



Blue Shield TotalDual Plan (HMO D-SNP)

2024 Provider Directory

County: San Diego

H2819_23_380B_C 07172023

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

Blue Shield TotalDual Plan | 2024 Provider Directory

Introduction

This Provider Directory includes information about the provider types in Blue Shield TotalDual Plan and listings of all the plan's providers as of the date of this Directory. The listings contain address and contact information as well as other details such as days and hours of operations, specialties, and skills. Key terms and their definitions appear in alphabetical order in the last chapter of the *Evidence of Coverage*.

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†DSNP Provider that is also Medi-Cal enrolled



If you have questions, please call Blue Shield TotalDual Plan at 1-800-452-4413 (TTY: 711), 8:00 a.m. to 8:00 p.m., seven days a week. The call is free. **For more information**, visit www.blueshieldca.com/medicare

A. Disclaimers

- ❖ This Directory lists health care professionals (such as doctors, nurse practitioners, and psychologists) and facilities (such as hospitals or clinics). This Directory also lists Long-term Services and Supports (LTSS) providers (such as Adult Day Health and Home Health providers) that you may use as a Blue Shield TotalDual Plan member. We also list the pharmacies that you may use to get your prescription drugs.
- ❖ These are referred to as “network providers” in this Directory. These providers signed a contract with us to provide you services. This is a list of Blue Shield TotalDual Plan’s network providers for San Diego County.
- ❖ You can get this document for free in other formats, such as large print, braille, or audio. Call 1-800-452-4413 (TTY: 711) 8:00 a.m. to 8:00 p.m., seven days a week. The call is free.
- ❖ 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 1-800-452-4413. Someone that speaks English, Spanish, Arabic, Farsi, Armenian, Khmer, Korean, Russian, Tagalog, or Vietnamese can help you. This is a free service. You can make a standing request to get this document in a language other than English or in an alternate format now and in the future. To make a request, please contact Blue Shield TotalDual Plan and Customer Care will keep your preferred language and format on file for future communications. To make any updates on your preference, please contact Blue Shield TotalDual Plan.
- ❖ The list is up-to-date as of 04/02/2024, but you need to know that:
 - Some Blue Shield TotalDual Plan network providers may have been added or removed from our network after this Directory was published.
 - Some Blue Shield TotalDual Plan providers in our network may no longer be accepting new members. If you are having trouble finding a provider who will accept new members, call Customer Care 1-800-452-4413 (TTY: 711) and we will help you.
 - To get the most up-to-date information about Blue Shield TotalDual Plan network providers in your area, visit www.blueshieldca.com/medicare or call Customer Care at 1-800-452-4413 (TTY: 711), 8:00 a.m. to 8:00 p.m., seven days a week. The call is free.

Doctors and other health care professionals in Blue Shield TotalDual Plan’s network are listed on page 13-2436.

You can use the Index in the back of the Directory to find a page where a provider is listed.

B. Background Information about Blue Shield TotalDual Plan's Network Providers

B1. Key terms

This section explains key terms in our Directory.

- **Providers** are professionals such as doctors, nurses, pharmacists, therapists, and other people who provide care and services. **Services** include medical care, Long-term Services and Supports (LTSS), supplies, prescription drugs, equipment, and other services.
 - The term providers includes facilities such as hospitals, clinics, and other places that provide medical services and medical equipment. It also includes LTSS providers that you may use as a Blue Shield TotalDual Plan member.
 - Providers that are a part of our plan's network are called network providers.
- **Network providers** have contracted with us to deliver services to members of our plan. Network providers participate in our plan. That means they accept members of our plan and provide services our plan covers. When you use a network provider, you usually pay nothing for covered services.
- A **Primary Care Physician (PCP)** is an internist, family practitioner, general practitioner, or specialist who gives you routine health care. Your PCP will keep your medical records and get to know your health needs over time. Your PCP will also give you a referral if you need a specialist or other provider.
- **Specialists** are doctors who provide health care services for a specific disease or part of the body. There are many kinds of specialists. Here are a few examples:
 - Oncologists care for patients with cancer.
 - Cardiologists care for patients with heart conditions.
 - Orthopedists care for patients with certain bone, joint, or muscle conditions.
- A Medical group or an Independent Physician Association (IPA) is an organization formed under California law that contracts with health plans to provide or arrange for the provisions of health care services to health plan enrollees. Please see section B3 for additional information.
- You may need a **referral** or **prior** authorization to see a specialist or someone that is not your PCP. A **referral** means that your network PCP must give you approval before you can use the other provider. A **prior authorization** is different than a referral. It means that Blue Shield TotalDual Plan (not your network PCP) must give you approval **before** we will cover a specific service, item, or drug or an out-of-network provider. If you don't get a referral or prior authorization, Blue Shield TotalDual Plan may not cover the service, item, or drug.

†DSNP Provider that is also Medi-Cal enrolled



If you have questions, please call Blue Shield TotalDual Plan at 1-800-452-4413 (TTY: 711), 8:00 a.m. to 8:00 p.m., seven days a week. The call is free. For more information, visit www.blueshieldca.com/medicare

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- Referrals or prior authorization are **not** needed for:
 - emergency care;
 - urgently needed care;
 - kidney dialysis services that you get at a Medicare-certified dialysis facility when you are outside the plan’s service area;
 - services from a women’s health specialist; or
 - all preventive services covered by Medicare, including screenings and vaccines.
 - Additionally, if you are eligible to get services from Indian health providers, you may use these providers without a referral. We must pay the Indian health provider for those services even if they are out of our plan’s network.
 - More information on referrals and prior authorization is available in Chapter 3 of the *Evidence of Coverage*.
 - You will also be assigned a **Care Team**. Your **Care Team** begins with the relationship between you and your PCP. The Care Team may include a caregiver, Care Navigator, specialist, and others, based on the level of need demonstrated in your Care Plan. Everyone on the Care Team works together to make sure your care is coordinated. This means that they make sure that you get all the tests, labs, and other care that you need, and the results are shared with the appropriate providers. It also means that your PCP should know all medicines you take so that they can reduce any negative effects. Your PCP will always get your permission before sharing your medical information with other providers. Members of your Care Team may include:
 - A Care Navigator that helps you manage your medical providers and services.
 - Your **Primary Care Physician**

Your Care Team will also help you find other providers of medical, behavioral health, or Long-term Services and Supports (LTSS) if you need a specialist or other health care provider. That way, you will get the right provider to help you with your concerns.

