y
COLLEGE GROVE
OPTOMETRY

4560 COLLEGE AVE
SAN DIEGO, CA 92115
Phone: (619) 583-5744
Fax: (619) 582-6112

After Hours Phone: (619)
583-5744

Accepting New Patients: Y

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM

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: Y

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1U

Hours: M-F
7:00AM-5:00PM

PATEL, SARJAN, MD

Provider Gender: Male

License Number: A114976

NPI: 1316199326

Provider English Spoken: Y

Gujarati, Hindi, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822
Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Y

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

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: Y

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

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: Y

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM

TH 8:00AM-6:00PM
F 8:00AM-4:00PM

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: Y

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

PHAM, TONY, OD

Provider Gender: Male
License Number: 12348
NPI: 1841271434

Provider English Spoken: Y
Spanish, Vietnamese
Cultural Competency: Y

MIRA MESA EYECARE

6755 MIRA MESA BLVD STE
141

SAN DIEGO, CA 92121

Phone: (858) 535-8282

Fax: (858) 535-0537

After Hours Phone: (858)
535-8282

Accepting New Patients: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
9:30AM-6:00PM
TH-F 9:30AM-6:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 10:00AM-2:00PM
W-TH 10:00AM-6:00PM
F 9:00AM-2:00PM
SA 9:00AM-2:00PM

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: SU-SA
9:00AM-6:00PM

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: Y

🗉 Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

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: Y

🗉 Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

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: Y

🗉 Site English Spoken: Y

🗉 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

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: Y

🗉 Site English Spoken: Y

🗉 Site Languages(s) Spoken:
Tagalog

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M 9:00AM-4:00PM
TU 7:00AM-1:00PM
W-TH 10:00AM-7:00PM
F 10:00AM-3:00PM
SA 9:00AM-2:00PM

SOLIS, KEVIN, OD

Provider Gender: Male

License Number: 10420

NPI: 1538362116

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

📍 5638 MISSION CENTER RD
STE 103

SAN DIEGO, CA 92108

☎ Phone: (619) 295-2900
☎ Fax: (888) 210-5799






























🕒 After Hours Phone: (619)
295-2900

Accepting New Patients: Y

🗉 Site English Spoken: Y

🗉 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

<p>N  Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U  Hours: M-F 9:00AM-5:30PM SA 9:00AM-3:00PM</p>	<p>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</p>	<p>PROVIDER Public transportation (within 1/2 mile from Site): 1T  Hours: M-F 9:00AM-5:00PM SA 9:00AM-1:00PM</p>
<p>SOLIS, KEVIN, OD Provider Gender: Male License Number: 10420 NPI: 1538362116 Provider English Spoken: Y Cultural Competency: Y FASHION VALLEY EYE CARE OPTOMETR  7007 FRIARS RD STE 351 SAN DIEGO, CA 92108  Phone: (619) 291-2020 Fax: (888) 210-5799  After Hours Phone: (619) 291-2020</p>	<p>Accepting New Patients: Y  Site English Spoken: Y American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1T  Hours: M-F 9:30AM-6:00PM SA 9:00AM-3:00PM</p>	<p>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</p>
<p>Accepting New Patients: Y  Site English Spoken: Y  Site Languages(s) Spoken: Spanish American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1T  Hours: M-F 10:00AM-7:00PM SA 10:00AM-7:00PM</p>	<p>TA, TRANG, OD Provider Gender: Female License Number: 12100 NPI: 1518381045 Provider English Spoken: Y Vietnamese Cultural Competency: Y JASMINE P NGUYEN OD INC  4029 43RD ST STE 300 SAN DIEGO, CA 92105  Phone: (619) 284-3937 Fax: (619) 284-3938  After Hours Phone: (619) 284-3937</p>	<p>Accepting New Patients: Y  Site English Spoken: Y  Site Languages(s) Spoken: Spanish American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U  Hours: M-F 9:00AM-5:30PM SA 9:00AM-3:00PM</p>
<p>SOLIS, KEVIN, OD Provider Gender: Male License Number: 10420 NPI: 1538362116 Provider English Spoken: Y</p>	<p>Accepting New Patients: Y  Site English Spoken: Y  Site Languages(s) Spoken: Spanish, Vietnamese American Sign Language (ASL): N  Accessibility: CONTACT</p>	<p>TAM, MAY, OD Provider Gender: Female License Number: 11960 NPI: 1548255896 Provider English Spoken: Y</p>

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
10:00AM-7:00PM
SA 10:00AM-7:00PM

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: Y

Site English Spoken: Y

American Sign Language (ASL): Provider English Spoken: Y

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:30AM-6:00PM
SA 9:00AM-3:00PM

TILLMAN, SYLVIA, OD

Provider Gender: Female

License Number: 9726

NPI: 1174730824

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: Y

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

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: Y

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

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: Y

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

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: Y
📄 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

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: Y
📄 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

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: Y

📄 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within

1/2 mile from Site): 1U

🕒 Hours: M-F
7:00AM-5:00PM

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: Y

📄 Site English Spoken: Y
📄 Site Language(s) Spoken:
French, Spanish,
Vietnamese

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M 10:00AM-3:00PM
W 10:00AM-3:00PM
F 10:00AM-5:00PM
SA 9:00AM-1:00PM

TU, CHARLES, OD

Provider Gender: Male
License Number: 34618
NPI: 1073137691
Provider English Spoken: Y
Cultural Competency: Y

**OPTOM-EYES VISION CARE
OPTOMETRY**

1555 PALM AVE STE A2
SAN DIEGO, CA 92154

Phone: (619) 297-2020

Fax: (888) 210-5799

After Hours Phone: (619)
297-2020

Accepting New Patients: Y

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:30AM-6:00PM
SA 9:00AM-3:00PM

VAN HOOSE, MARC, OD

Provider Gender: Male

License Number: 12667

NPI: 1932280054

Provider English Spoken: Y
Spanish

Cultural Competency: Y

**VAN HOOSE OPTOMETRIC
CORPORATION**

7246 CLAIREMONT MESA
BLVD
SAN DIEGO, CA 92111

Phone: (858) 292-7193

Fax: (858) 292-8247

After Hours Phone: (858)
292-7193

Accepting New Patients: Y

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 8:00AM-5:00PM
TU-TH 9:00AM-6:00PM
F 8:00AM-5:00PM

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: Y

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

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: Y

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:00PM

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: Y

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-4:00PM

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: Y

📄 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

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: Y

📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish, Thai

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

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: Y

📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish, Thai

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

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: Y

📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish, Thai

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

SKAY, RICHARD, OD

Provider Gender: Male
License Number: 7649
NPI: 1639251945
Provider English Spoken: Y
Cultural Competency: Y
RICHARD M SKAY OD
📍 1903 W SAN MARCOS

BLVD STE 130
SAN MARCOS, CA 92078
☎ Phone: (760) 727-2211
Fax: (760) 727-2533

🕒 After Hours Phone: (760) 727-2211

Accepting New Patients: Y

🗒 Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 9:00AM-3:00PM

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: Y

🗒 Site English Spoken: Y

🗒 Site Languages(s) Spoken: Spanish, Vietnamese

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M 9:00AM-5:00PM
TU 9:00AM-6:00PM

W 9:00AM-5:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM

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: Y

🗒 Site English Spoken: Y

🗒 Site Languages(s) Spoken: Spanish, Vietnamese

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M 9:00AM-5:00PM
TU 9:00AM-6:00PM
W 9:00AM-5:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM

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: Y

🗒 Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 9:00AM-5:00PM
TU 9:00AM-5:30PM
W-TH 9:00AM-5:00PM
F 9:00AM-4:00PM

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: Y

🗒 Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 9:00AM-5:00PM

TU 9:00AM-5:30PM
W-TH 9:00AM-5:00PM
F 9:00AM-4:00PM

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: Y

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 9:00AM-5:30PM
W-TH 9:00AM-5:00PM
F 9:00AM-4:00PM

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: Y

Site English Spoken: Y
Site Languages(s) Spoken:
Arabic, Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

KEDDINGTON, JOAN, OD

Provider Gender: Female
License Number: 6263
NPI: 1992872691

Provider English Spoken: Y
Spanish

Cultural Competency: Y
EYE CARE OPTOMETRY
ASSOCIATES

687 SWEETWATER RD
SPRING VALLEY, CA 91977
Phone: (619) 466-9444
Fax: (619) 466-9314

After Hours Phone: (619)
466-9444

Accepting New Patients: Y

Site English Spoken: Y
Site Languages(s) Spoken:
Arabic, Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

KING, MARY, OD

Provider Gender: Female
License Number: 13711
NPI: 1578792107

Provider English Spoken: Y
Spanish

Cultural Competency: Y
EYE CARE OPTOMETRY
ASSOCIATES

687 SWEETWATER RD
SPRING VALLEY, CA 91977
Phone: (619) 466-9444
Fax: (619) 466-9314

After Hours Phone: (619)
466-9444

Accepting New Patients: Y

Site English Spoken: Y
Site Languages(s) Spoken:
Arabic, Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

NGUYEN, THERESA, OD

Provider Gender: Female
License Number: 35530TLG
NPI: 1609555713

Provider English Spoken: Y
Cultural Competency: Y

EYE CARE OPTOMETRY
ASSOCIATES

687 SWEETWATER RD
 SPRING VALLEY, CA 91977
 Phone: (619) 466-9444
 Fax: (619) 466-9314
 After Hours Phone: (619)
 466-9444

Accepting New Patients: Y

Site English Spoken: Y
 Site Languages(s) Spoken:
 Arabic, Spanish

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Public transportation (within
 1/2 mile from Site): 1U