B2. Wait times for primary care and behavioral health

We must provide you with access to primary care and behavioral health services within the following timeframes:

- immediately for urgently needed services or an emergency;
- within 7 days for services that are not an emergency or urgently needed, but you require medical attention;

-
- within 30 days for routine or preventative care.

B3. How to choose a Primary Care Physician (PCP)

First, you will need to choose a Primary Care Physician (PCP). You may be able to have a specialist act as your PCP. You may choose a specialist as your PCP if the specialist agrees to provide all the services that PCPs traditionally provide. To request your specialist to be your PCP, contact Blue Shield TotalDual Plan Customer Care. You can choose any PCP in our network who is accepting new members.

Our plan's PCPs are affiliated with medical groups. When you choose your PCP, you are also choosing the affiliated medical group. This means that your PCP will be referring you to specialists and services that are also affiliated with their medical group.

- If there is a particular specialist or hospital that you want to use, it is important to find out if they are affiliated with your PCP's medical group. You can look in this Directory or ask Blue Shield TotalDual Plan Customer Care to check if the PCP you want makes referrals to that specialist or uses that hospital.
- If you don't stay within your PCP's medical group, Blue Shield TotalDual Plan may not cover the service.

To choose a PCP, refer to the list of physicians on page 13-2436 and choose a physician:

- that you use now, **or**
- who has been recommended by someone you trust, **or**
- whose offices are easy for you to get to.
- If you do not choose a PCP in our network, Blue Shield TotalDual Plan will choose one for you.
- If you want help in choosing a PCP, please call Customer Care at 1-800-452-4413 (TTY: 711), 8:00 a.m. to 8:00 p.m., seven days a week. The call is free. Or, visit www.blueshieldca.com/medicare
- If you have questions about whether any service or care that you want or need is covered, talk to your Care Team or call Customer Care at 1-800-452-4413 (TTY: 711) and ask **before** you get the service or care.

B4. Long-term Services and Supports (LTSS) providers

As a Blue Shield TotalDual Plan member, you will be able to get Long-term Services and Supports (LTSS) if you need them, such as Community-Based Adult Day Services (CBAS) which provide nursing services, physical, occupational and speech therapy, therapeutic activities, and meals at centers in the community. Additionally, In-Home Supportive Services (IHSS) are in-home care for people that cannot safely remain in their home without care-giving assistance. LTSS helps people who need assistance to do everyday tasks like taking a bath, getting dressed, making food, and taking medicine. Most of these services are provided at your home or in your community but could be provided in a nursing home or hospital.

[†]DSNP Provider that is also Medi-Cal enrolled



If you have questions, please call Blue Shield TotalDual Plan at 1-800-452-4413 (TTY: 711), 8:00 a.m. to 8:00 p.m., seven days a week. The call is free. **For more information**, visit www.blueshieldca.com/medicare

If you need LTSS, your Care Navigator or MSSP can help you and your Care Team determine what options are available to support you in the way you want.

B5. How to access Blue Shield TotalDual Plan's network providers

You must get all your covered services from providers within our network that are affiliated with your PCP's medical group. If you use providers who are not in Blue Shield TotalDual Plan's network and are not affiliated with your PCP's medical group **(without prior authorization), you will have to pay the bill.**

A **prior authorization** is an approval from Blue Shield TotalDual Plan to seek services outside of our network or to get services not routinely covered by our network **before** you get the services.

The only exceptions to this rule are when you need urgent or emergency care or dialysis and cannot get to a provider in the plan, such as when you are away from home. You can also go outside the plan or your PCP's medical group for other non-emergency services if Blue Shield TotalDual Plan gives you permission first.

- You may change providers within the network at any time during the year. If you have been using one network provider, you do not have to keep using that same provider. For some providers, you may need a referral from your PCP. A PCP change will be effective on the first day of the following month, as long as we receive your request by the 20th of the current month. To change your PCP, call Customer Care. When you call, be sure to tell Customer Care whether you are using a specialist or receiving other covered services that require PCP approval (such as home health services and durable medical equipment). Customer Care will help make sure that you can continue your specialty care and other services when you change your PCP. Customer Care will also check whether the PCP you want to switch to is accepting new patients. Customer Care will change your membership record to show the name of your new PCP and tell you when the change to your new PCP will take effect. Customer Care will also send you a new membership card that shows the name and phone number of your new PCP.
- Remember, our plan's PCPs are affiliated with medical groups. If you change your PCP, you may also be changing medical groups. When you ask for the change, be sure to tell Customer Care if you are using a specialist or getting other covered services that require PCP approval. Customer Care will help make sure that you can continue your specialty care and other services when you change your PCP.
- Blue Shield TotalDual Plan works with all the providers in our network to accommodate the needs of people with disabilities. As applicable, the list of network providers in this Directory includes information about the accommodations they provide.
- If you need a provider and are not sure if they offer the accommodations you need, Blue Shield

TotalDual Plan can help you. Talk to your Care Navigator for assistance.

C. Blue Shield TotalDual Plans' List of Network Providers

This part of the Directory includes a list of Blue Shield TotalDual Plan's network providers who participate in and accept Blue Shield TotalDual Plan. It contains:

- **Health care professionals** including primary care providers, specialists, behavioral health providers, dental service providers, and vision service providers;
- **Facilities** including hospitals, nursing facilities, and behavioral health facilities; and
- **Support providers** including Long-term Services and Supports (LTSS) (for example, adult day health) and community support services (for example, peer supports).

Medi-Cal Dental Managed Care providers are listed on the Dental Managed Care Plans' websites. Currently the Dental Managed Care plan names are: Liberty Dental Plan, Access Dental Plan, and Health Net of California. A search can be done based off of provider name, address, city, zip code, specialty, or languages spoken. For current plan information, you may also contact Health Care Options for help at 1-800-430-4263 (TTY users call 1-800-430-7077) Monday through Friday, 8:00 a.m. to 6:00 p.m.

Medi-Cal Dental Fee-for-Service providers are listed in the *Provider Directory* on the Smile, California website: www.dental.dhcs.ca.gov/find-a-dentist/home. A search can be done based off address, city, zip code, specialty, or languages spoken. In addition to the *Provider Directory* to search enrolled dental providers, there is a list of enrolled Registered Dental Hygienists listed by County on Smile, California.

Dental services in San Mateo are covered through the Health Plan of San Mateo (HPSM). The *Provider Directory* is listed on the Plan's website. A search can be done based off provider name or zip code.

Cultural competence training is additional instruction for our health care providers that helps them better understand your background, values, and

†DSNP Provider that is also Medi-Cal enrolled



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beliefs to adapt services to meet your social, cultural, and language needs.