Hours: M-F
 9:00AM-6:00PM
 SA 9:00AM-5:00PM

SOLIS, KEVIN, OD

Provider Gender: Male

License Number: 10420

NPI: 1538362116

Provider English Spoken: Y

Cultural Competency: Y

EYE CARE OPTOMETRY
 ASSOCIATES

687 SWEETWATER RD
 SPRING VALLEY, CA 91977
 Phone: (619) 466-9444
 Fax: (619) 466-9314
 After Hours Phone: (619)
 466-9444

Accepting New Patients: Y

Site English Spoken: Y
 Site Languages(s) Spoken:
 Arabic, Spanish

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Public transportation (within
 1/2 mile from Site): 1U

Hours: M-F
 9:00AM-6:00PM
 SA 9:00AM-5:00PM

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken:
 Arabic, Spanish

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Public transportation (within
 1/2 mile from Site): 1U

Hours: M-F
 9:00AM-6:00PM
 SA 9:00AM-5:00PM

VALLEY CENTER

GRASSO, GINA, OD

Provider Gender: Female

License Number: 11139TLG

NPI: 1700899952

Provider English Spoken: Y

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: Y

Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish

American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER

Public transportation (within
 1/2 mile from Site): 1U

Hours: M 9:00AM-6:00PM
 TU-F 9:00AM-5:00PM

JOYCE, ROBERT, OD

Provider Gender: Male

License Number: 11833

NPI: 1275585127

Provider English Spoken: Y
 Spanish

Cultural Competency: Y

VALLEY CENTER OPTOMETRY

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 VALLEY CENTER, CA 92082
 Phone: (760) 751-8771
 Fax: (760) 751-8772

After Hours Phone: (760)
 751-8771

Accepting New Patients: Y

Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish

American Sign Language (ASL):

N
 ♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 🕒 Hours: M 9:00AM-6:00PM
 TU-F 9:00AM-5:00PM

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: Y

☐ Site English Spoken: Y
 ☐ Site Languages(s) Spoken: Spanish
 American Sign Language (ASL):

N
 ♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 🕒 Hours: M 9:00AM-6:00PM
 TU-F 9:00AM-5:00PM

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: Y
 ☐ Site English Spoken: Y
 ☐ Site Languages(s) Spoken: Spanish
 American Sign Language (ASL):

N
 ♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 🕒 Hours: M-TU
 9:00AM-6:00PM
 W 7:00AM-5:00PM
 TH 9:00AM-6:00PM

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: Y
 ☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 🕒 Hours: M 9:00AM-5:00PM
 TU-W 9:00AM-6:00PM
 TH-F 9:00AM-5:00PM

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: Y
 ☐ Site English Spoken: Y
 ☐ Site Languages(s) Spoken: Spanish
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 🕒 Hours: M 9:00AM-5:00PM
 TU-W 9:00AM-6:00PM
 TH-F 9:00AM-5:00PM

TRAN, THAO, OD

Provider Gender: Female

License Number: 12867

NPI: 1962581421

Provider English Spoken: Y

Vietnamese


Cultural Competency: Y

KINDERSPECS-GOOD EYES

OPTOMETRY

 110 CIVIC CENTER DR STE
204

VISTA, CA 92084

 Phone: (760) 753-3665

Fax: (408) 969-1653


 After Hours Phone: (760)
753-3665

Accepting New Patients: Y


 Site English Spoken: Y

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): IT

 Hours: M-TH
10:00AM-5:00PM


SAN MARCOS


**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.americaread
hc.com](http://www.americaread
hc.com)*

Cultural Competency: N

Accepting New Patients: N

CHULA VISTA

AFC URGENT CARE OF BONITA*

NPI: 1316225147

760 OTAY LAKES RD
CHULA VISTA, CA 91910

(619) 821-2300

(619) 821-2300

Site Languages(s) Spoken:
Spanish

SU 8:00AM-5:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

www.afcurgentcare.com/chula-vista/

Accepting New Patients: N

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: N

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: N

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 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: N

AFC URGENT CARE OF SAN DIEGO*

NPI: 1952995466

1740 ROSECRANS ST
SAN DIEGO, CA 92106

(619) 790-7800

(619) 790-7800

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: N

SAN DIEGO

AFC URGENT CARE OF SAN DIEGO*

NPI: 1558788620

5671 BALBOA AVE
SAN DIEGO, CA 92111

(858) 800-2880

(858) 800-2880

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: N

AFC URGENT CARE OF SAN DIEGO*

NPI: 1558788620

8260 MIRA MESA BLVD
STE A
SAN DIEGO, CA 92126

(858) 900-3550

(858) 900-3550

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: N

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 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: N

AFC URGENT CARE OF SAN DIEGO*

NPI: 1952995466

5671 BALBOA AVE
SAN DIEGO, CA 92111

(858) 800-2880

(858) 800-2880

SU-SA 8:00AM-8:00PM

AFC URGENT CARE OF SAN DIEGO*

NPI: 1558788620

1740 ROSECRANS ST
SAN DIEGO, CA 92106

(619) 790-7800

(619) 790-7800

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 8:00AM-8:00PM
 *Accessibility:* CONTACT PROVIDER
 <https://www.afcurgentcare.com/san-diego/>
 Accepting New Patients: N






SANTEE

AFC URGENT CARE OF SANTEE*






NPI: 1396058137
 10538 MISSION GORGE RD STE 100
 SANTEE, CA 92071
 (619) 456-0033
 (619) 456-0033
 Site Languages(s) Spoken: Arabic, Spanish
 SU-SA 8:00AM-8:00PM
 *Accessibility:* CONTACT PROVIDER
 www.afcurgentcare.com/santee/
 Accepting New Patients: N

CHULA VISTA






RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 386 E H ST STE 202
 CHULA VISTA, CA 91910
 (858) 966-8133
 (858) 966-8133
 *Accessibility:* CONTACT PROVIDER
 N/A
 Accepting New Patients: N






RADY CHILDRENS SPECIALISTS SAN DIEGO MED

FNDTN*
NPI: 1669617197
 386 E H ST STE 202
 CHULA VISTA, CA 91910
 (858) 966-8133
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 Accepting New Patients: N





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 (858) 966-8133
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 N/A
 Accepting New Patients: N

**RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED**






FNDTN*

NPI: 1669617197

-  386 E H ST STE 202
CHULA VISTA, CA 91910
 -  (858) 966-8133
 -  (858) 966-8133
 -  *Accessibility:* CONTACT PROVIDER
 -  N/A
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**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***







NPI: 1669617197

-  386 E H ST STE 202
CHULA VISTA, CA 91910
 -  (858) 966-8133
 -  (858) 966-8133
 -  *Accessibility:* CONTACT PROVIDER
 -  N/A
- Accepting New Patients: N

ESCONDIDO

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***







NPI: 1669617197

-  2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 -  (760) 755-7600
 -  (760) 755-7600
 -  M-F 8:00AM-5:00PM
 -  *Accessibility:* CONTACT PROVIDER
 -  N/A
- Accepting New Patients: N

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED**





FNDTN*

NPI: 1669617197

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 -  (760) 755-7600
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 -  N/A
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 N/A


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 2125 CITRACADO PKWY
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 (760) 755-7600

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 M-F 8:00AM-5:00PM

 *Accessibility: CONTACT
PROVIDER*

 N/A


Accepting New Patients: N


**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 2125 CITRACADO PKWY
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ESCONDIDO, CA 92029

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 (760) 755-7600

 M-F 8:00AM-5:00PM

 *Accessibility: CONTACT
PROVIDER*

 N/A


Accepting New Patients: N


**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 2125 CITRACADO PKWY
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ESCONDIDO, CA 92029

 (760) 755-7600

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 M-F 8:00AM-5:00PM

 *Accessibility: CONTACT
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 N/A


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SPECIALISTS SAN DIEGO MED
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 N/A






Accepting New Patients: N

**RADY CHILDRENS
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FNDTN***







NPI: 1669617197

 2125 CITRACADO PKWY
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ESCONDIDO, CA 92029

 (760) 755-7600
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 M-F 8:00AM-5:00PM
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 N/A
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 N/A
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**RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN***







NPI: 1669617197
 2125 CITRACADO PKWY

STE 100
 ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility: CONTACT PROVIDER*
 N/A
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NPI: 1669617197

 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

 (760) 294-9270

 (760) 294-9270

 M-F 8:00AM-5:00PM

 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: N

LA MESA


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED

FNDTN*

NPI: 1669617197

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

 (858) 576-1700

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 (619) 713-5375
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OCEANSIDE






**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056
 (760) 547-1020
 (760) 547-1020
 *Accessibility:* CONTACT
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SAN DIEGO
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NPI: 1669617197

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 (858) 966-8800

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150

SAN DIEGO, CA 92105

 (619) 280-2905

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LA MESA

**RCH EAST COUNTY URGENT
CARE***

NPI: 1710065933

5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

(619) 713-5375

(619) 713-5375

SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

Accessibility: CONTACT

PROVIDER

N/A

Accepting New Patients: N

SAN DIEGO

RCH MID CITY URGENT CARE*

NPI: 1710065933

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

(619) 280-2905

(619) 280-2905

SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

Accessibility: CONTACT
PROVIDER

N/A

Accepting New Patients: N

ESCONDIDO

**RCH NORTH COUNTY URGENT
CARE***

NPI: 1710065933

625 CITRACADO PKWY STE
100

ESCONDIDO, CA 92025

(760) 739-1543

(760) 739-1543

Accessibility: CONTACT
PROVIDER

N/A

Accepting New Patients: N

OCEANSIDE

**RCH OCEANSIDE URGENT
CARE***

NPI: 1710065933

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

(760) 547-1000

(760) 547-1000

SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

Accessibility: CONTACT
PROVIDER

N/A

Accepting New Patients: N

SAN DIEGO

**SOUTHBAY URGENT CARE
INC***

NPI: 1558746750

1628 PALM AVE
SAN DIEGO, CA 92154

(619) 591-9999

(619) 591-9999

Site Languages(s) Spoken:
Spanish, Vietnamese

SU 10:00AM-6:00PM

M-F 9:00AM-8:00PM

SA 10:00AM-6:00PM

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ntcare.com/](https://www.southbayurgen
ntcare.com/)