Providers are listed in alphabetical order by last name. You can also find the provider's name and the page where the provider's additional contact information is in the Index at the end of the Directory. Providers are listed in alphabetical order by last name in the Index. In addition to contact information, provider listings also include specialties and skills, such as languages spoken or completion of cultural competence training.

Blue Shield TotalDual Plan total network consists of the following:

Total number of PCPs: 2613

Total number of specialists: 2959

Total number of hospitals: 19

Total number of Acupuncture & Chiropractors: providers: No Data

Total number of dental providers: No Data

Total number of home health services: 1

Total number of Mental health providers: 399

Total number of vision providers: 429

Total number of long-term services and supports providers: No Data

Total number of Mental health facilities: No Data

Total number of skilled nursing facilities: 81

Other Services Providers: 1

C1. List of Network Providers

Affiliated Hospitals

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

C1. List of Network Providers

Affiliated Hospitals

UCSD LA JOLLA JOHN SALLY THORNTON [Ⓢ]

Effective as of 01-OCT-14

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

UCSD MEDICAL CTR [Ⓢ]

Effective as of 01-OCT-14

 200 W ARBOR DR
SAN DIEGO, CA 92103




Birthing Friendly: Y

CI. List of Network Providers




Urgent Care Centers

This plan provides coverage for urgently need services both in-network and out-of-network. For an up-to-date list of Urgent Care Centers in the network, please contact your medical group.




ACCELERATED URGENT CARE

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




ACCELERATED URGENT CARE

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

ACCELERATED URGENT CARE

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

ACCELERATED URGENT CARE

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

ANAHEIM URGENT CARE INC




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

BAHIA FAMILY MEDICAL GROUP INC




 584 E ST
CHULA VISTA, CA 91910
 (619) 420-1378

 M-F 8:00AM-5:30PM




CONCENTRA URGENT CARE

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




CONCENTRA URGENT CARE

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




CONCENTRA URGENT CARE

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




CONCENTRA URGENT CARE

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

CONCENTRA URGENT CARE



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

CONCENTRA URGENT CARE




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

CONCENTRA URGENT CARE




 25115 MADISON AVE
MURRIETA, CA 92562

 (866) 944-6046
 M-F 8:00AM-7:00PM




CONCENTRA URGENT CARE

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

CONCENTRA URGENT CARE

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




CONCENTRA URGENT CARE

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




CONCENTRA URGENT CARE

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



CONCENTRA URGENT CARE

 10350 BARNES CANYON
RD STE 200
SAN DIEGO, CA 92121
 (858) 455-0044
 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




CONCENTRA URGENT CARE

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

CI. List of Network Providers

Urgent Care Centers




CONCENTRA URGENT CARE

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




CONCENTRA URGENT CARE

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




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




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


CI. List of Network Providers

Urgent Care Centers

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

CI. List of Network Providers


Primary Care Providers

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

C1. List of Network Providers

Primary Care Providers

 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: 100220769002

 678 3RD AVE
CHULA VISTA, CA 91910

 (619) 662-4100


 Spanish

Effective as of 01-NOV-14

ALANIZ, MATEO, MD^{M†}

Provider ID: 100220769006

 678 3RD AVE
CHULA VISTA, CA 91910

 (619) 662-4100


 Spanish

Effective as of 01-JAN-21

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

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

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

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: 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

C1. List of Network Providers




Primary Care Providers

 480 4TH AVE STE 202
CHULA VISTA, CA 91910
 (619) 427-3361
 Filipino, Spanish, Tagalog
Effective as of 01-JAN-14




ALVAREZ-ESTRADA, MIGUEL, MD^{M†}

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^{M†}


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^{F†}




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

GARCIA, KARLA, MD^{F††}



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

 Spanish
Teleservice
Effective as of 01-APR-23



HERNANDEZ, RALPH, MD^{M†}

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^{F††}

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




MATTHEWS, MERRITT, MD^{M†}

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^{M†}

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^{F†}

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

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

MONDRAGON, GUSTAVO, MD^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

CI. List of Network Providers

Primary Care Providers

- M†
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**
M†
Provider ID: 100177550027
📍 480 4TH AVE STE 500
CHULA VISTA, CA 91910
☎ (619) 656-5252
🗣 Spanish
Effective as of 01-FEB-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: 100413256011
📍 752 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
☎ (619) 656-0206
Effective as of 01-DEC-23
- PATEL, PAAVAN, DO**^M
Provider ID: 100413256007
📍 752 MEDICAL CENTER CT
CHULA VISTA, CA 91911
☎ (619) 527-7700
Effective as of 01-NOV-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: 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: 100147691019
📍 480 4TH AVE STE 202
CHULA VISTA, CA 91910
☎ (619) 427-3361
🗣 Polish, Portuguese, Spanish
Effective as of 01-APR-22

CI. List of Network Providers

Primary Care Providers

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

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

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

C1. List of Network Providers




Primary Care Providers

 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: 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

CI. List of Network Providers

Primary Care Providers

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

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: 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

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

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

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

UWEDJOJEVWE, LETICIA, MD

^{F†}
Provider ID: 100110303031
340 4TH AVE STE 10
CHULA VISTA, CA 91910
(619) 934-2215
Spanish

Effective as of 01-NOV-23

UWEDJOJEVWE, LETICIA, MD

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

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

CI. List of Network Providers

Primary Care Providers

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: 100039117021

📍 875 EL CAJON BLVD
EL CAJON, CA 92020
☎ (619) 662-4100
📠 Arabic, Spanish
Teleservice
Effective as of 01-JAN-21

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

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†}

C1. List of Network Providers

Primary Care Providers

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,

C1. List of Network Providers

Primary Care Providers

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

CI. List of Network Providers

Primary Care Providers

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

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†}

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

C1. List of Network Providers

Primary Care Providers

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

🗣 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: 100320650009

📍 460 N ELM ST
ESCONDIDO, CA 92025

☎ (760) 520-8100

🗣 Spanish

Effective as of 01-JAN-24


CI. List of Network Providers

Primary Care Providers

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

PATEL, JITENBHAI, MD^M

Provider ID: 100339325006

 460 N ELM ST
ESCONDIDO, CA 92025


 (760) 520-8100

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

RAO, USHA, MD^{F†}

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: 100331220007

 460 N ELM ST
ESCONDIDO, CA 92025

 (760) 520-8100


 French


Effective as of 01-JAN-24

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

SCHULTZ, JAMES, MD^{M†}

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^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^{M†}