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Punjabi ਪੰਜਾਬੀ ਸਾਡੀ ਸਿਹਤ ਨਾਂ ਡਰੱਗ ਪਲਾਨ ਬਾਰੇ ਤੁਹਾਡੇ ਕਿਸੇ ਵੀ ਸਵਾਲ ਦਾ ਜਵਾਬ ਦੇਣ ਲਈ ਸਾਡੇ ਕੋਲ ਮੁਫਤ ਦੁਆਰੀਏ ਸੇਵਾਵਾਂ ਉਪਲਬਧ ਹਨ। ਇੱਕ ਦੁਆਰੀਆ ਲੈਣ ਲਈ, ਸਾਨੂੰ 1-800-452-4413 'ਤੇ ਕਾਲ ਕਰੋ। ਪੰਜਾਬੀ ਬੋਲਣ ਵਾਲਾ ਕੋਈ ਵੀ ਵਿਅਕਤੀ ਤੁਹਾਡੀ ਮਦਦ ਕਰ ਸਕਦਾ ਹੈ। ਇਹ ਇੱਕ ਮੁਫਤ ਸੇਵਾ ਹੈ।

Khmer យើងមានសេវាអ្នកបកប្រែផ្ទាល់មាត់ដោយឥតគិតថ្លៃដើម្បីឆ្លើយសំណួរនានា ដែលអ្នកអាចមានអំពីសុខភាព ឬគម្រោងឱសថរបស់យើង។ ដើម្បីទទួលបានអ្នកបកប្រែផ្ទាល់មាត់ម្នាក់ សូមទូរស័ព្ទទមកយើងខ្ញុំតាមលេខ 1-800-452-4413។ អ្នកណាម្នាក់ដែលនិយាយភាសាខ្មែរអាចជួយអ្នកបាន។ សេវានេះមិនគិតថ្លៃនោះទេ។

Mien Yie mbuo mbenc duqv maaih tengx wang-henh nzie faan waac mienh liouh dau waac bun muangx dongh nzunc baav meih maaih waac naaic taux yie mbuo gorngv taux yie nyei heng-wangc jauv-louc a'fai ndie-daan. Liouh lorx zipv longc faan waac nor, douc waac lorx taux yie mbuo yiem njiec naaiv 1-800-452-4413. Maaih mienh gorngv benx Mienh waac haih tengx nzie duqv meih. Naaiv se benx wang-henh nzie weih jauv-louc oc.

Lao ພວກເຮົາມີນາຍພາສາໂດຍບໍ່ເສຍຄ່າເພື່ອຕອບຄໍາຖາມຕ່າງໆທີ່ທ່ານອາດຈະມີກ່ຽວກັບສຸຂະພາບ ຫຼື ແຜນການຢາຂອງພວກເຮົາ. ເພື່ອໃຫ້ໄດ້ຮັບນາຍພາສາ, ພຽງແຕ່ໂທຫາພວກເຮົາທີ່ເບີ 1-800-452-4413. ມີຜູ້ຮູ້ພາສາລາວ ສາມາດຊ່ວຍທ່ານ. ມີແມ່ນບໍລິການໂດຍບໍ່ເສຍຄ່າ.

Armenian Մեզ մոտ հասանելի են անվճար թարգմանչական ծառայություններ՝ մեր առողջապահական կազմակերպիչներին հետ կապված Ձեր ցանկացած հարցին պատասխանելու համար: Թարգմանիչ լինելու համար պարզապես զանգահարեք մեզ 1-800-452-4413 հեռախոսահամարով: Ձեզ կօգնի հարցերին իմացող թարգմանիչը: Ծառայությունն անվճար է:

Farsi ما خدمات مترجم شفاهی رایگان ارائه می‌دهیم تا به هر گونه سوالی که در مورد طرح سلامت یا داروی ما دارید پاسخ دهیم. برای داشتن مترجم شفاهی، کافایت با ما به شماره 1-800-452-4413 تماس بگیرید. کسی که فارسی صحبت می‌کند می‌تواند به شما کمک کند. این یک خدمت رایگان است.

Thai ภาษาไทย เรามีบริการล่ามฟรีเพื่อตอบคำถามของคุณเกี่ยวกับสุขภาพหรือแผนด้านยาของคุณ หากต้องการบริการล่าม โปรดโทรหาเราที่ 1-800-452-4413 มีคนที่สามารถพูดภาษาไทยได้เพื่อช่วยเหลือคุณ บริการนี้เป็นบริการฟรี

Multi-Language Insert
Multi-Language Interpreter Services

English We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at 1-800-776-4466. Someone who speaks English can help you. This is a free service.

Spanish Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al 1-800-776-4466. Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

Chinese Mandarin 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务，请致电 1-800-776-4466。我们的中文工作人员很乐意帮助您。这是一项免费服务。

Chinese Cantonese 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯服務。如需翻譯服務，請致電 1-800-776-4466。我們講中文的人員將樂意為您提供幫助。這是一項免費服務。

Tagalog Mayroon kaming libreng serbisyo sa pagsasaling-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggagamot. Upang makakuha ng tagasaling-wika, tawagan lamang kami sa 1-800-776-4466. Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

French Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au 1-800-776-4466. Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

Vietnamese Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi 1-800-776-4466 sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.

German Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher erreichen Sie unter 1-800-776-4466. Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

Korean 당사는 의료 보험 또는 약품 보험에 관한 질문에 대해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 1-800-776-4466 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

Russian Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону 1-800-776-4466. Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

Arabic إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول

ليس عليك سوى الاتصال بنا على 1-800-776-4466. سيقوم شخص ما يتحدث العربية بمساعدتك. هذه خدمة مجانية على مترجم فوري،

Hindi हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं. एक दुभाषिया प्राप्त करने के लिए, बस हमें 1-800-776-4466 पर फोन करें. कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है. यह एक मुफ्त सेवा है.

Italian E disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero 1-800-776-4466. Un nostro incaricato che parla Italianovi fornirà l'assistenza necessaria. È un servizio gratuito.

Portuguese Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contacte-nos através do número 1-800-776-4466. Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

French Creole Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan 1-800-776-4466. Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

Polish Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer 1-800-776-4466. Ta usługa jest bezpłatna.

Japanese 当社の健康 健康保険と薬品 処方薬プランに関するご質問にお答えするために、無料の通訳サービスがあります。通訳をご用命になるには、1-800-776-4466 にお電話ください。日本語を話す人者が支援いたします。これは無料のサービスです。

Hmong Peb muaj cov kev pab cuam txhais lus pab dawb los teb tej lus nug uas koj muaj hais txog ntawm peb li kev noj qab haus huv los sis lub phiaj xwm tshuaj kho mob. Kom tau txais tus kws pab cuam txhais lus, tsuas yog hu rau peb ntawm 1-800-776-4466. Muaj cov paub lus Hmoob tuaj yeem pab tau koj. Qhov no yog pab dawb.

Ukrainian Ми надаємо безкоштовні послуги перекладача, щоб відповісти на будь-які запитання щодо нашого плану лікування чи надання лікарських засобів. Щоб скористатися послугами перекладача, просто зателефонуйте нам за номером 1-800-776-4466. Вам може допомогти хтось, хто розмовляє Українською. Це безкоштовна послуга.

Navajo D77 ats'77s baa 1hly3 47 doodago azeé' bee aa 1hly3 b7na'7d7[kidgo 47 n1 ata' hodoolnih77 h0l=. Ata' halne'4 biniiy4go, koj8' 1-800-776-4466 b44sh bee hod77lnih. Diné k'ehj7 y1[ti'i n7k1 adoolwo]. D77 t'11 j77k'eh bee an1'1wo.

Punjabi ਪੰਜਾਬੀ ਸਾਡੀ ਸਿਹਤ ਨਾਂ ਡਰੱਗ ਪਲਾਨ ਬਾਰੇ ਤੁਹਾਡੇ ਕਿਸੇ ਵੀ ਸਵਾਲ ਦਾ ਜਵਾਬ ਦੇਣ ਲਈ ਸਾਡੇ ਕੋਲ ਮੁਫਤ ਦੁਬਾਸੀਏ ਸੇਵਾਵਾਂ ਉਪਲਬਧ ਹਨ। ਇੱਕ ਦੁਬਾਸੀਆ ਲੈਣ ਲਈ, ਸਾਨੂੰ 1-800-776-4466 'ਤੇ ਕਾਲ ਕਰੋ। ਪੰਜਾਬੀ ਬੋਲਣ ਵਾਲਾ ਕੋਈ ਵੀ ਵਿਅਕਤੀ ਤੁਹਾਡੀ ਮਦਦ ਕਰ ਸਕਦਾ ਹੈ। ਇਹ ਇੱਕ ਮੁਫਤ ਸੇਵਾ ਹੈ।

Khmer យើងមានសេវាអ្នកបកប្រែផ្ទាល់មាត់ដោយឥតគិតថ្លៃដើម្បីឆ្លើយសំណួរនានា ដែលអ្នកអាចមានអំពីសុខភាព ឬគម្រោងឱសថរបស់យើង។ ដើម្បីទទួលបានអ្នកបកប្រែផ្ទាល់មាត់ម្នាក់ សូមទូរស័ព្ទមកយើងខ្ញុំតាមលេខ 1-800-776-4466។ អ្នកណាម្នាក់ដែលនិយាយភាសាខ្មែរអាចជួយអ្នកបាន។ សេវានេះមិនគិតថ្លៃនោះទេ។

Mien Yie mbuo mbenc duqv maaih tengx wang-henh nzie faan waac mienh liouh dau waac bun muangx dongh nzunc baav meih maaih waac naaic taux yie mbuo gorngv taux yie nyei heng-wangc jauv-louc a'fai ndie-daan. Liouh lorx zipv longc faan waac nor, douc waac lorx taux yie mbuo yiem njiec naaiv 1-800-776-4466. Maaih mienh gorngv benx Mienh waac haih tengx nzie duqv meih. Naaiv se benx wang-henh nzie weih jauv-louc oc.