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^{M†}

Provider ID: 100024789048

 704 E GRAND AVE
ESCONDIDO, CA 92025

 (619) 662-4100

 Spanish


Teleservice

Effective as of 01-FEB-22

VOURLITIS, MELISSA, DO^{F*}

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



CI. List of Network Providers

Primary Care Providers

 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

C1. List of Network Providers

Primary Care Providers

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^{M†}
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

CI. List of Network Providers

Primary Care Providers

Effective as of 01-SEP-23

VALADEZ, JESUS, MD^{Mt}

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^{Mt}

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^{Ft}

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^{Ft}

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^{Mt}

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^{Mt}

Provider ID: 100337168008

📍 3853 W STETSON AVE STE 200
HEMET, CA 92545

📞 (951) 225-6802

Effective as of 01-NOV-20

GANTA, SANYASI, MD^{Mt}

Provider ID: 100113069011

📍 225 LAURSEN ST
HEMET, CA 92543

📞 (951) 925-6657

📱 Hindi, Spanish, Telugu

Effective as of 01-APR-21

GANTA, SANYASI, MD^{Mt}

Provider ID: 100113069005

📍 225 LAURSEN ST
HEMET, CA 92543

📞 (951) 925-6657

📱 Hindi, Spanish, Telugu

Effective as of 01-JAN-17

GOHIL, RAJIT, MD^{Mt}

Provider ID: 100391418004

📍 2390 E FLORIDA AVE STE 104
HEMET, CA 92544

📞 (951) 414-4011

Effective as of 01-OCT-22

GOHIL, RAJIT, MD^{Mt}

Provider ID: 100391418005

📍 2390 E FLORIDA AVE STE 104
HEMET, CA 92544

📞 (951) 414-4011

Effective as of 01-OCT-22

HARRISON, AMY, MD^{Ft}

Provider ID: 100047360074

📍 2390 E FLORIDA AVE STE 104
HEMET, CA 92544

📞 (951) 414-4011

Effective as of 01-OCT-22


HARRISON, AMY, MD^{Ft}

Provider ID: 100047360075

📍 2390 E FLORIDA AVE STE 104
HEMET, CA 92544

CI. List of Network Providers

Primary Care Providers

 (951) 414-4011


Effective as of 01-OCT-22

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

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

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

C1. List of Network Providers

Primary Care Providers

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

CHODAY, PRITHI, MD^F

Provider ID: 100419896004
📄 1030 E FLORIDA AVE
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

C1. List of Network Providers

Primary Care Providers

**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

**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: 100226243018

1525 W FLORIDA AVE
HEMET, CA 92543

(951) 929-6777

Thai

Effective as of 01-OCT-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

C1. List of Network Providers

Primary Care Providers

 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: 100090804015

 18 ENDEAVOR STE 201
IRVINE, CA 92618

 (949) 650-5771


 Farsi, Persian, Spanish

Effective as of 01-JUL-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

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

C1. List of Network Providers

Primary Care Providers

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


CI. List of Network Providers

Primary Care Providers

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: 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


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

**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

CI. List of Network Providers

Primary Care Providers

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

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

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

CI. List of Network Providers

Primary Care Providers

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

CI. List of Network Providers

Primary Care Providers

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

CI. List of Network Providers

Primary Care Providers

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: 100036312009

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

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

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: 100017878016

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

Spanish
Effective as of 01-JAN-18

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

CI. List of Network Providers

Primary Care Providers

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: 100113316013
📍 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: 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

CI. List of Network Providers

Primary Care Providers

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††}

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†}

C1. List of Network Providers

Primary Care Providers

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

CI. List of Network Providers

Primary Care Providers

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: 100113408009

📍 24268 EL TORO RD
LAGUNA WOODS, CA
92637

☎ (657) 241-8455

🗣 Farsi

Effective as of 01-JAN-21

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

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

C1. List of Network Providers




Primary Care Providers

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

MCFARLAND, NATHAN, MD^M

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

FQHC

CI. List of Network Providers

Primary Care Providers

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

C1. List of Network Providers



Primary Care Providers

 (951) 414-4020
 Hindi, Marathi
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




BASAK, RYAN, MD^M

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



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

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

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

C1. List of Network Providers


Primary Care Providers


 (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: 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

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

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: 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: 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

CI. List of Network Providers

Primary Care Providers

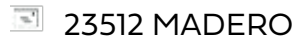


Farsi

Effective as of 01-MAY-12

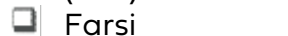
PEDARSANI, MARJAN, DO^{F†}

Provider ID: 100113548012



23512 MADERO

MISSION VIEJO, CA 92691



(949) 583-1600



Farsi

Effective as of 01-SEP-21

RUTTEN, SONIA, MD^F

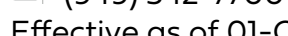
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30492 GATEWAY PL

STE 110

MISSION VIEJO, CA 92694



(949) 542-7700

Effective as of 01-OCT-23

SAMOORI, RAMA, DO^{F†}

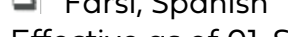
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26732 CROWN VALLEY

PKWY STE 170

MISSION VIEJO, CA 92691



(949) 364-7246



Farsi, Spanish

Effective as of 01-SEP-15

SHOAPOUR, CAMELLIA, MD^F

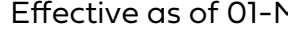
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26991 CROWN VALLEY

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

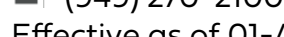
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27725 SANTA MARGARITA