Lao ພວກເຮົາມີນາຍພາສາໂດຍບໍ່ເສຍຄ່າເພື່ອຕອບຄໍາຖາມຕ່າງໆທີ່ທ່ານອາດຈະມີກ່ຽວກັບສຸຂະພາບ ຫຼື ແຜນການຢາຂອງພວກເຮົາ. ເພື່ອໃຫ້ໄດ້ຮັບນາຍພາສາ, ພຽງແຕ່ໂທຫາພວກເຮົາທີ່ບີ 1-800-776-4466. ມີຜູ້ຮູ້ພາສາລາວ ສາມາດຊ່ວຍທ່ານ. ບໍ່ແມ່ນບໍລິການໂດຍບໍ່ເສຍຄ່າ.

Armenian Մեզ քոն հասանելի են անվճար թարգմանչական ծառայություններ՝ մեր առողջապահական կառուցվածքի և կառուցվածքի հետ կապված Ձեր ցանկացած հարցի և պատասխանելու համար: Թարգմանիչ և անվճար համար պարզապես զանգահարեք մեզ 1-800-776-4466 հեռախոսախոսակառուցվածք: Ձեզ կօգնի հարցերն իմացող թարգմանիչը: Ծառայությունն անվճար է:

Farsi ما خدمات مترجم شفاهی رایگان ارائه می‌دهیم تا به هر گونه سوالی که در مورد طرح سلامت یا داروی ما دارید پاسخ دهیم. برای داشتن مترجم شفاهی، کافیت با ما به شماره 1-800-776-4466 تماس بگیرید. کسی که فارسی صحبت می‌کند می‌تواند به شما کمک کند. این یک خدمت رایگان است.

Thai ภาษาไทย เรามีบริการล่ามฟรีเพื่อตอบคำถามของคุณเกี่ยวกับสุขภาพหรือแผนด้านยาของคุณ หากต้องการบริการล่าม โปรดโทรหาเราที่ 1-800-776-4466 มีคนที่สามารถพูดภาษาไทยได้เพื่อช่วยเหลือคุณ บริการนี้เป็นบริการฟรี



LANGUAGE ASSISTANCE NOTICE

English ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-800-452-4413 (TTY: 711), 8:00 a.m. to 8:00 p.m., seven days a week. The call is free.

中文 Chinese 请注意：如果您说中文，可以免费获得语言协助服务。请拨打 1-800-452-4413 (听障和语障专线：711)，每周七天办公，早上 8:00 至晚上 8:00。此电话为免付费专线。

한국어 Korean 주: 귀하가 한국어를 사용하시는 경우, 무료로 언어 지원 서비스를 이용하실 수 있습니다. 1-800-452-4413 (TTY: 711) 번으로 주 7 일, 오전 8 시부터 오후 8 시까지 전화하실 수 있습니다. 이 전화는 무료입니다.

Русский Russian ОБРАТИТЕ ВНИМАНИЕ! Если Вы говорите по-русски, мы можем предложить Вам бесплатные услуги языковой поддержки. Звоните по телефону 1-800-452-4413 (TTY: 711) с 8:00 до 20:00 без выходных. Звонок бесплатный.

فارسی Farsi

توجه: اگر به زبان فارسی صحبت می کنید، خدمات امداد زبانی بدون اخذ هزینه در اختیار شما می باشد. با شماره 1-800-452-4413- 4413 (TTY: 711)، از ساعت 8:00 صبح تا 8:00 شب در هفت روز هفته تماس بگیرید. این تماس رایگان است.

भाषा Hindi ध्यान: यदि आप भाषा बोलते हैं, तो आपके लिए भाषा सहायता सेवाएं नि:शुल्क उपलब्ध हैं। फ़ोन करना 1-800-452-4413 (TTY: 711), सुबह 8:00 बजे से शाम 8:00 बजे तक, सप्ताह के सातों दिन। फ़ोन करना फ़्री है।

Lus Hmoob Hmong LUS CEEV: Yog koj hais Lus Hmoob, muaj kev pab txhais lus pub dawb rau koj. Hu rau 1-800-452-4413 (TTY: 711), 8:00 teev sawv ntxov txog 8:00 teev tsaus ntuj, xya hnuv hauv ib lub as thiv. Qhov hu xov tooj no yog hu dawb xwb.

Español Spanish ATENCIÓN: Si usted habla español, hay a su disposición servicios de asistencia de idiomas sin costo. Llame al 1-800-452-4413 (TTY: 711), de 8:00 a.m. a 8:00 p.m., los siete días de la semana. La llamada es gratuita.