PKWY STE 101

MISSION VIEJO, CA 92691

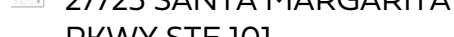


(949) 270-2100

Effective as of 01-AUG-21

THOMAS, CHERYL, MD^F

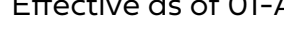
Provider ID: 100043536022



27725 SANTA MARGARITA

PKWY STE 101

MISSION VIEJO, CA 92691

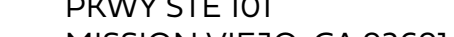


(949) 270-2100

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

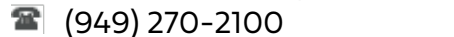


(949) 270-2100

Effective as of 01-JUL-21

THOMAS, CHERYL, MD^F

Provider ID: 100043536012



27725 SANTA MARGARITA

PKWY STE 101

MISSION VIEJO, CA 92691

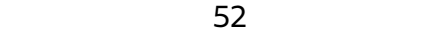


(949) 270-2100

Effective as of 01-JUL-21

YAZDANSHENAS, MARYAM, MD^{F†}

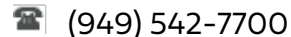
Provider ID: 100224906005



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

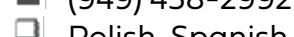
Provider ID: 100079209004



24896 CHRISANTA DR STE

130

MISSION VIEJO, CA 92691



(949) 458-2992



Polish, Spanish

Effective as of 01-JAN-18

INTERNAL MEDICINE

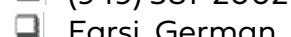
ALLAMEHZADEH, REZA, MD^{M††}

Provider ID: 100114378012



25982 PALA STE 170

MISSION VIEJO, CA 92691



(949) 581-2002

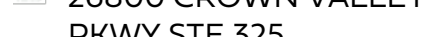


Farsi, German, Persian

Effective as of 01-JAN-18

BADIE, MEHRNAZ, MD^{F††}

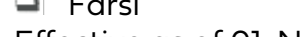
Provider ID: 100113854005



26800 CROWN VALLEY

PKWY STE 325

MISSION VIEJO, CA 92691



(949) 364-6000

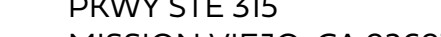


Farsi

Effective as of 01-NOV-12

BENNER, ERIC, MD^{M†}

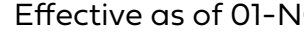
Provider ID: 100074899004



26800 CROWN VALLEY

PKWY STE 315

MISSION VIEJO, CA 92691



(949) 364-6000



Spanish

Effective as of 01-NOV-12

CHANG, HELEN, MD^{F††}

CI. List of Network Providers

Primary Care Providers

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

COVARRUBIAS, GRACIA, MD^{F††}

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

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

ROKSHADFAR, SAGHI, MD^{F†}

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

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: 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: 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

CI. List of Network Providers

Primary Care Providers

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

C1. List of Network Providers




Primary Care Providers

 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

CI. List of Network Providers

Primary Care Providers

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: 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

CI. List of Network Providers

Primary Care Providers

 (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

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

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: 100413256010

 610 EUCLID AVE STE 302

NATIONAL CITY, CA 91950

 (619) 527-7700


Effective as of 01-DEC-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

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: 100211994006

 2400 E 8TH ST

NATIONAL CITY, CA 91950

 (619) 662-4100

 Spanish

Effective as of 01-JAN-21

SNOOK, BRIAN, DO^{M††}



Provider ID: 100211994002



 2400 E 8TH ST




NATIONAL CITY, CA 91950




CI. List of Network Providers

Primary Care Providers



 (619) 662-4100
 Spanish
Effective as of 01-JUN-14



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




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†}

C1. List of Network Providers



Primary Care Providers

Provider ID: 100012010021

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




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: 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: 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: 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: 100107246019

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

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

CI. List of Network Providers

Primary Care Providers

FAMILY PRACTICE

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

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: 100072487003

📍 1441 AVOCADO AVE STE
503
NEWPORT BEACH, CA
92660

☎️ (949) 718-9020

Effective as of 01-JUL-12

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: 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: 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: 100049875026

📍 4700 N RIVER RD
OCEANSIDE, CA 92057

☎️ (844) 308-5003

📄 Spanish

Effective as of 01-JAN-24

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: 100049875025

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054

☎️ (844) 308-5003

📄 Spanish

Effective as of 01-JAN-24


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

C1. List of Network Providers

Primary Care Providers

Provider ID: 100358800018

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 (760) 631-5000


 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

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: 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

MARTINEZ, LESLY, MD^{F*}

Provider ID: 100397984038

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 (760) 631-5000


 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: 100327876042

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 (844) 308-5003


 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

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

ZAMPELLO, LISA, MD^F

Provider ID: 100340931015

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 (760) 631-5000

Effective as of 01-JAN-24

FQHC

CI. List of Network Providers

Primary Care Providers

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: 100352649064

CI. List of Network Providers

Primary Care Providers




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

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

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†}
Provider ID: 100202026020

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




RIVERA, MARCELO, MD^{M†}
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†}
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†}
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†}
Provider ID: 100057057005

 29472 AVENIDA DE LAS
BANDERA

C1. List of Network Providers

Primary Care Providers

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

CI. List of Network Providers

Primary Care Providers

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

ROBERSON, ANDREA, DO^{F†}

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^{F†}

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^{F†}

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^{F†}

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

MITREVSKI, PREDRAG, MD^{M†}

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^{M†}

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^{F†}

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

WOOD, YELENA, MD^{F†}

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^{M†}

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^{M†}

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

CI. List of Network Providers

Primary Care Providers

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: 100075261003

📍 1919 GRAND AVE STE 1E
SAN DIEGO, CA 92109

☎ (858) 270-5454

🗳 Chinese, French, Mandarin

Effective as of 01-MAR-11

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

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

C1. List of Network Providers

Primary Care Providers

 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

CI. List of Network Providers

Primary Care Providers

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: 100073181014




CI. List of Network Providers

Primary Care Providers

 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



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

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*}

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

CI. List of Network Providers

Primary Care Providers

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^{F†}

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^{F†}

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^{F†}

Provider ID: 100324255002

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

CI. List of Network Providers

Primary Care Providers

 (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

CI. List of Network Providers

Primary Care Providers

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: PG0083606005

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126

(844) 200-2426

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 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

C1. List of Network Providers

Primary Care Providers

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

GENERAL PRACTICE

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

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: 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: 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

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: 100104992014

 4444 EL CAJON BLVD STE
6

SAN DIEGO, CA 92115

 (619) 285-1522

 Cantonese, Cambodian,
Mandarin

Effective as of 01-AUG-20

CI. List of Network Providers

Primary Care Providers

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

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: 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: 100379921006

3490 PALM AVE
SAN DIEGO, CA 92154

(619) 423-5616

Effective as of 01-APR-22

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

C1. List of Network Providers

Primary Care Providers

 (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: 100023101005

 1101 FELSPAR ST
SAN DIEGO, CA 92109

 (858) 483-1720


 French


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

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: 100390568003




CI. List of Network Providers

Primary Care Providers

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




NAJAR, FAUZI, MD^M

Provider ID: 100390568002

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




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: 100390568007

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


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^{F†}




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^{M†}

Provider ID: 100051318005

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




RAMINENI, NEELAKANTAN, MD^{M†}

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^{F†}

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^{M†}

Provider ID: 100384223003

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

WILLGING, STEFAN, MD^{M†}

Provider ID: 100106507003

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


CI. List of Network Providers

Primary Care Providers

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

CI. List of Network Providers

Primary Care Providers

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†}

C1. List of Network Providers

Primary Care Providers

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



CI. List of Network Providers

Primary Care Providers



 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: 100018082011
 380 STEVENS AVE STE 310
SOLANA BEACH, CA 92075
 (858) 554-1212
Effective as of 01-AUG-23

WISNIEWSKI, MORRIS, MD^M

Provider ID: 100018082007

CI. List of Network Providers



Primary Care Providers

 380 STEVENS AVE STE 310
SOLANA BEACH, CA 92075
 (858) 554-1212
Effective as of 01-MAR-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: 100343610010

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




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


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




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

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

C1. List of Network Providers


Primary Care Providers

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

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

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, 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: 100085605005

 28780 SINGLE OAK DR STE
160

TEMECULA, CA 92590

 (951) 252-8650 Spanish

Effective as of 01-JUN-04


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

CI. List of Network Providers

Primary Care Providers

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: 100148562007

28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590

(951) 676-4193

Effective as of 01-OCT-11

MILLER, BRANDON, DO^{M†}

Provider ID: 100148562008

31720 TEMECULA PKWY
TEMECULA, CA 92592

(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: 100083398023

31720 TEMECULA PKWY
TEMECULA, CA 92592

(951) 676-4193

Arabic

Effective as of 01-NOV-20

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

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

CI. List of Network Providers

Primary Care Providers

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

C1. List of Network Providers

Primary Care Providers

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: 100358800015



 134 GRAPEVINE RD
VISTA, CA 92083
 (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

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: 100391207004

 1000 VALE TERRACE DR
VISTA, CA 92084
 (760) 631-5000

Effective as of 01-NOV-22

HIKES, RYAN, MD^M



Provider ID: 100391207008

 1000 VALE TERRACE DR
VISTA, CA 92084
 (760) 631-5000

Effective as of 01-JAN-24

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: 100397984035



 134 GRAPEVINE RD
VISTA, CA 92083
 (760) 631-5000

 Spanish

Effective as of 01-JAN-24

MARTINEZ, LESLY, MD^{F*}

Provider ID: 100397984039

 1000 VALE TERRACE DR
VISTA, CA 92084
 (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


CI. List of Network Providers

Primary Care Providers

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: 100327876041

 134 GRAPEVINE RD
VISTA, CA 92083

 (844) 308-5003


 Spanish

Effective as of 01-JAN-24

VIDAL, MONICA, DO^{F†}

Provider ID: 100327876045

 1000 VALE TERRACE DR
VISTA, CA 92084

 (760) 631-5000


 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

C1. List of Network Providers

Primary Care Providers

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^{M†}
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^{F†}
Provider ID: 100265397003
📍 2375 S MELROSE DR
VISTA, CA 92081
☎ (760) 305-1900
Effective as of 01-JUL-16

CLANCY, JOHN, DO^{M†}
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^{M†}
Provider ID: 100090343008
📍 145 THUNDER DR STE 1
VISTA, CA 92083
☎ (760) 941-9002
Effective as of 01-SEP-21

LI, XIANGLI, MD^{F†}
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: 100382647006
📍 1000 VALE TERRACE DR
VISTA, CA 92084
☎ (760) 631-5000
Effective as of 01-SEP-22


C1. List of Network Providers

Primary Care Providers

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: 100382647009

 1000 VALE TERRACE DR
VISTA, CA 92084


 (760) 631-5000

Effective as of 01-JAN-24

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: 100382647010


 105 DURIAN ST STE B
VISTA, CA 92083


 (760) 631-5000

Effective as of 01-JAN-24

RHIANNON, JULIA, MD^F

Provider ID: 100382647007

 105 DURIAN ST STE A
VISTA, CA 92083


 (760) 631-5000

Effective as of 01-SEP-22

RUTMAN, MICHAEL, DO^{M†}

Provider ID: 100024612023

 2355 S MELROSE DR
VISTA, CA 92081

 (760) 598-0088


Effective as of 01-JAN-21

RUTMAN, MICHAEL, DO^{M†}

Provider ID: 100024612005

 2355 S MELROSE DR

VISTA, CA 92081


 (760) 598-0088


Effective as of 01-OCT-00

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

CI. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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-NOV-23

SHAHINIAN, GEORGE, MD

Provider ID: N/A

11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-JUL-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-JUL-22

KELCHNER, MATTHEW, DC[†]

Provider ID: N/A

1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Effective as of 01-JAN-21

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-SEP-22

BINDER, NICHOLAS, MD[†]

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-JAN-21

CHANG, TOM, MD[†]

Provider ID: N/A

C1. List of Network Providers
Specialty Care Physician

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-MAR-18

PATEL, GITANE, MD†

Provider ID: N/A

1620 ALPINE BLVD STE 117
 ALPINE, CA 91901
 Effective as of 01-AUG-20

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

C1. List of Network Providers

Specialty Care Physician

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-JAN-22

POLIZZI, BRITTANY, NP†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011

Effective as of 01-SEP-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


C1. List of Network Providers

Specialty Care Physician

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-JAN-24


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


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-24


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-JAN-24

ZUBAIR, RAHEEL, MD


Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011*
Effective as of 01-NOV-23

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

C1. List of Network Providers
Specialty Care Physician

**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-FEB-16

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-JAN-21

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-JAN-21

DELANEY, MICHAEL, MD[†]

Provider ID: N/A
 ☐ 6010 HIDDEN VALLEY RD
 STE 200
 CARLSBAD, CA 92011
 Teleservice

Effective as of 01-SEP-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-FEB-16

FRISHBERG, BENJAMIN, MD[†]

C1. List of Network Providers
Specialty Care Physician

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

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

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-FEB-21

HALL, JACOB, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
 STE 200

CARLSBAD, CA 92011

Effective as of 01-JAN-24

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-DEC-23

LANE, RICHARD, 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-JAN-21

LOBATZ, MICHAEL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
 STE 200
 CARLSBAD, CA 92011
 Effective as of 01-FEB-16

LOBATZ, MICHAEL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
 STE 200
 CARLSBAD, CA 92011
 Effective as of 01-SEP-22

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-21

NIELSEN, AMY, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
 STE 200
 CARLSBAD, CA 92011
 Effective as of 01-JAN-16

C1. List of Network Providers
Specialty Care Physician

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-NOV-23

OMURO, ARTHUR, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
 STE 200
 CARLSBAD, CA 92011
 Effective as of 01-SEP-22

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-JAN-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-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