Tiếng Việt Vietnamese LƯU Ý: Nếu quý vị nói tiếng Việt, chúng tôi sẽ cung cấp miễn phí dịch vụ hỗ trợ ngôn ngữ cho quý vị. Gọi số 1-800-452-4413 (TTY: 711), 8 giờ sáng đến 8 giờ tối, bảy ngày trong tuần. Cuộc gọi này miễn phí.

Tagalog PAUNAWA: Kung nagsasalita kayo ng Tagalog, may mga available na libreng serbisyo ng tulong sa wika para sa inyo. Tumawag sa 1-800-452-4413 (TTY: 711), 8:00 a.m. hanggang 8:00 p.m., pitong araw sa isang linggo. Libre ang tawag.

العربية Arabic

تنبيه: إذا كنت تتحدث اللغة العربية، يتوفر لك خدمات المساعدة اللغوية المجانية. اتصل على الرقم 1-800-452-4413 (TTY: 711)، من الساعة 8:00 صباحًا إلى 8:00 مساءً طوال أيام الأسبوع. علمًا بأن هذه المكالمات مجانية.

ພາສາລາວ Laotian ສິ່ງສໍາຄັນ: ຖ້າທ່ານເວົ້າພາສາລາວແມ່ນມີບໍລິການຊ່ວຍເຫຼືອທາງດ້ານພາສາບໍ່ເສຍຄ່າໃຫ້ທ່ານ. ໂທຫາເບີ 1-800-452-4413 (TTY: 711), 8:00 ໂມງເຊົ້າ ຫາ 8:00 ໂມງແລງ, ເຈັດວັນຕໍ່ອາທິດ. ການໂທແມ່ນບໍ່ເສຍຄ່າ.

日本語 Japanese 注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-800-452-4413 (TTY: 711) まで、お電話にてご連絡ください。毎日午前 8 時から午後 8 時まで受け付けています。通話は無料です。

ภาษาไทย Thai

เรียน หากคุณพูดภาษา ภาษาไทย เรามีบริการความช่วยเหลือด้านภาษาให้แก่คุณโดยไม่มีค่าใช้จ่าย โทร 1-800-452-4413 (TTY: 711) 8:00 น. ถึง 20:00 น. ได้ตลอดเจ็ดวันต่อสัปดาห์ โทรฟรี ไม่มีค่าใช้จ่าย

ਪੰਜਾਬੀ Punjabi ਸਾਵਧਾਨ : ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ, ਉਪਲਬਧ ਹਨ | ਕਾਲ ਕਰੋ 1-800-452-4413 (TTY: 711), ਸਵੇਰੇ 8:00 ਵਜੇ ਤੋਂ ਸ਼ਾਮ 8:00 ਵਜੇ ਤੱਕ, ਹਫ਼ਤੇ ਦੇ ਸੱਤ ਦਿਨ ਹਫ਼ਤੇ ਦੇ ਸੱਤ ਦਿਨ. ਕਾਲ ਫ੍ਰੀ ਹੈ |

ខ្មែរ Khmer ចាប់អារម្មណ៍: បើសិនអ្នកនិយាយភាសាខ្មែរ សេវាជំនួយភាសា គឺមានសំរាប់អ្នក ដោយឥតគិតថ្លៃ។ ហៅ 1-800-452-4413 (TTY: 711) ម៉ោង 8:00 ព្រឹក ដល់ 8:00 យប់ ប្រាំពីរថ្ងៃមួយអាទិត្យ។ គឺឥតគិតថ្លៃទេ។

Հայերեն Armenian ՈՒՇԱԴՐՈՒԹՅՈՒՆ՝ Եթե խոսում եք հայերեն, Ձեզ տրամադրվելի են անվճար լեզվաբան օգնություն ծառայություններ: Ձանգահայեր 1-800-452-4413 (TTY՝ 711) համարով, 8:00-ից 20:00, շաբաթը յոթ օր: Հեռախոսազանգն անվճար է:

Українська Ukrainian ЗВЕРНІТЬ УВАГУ! Якщо Ви розмовляєте українською, ми можемо запропонувати Вам безкоштовні послуги мовної підтримки. Телефонуйте 1-800-452-4413 (TTY: 711) з 8:00 до 20:00 без вихідних. Дзвінок безкоштовний.

Mienh Mien TOV JANGX LONGX OC: Beiv taix meih gorngv Mienh waac nor, ninh mbuo gorn zangc duqv mbenc nzoih wang-henh nzie weih faan waac bun meih muangx maiv zuqc feix liuc cuotv zinh nyaanh. Douc waac lorx taux 1-800-452-4413 (TTY: 711), 8:00 diemv ziangh hoc lungnh ndorm mingh taux 8:00 ziangh hoc lungnh muonz, yietc norm liv baaiz se koi nzoih siec hnoi. Naaiv norm douc waac gorn se wang-henh longc maiv zuqc feix liuc cuotv zinh nyaanh.

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