C1. List of Network Providers

Specialty Care Physician

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, 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-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, 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, 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-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-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,

CI. List of Network Providers

Specialty Care Physician

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-SEP-22

HERMANSON, KATHLEEN, PA†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

HUANG, STEPHANIE, PA†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

HUANG, STEPHANIE, PA†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-OCT-22

C1. List of Network Providers

Specialty Care Physician

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-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-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

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

C1. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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 C203
CHULA VISTA, CA 91914

Effective as of 01-SEP-22

MACCHIO, GREGORY, MD†

Provider ID: N/A

📍 2452 FENTON ST STE C101
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


C1. List of Network Providers
Specialty Care Physician

 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

 865 3RD AVE STE 133
 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-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-MAR-16

BERMAN, BRETT, MD†
 Provider ID: N/A

 321 E ST STE A
 CHULA VISTA, CA 91910
 Effective as of 01-SEP-22

BERMAN, BRETT, MD†
 Provider ID: N/A


 321 E ST STE A
 CHULA VISTA, CA 91910
 Effective as of 01-JAN-21

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

CI. List of Network Providers

Specialty Care Physician

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

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

750 MEDICAL CENTER CT
STE 3
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

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

CI. List of Network Providers

Specialty Care Physician

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

CARLSON, STEVEN, MD†

Provider ID: N/A

751 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-JAN-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-AUG-21

DAWOOD, FARAH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

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-21

KIM, JAMES, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Teleservice

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-JUN-21

LY, NANCY, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101

CI. List of Network Providers

Specialty Care Physician

CHULA VISTA, CA 91911
Effective as of 01-NOV-23

LY, NANCY, MD†

Provider ID: N/A

 754 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911
Effective as of 01-JUN-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-APR-21

PONCE, SONIA, MD†

Provider ID: N/A

 340 4TH AVE STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-21

C1. List of Network Providers

Specialty Care Physician

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

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

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

SHAH, KULIN, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911

Effective as of 01-JAN-23

SHAH, KULIN, MD†

Provider ID: N/A

865 3RD AVE STE 133

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

865 3RD AVE STE 133
CHULA VISTA, CA 91911

Effective as of 01-JAN-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211

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-JAN-23

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911

Effective as of 01-JUN-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

C1. List of Network Providers

Specialty Care Physician

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-SEP-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

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

C1. List of Network Providers

Specialty Care Physician

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-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

TOMPKINS, STACY, MD[†]

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-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

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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-JUL-22

SBIROLO, EMILY, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-AUG-21

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-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


CI. List of Network Providers

Specialty Care Physician

 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-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

C1. List of Network Providers

Specialty Care Physician

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-SEP-15

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-JUL-22

DUQUE, JOHN, MD†

Provider ID: N/A

📍 480 4TH AVE STE 316
CHULA VISTA, CA 91910

Effective as of 01-JAN-14

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 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

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

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

C1. List of Network Providers

Specialty Care Physician

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-SEP-15

WIENER, GREGORY, MD†

Provider ID: N/A

📍 353 CHURCH AVE STE A
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE, MA†

Provider ID: N/A

📍 310 3RD AVE STE C11
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

ANDERSON, ELAINE, MA†

Provider ID: N/A

📍 310 3RD AVE STE B21/C11
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

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

CI. List of Network Providers

Specialty Care Physician

CHULA VISTA, CA 91911
Effective as of 01-MAY-15

QUIROZ, ELISA, MD†

Provider ID: N/A

📍 678 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-MAY-22

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

📍 450 4TH AVE STE 311
CHULA VISTA, CA 91910

Effective as of 01-SEP-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

📍 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

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

C1. List of Network Providers

Specialty Care Physician

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

📍 865 3RD AVE STE 133

CHULA VISTA, CA 91911
Effective as of 01-MAY-23

JOHN, ALAN, MD

Provider ID: N/A

📍 765 MEDICAL CENTER CT
STE 211
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-OCT-23

ROUGH, STEVEN, MD

Provider ID: N/A

📍 754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-NOV-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†**

CI. List of Network Providers Specialty Care Physician

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-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

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

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-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-AUG-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-JAN-21

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

CI. List of Network Providers Specialty Care Physician

Effective as of 01-APR-19

**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 4
CHULA VISTA, CA 91910

Effective as of 01-JUL-15

**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-SEP-22

**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

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

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

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

752 MEDICAL CENTER CT
STE 302

CHULA VISTA, CA 91911

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-AUG-14

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

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

MOOLANI, UJJALA, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302

CHULA VISTA, CA 91911

Effective as of 01-NOV-22

C1. List of Network Providers

Specialty Care Physician

MOOLANI, UJJALA, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
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-JAN-21

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-24

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 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

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-JUL-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

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

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

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

VIDEEN, JOHN, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

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

C1. List of Network Providers

Specialty Care Physician

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-MAY-22

GRATIANNE, ROBERTO, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-JAN-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-OCT-23

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-FEB-24

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

CI. List of Network Providers

Specialty Care Physician

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-SEP-21

SORIA LOPEZ, JOSE, MD†

Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-MAR-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

C1. List of Network Providers

Specialty Care Physician

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-JUN-19

BRYANT, DUANE, MD[†]

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-OCT-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-JAN-21

CARRABY, ARNETT, MD[†]

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-AUG-20

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-JUL-22

DELENGOCKY, TAYSON, DO[†]

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

JARDON, JAVIER, MD[†]

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

MANI, NASRIN, MD[†]

CI. List of Network Providers

Specialty Care Physician

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
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-JUL-22

MANI, MAJID, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

MANI, NASRIN, 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

480 FOURTH AVE
STE 201
CHULA VISTA, CA 91910
Effective as of 01-JUL-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

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

MCDONNELL, EMMA, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-APR-23

MCDONNELL, EMMA, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

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-JAN-21

PAPASTERGIOU, GEORGIOS, 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-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

C1. List of Network Providers

Specialty Care Physician

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-SEP-22

RAJSBAUM, MARTIN, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911

Effective as of 01-JUL-22

SASSANI, PATRICK, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911

Effective as of 01-MAR-23

SASSANI, PATRICK, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

SCHER, BARRY, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

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

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

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-JAN-21

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-JUL-20

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-NOV-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-23

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

C1. List of Network Providers Specialty Care Physician

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

📍 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

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

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-JAN-22

BANTHIA, VISHAL, MD†

Provider ID: N/A

📍 577 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-21

BANTHIA, VISHAL, MD†

Provider ID: N/A

📍 577 3RD AVE

CHULA VISTA, CA 91910
Teleservice

Effective as of 01-AUG-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

CI. List of Network Providers

Specialty Care Physician

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
435 H ST
CHULA VISTA, CA 91910
Effective as of 01-AUG-21

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

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

CI. List of Network Providers

Specialty Care Physician

PHYS MED/ REHAB PAIN MEDICINE

KATZEN, SETH, DO

Provider ID: N/A

📍 480 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-SEP-22

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-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-JAN-24

GUTH, CARA, PA†

Provider ID: N/A

📍 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-21

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

CI. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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-AUG-23

WRIGHT, DEREK, PA

Provider ID: N/A

340 FOURTH AVE
STE 19

CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUL-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-SEP-22

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-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

DAVIDSON, JOHN, DPM†

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-21

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

C1. List of Network Providers

Specialty Care Physician

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-SEP-15

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-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

336 OXFORD ST STE 104
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24

SOUVOROVA, JULIA, DPM†

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

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-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

TSAI, GRACE, DPM

Provider ID: N/A

345 F ST STE 100

CI. List of Network Providers

Specialty Care Physician

CHULA VISTA, CA 91910
Effective as of 01-FEB-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-DEC-23

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

XU, DIXON, DPM†

Provider ID: N/A

📍 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-SEP-22

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-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

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


CI. List of Network Providers

Specialty Care Physician

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-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

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

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

C1. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

**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-SEP-22

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

LOZANO, MARTHA, MD†

Provider ID: N/A

📍 841 KUHN DR STE 200
CHULA VISTA, CA 91914

Effective as of 01-JAN-14

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-SEP-22

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

CI. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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†

C1. List of Network Providers

Specialty Care Physician

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, SMITHA, MD†

Provider ID: N/A

272 CHURCH AVE STE 1
CHULA VISTA, CA 91910

Effective as of 01-FEB-19

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

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-AUG-23

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-JAN-21

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-JAN-19

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-21

BARRERA, HUGO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-SEP-14

CASILLAS BERUMEN, SERGIO, MD

Provider ID: N/A

1111 BROADWAY STE 305


CI. List of Network Providers

Specialty Care Physician

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-OCT-22


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-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-JUN-23


MORAL, JOHN, MD

Provider ID: N/A

 480 4TH AVE STE 404
CHULA VISTA, CA 91910
Effective as of 01-SEP-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

C1. List of Network Providers

Specialty Care Physician

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

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-JAN-21

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-JAN-19

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 STE B
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-JUN-23

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-SEP-15

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

CI. List of Network Providers

Specialty Care Physician

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
296 H ST STE 203
CHULA VISTA, CA 91910
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

EVES, WILLIAM, MD†
Provider ID: N/A
480 4TH AVE STE 307
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

EVES, WILLIAM, MD†
Provider ID: N/A
480 4TH AVE STE 307
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

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-AUG-23

HOFMEISTER, ERIC, MD†
Provider ID: N/A
955 LANE AVE STE 200

CHULA VISTA, CA 91914
Effective as of 01-FEB-18

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-NOV-21

KLATMAN, SAMUEL, MD†
Provider ID: N/A
955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-AUG-23

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-JAN-21

C1. List of Network Providers

Specialty Care Physician

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

ROSENFELD, ALAN, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-APR-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

C1. List of Network Providers
Specialty Care Physician

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

752 MEDICAL CENTER CT
 STE 101

CHULA VISTA, CA 91911
 Effective as of 01-NOV-22

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

750 MEDICAL CENTER CT
 STE 14

CHULA VISTA, CA 91911
 Effective as of 01-SEP-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

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

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

CI. List of Network Providers

Specialty Care Physician

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-FEB-23

SHAFT, ALEXANDER, MD†

Provider ID: N/A

131 ORANGE AVE STE 101
CORONADO, CA 92118

Teleservice

Effective as of 01-MAR-22

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

CI. List of Network Providers

Specialty Care Physician

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-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

SALEM, CAROL, MD

CI. List of Network Providers

Specialty Care Physician

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


C1. List of Network Providers

Specialty Care Physician

 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

 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-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

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,

CI. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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†

CI. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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

165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-OCT-23

HALEY, STEVEN, DC

Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021
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-SEP-22

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

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

CI. List of Network Providers

Specialty Care Physician

EL CAJON, CA 92020
Effective as of 01-JUL-22

CHIANG, JENNIFER, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-SEP-22

GONZALEZ, JOSE, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020
Teleservice
Effective as of 01-AUG-22

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-JAN-24

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

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

KASSAB, GHADA, MD

Provider ID: N/A

330 S MAGNOLIA AVE
EL CAJON, CA 92020
Effective as of 01-JAN-21

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-JAN-21

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-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-APR-22

TYAGI, ABHILASHA, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-AUG-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-FEB-22

UEBELHOER, NATHAN, DO†

CI. List of Network Providers

Specialty Care Physician

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-OCT-21

SHAFT, ALEXANDER, MD†

Provider ID: N/A
463 N MAGNOLIA AVE
EL CAJON, CA 92020
Teleservice
Effective as of 01-FEB-23

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-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

HASSANEIN, TAREK, MD†

Provider ID: N/A
463 N MAGNOLIA AVE
EL CAJON, CA 92020
Teleservice
Effective as of 01-MAR-18

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

C1. List of Network Providers

Specialty Care Physician

DAVIS, KELLE, MA[†]

Provider ID: N/A

📍 1767 E MAIN ST
EL CAJON, CA 92021
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

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-OCT-22

OLIVER, DEANNA, MD[†]

Provider ID: N/A

📍 463 N MAGNOLIA AVE
EL CAJON, CA 92020
Effective as of 01-MAR-21

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

📍 436 S MAGNOLIA AVE STE
101
EL CAJON, CA 92020
Effective as of 01-JUL-22

KAFRI, HASSAN, MD[†]

Provider ID: N/A

📍 875 EL CAJON BLVD
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

CI. List of Network Providers

Specialty Care Physician

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

165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-OCT-23

AL-MSHHDANI, AYSER, MD

Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021
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

1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-AUG-22

FOLCH TORRES-AGUIAR, BEATRIZ, MD†

Provider ID: N/A

165 S 1ST ST
EL CAJON, CA 92019
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

1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-NOV-21

GELLENS, ANDREW, MD†

Provider ID: N/A

165 S 1ST ST
EL CAJON, CA 92019
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

C1. List of Network Providers

Specialty Care Physician

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-NOV-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-DEC-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

450 FLETCHER PKWY STE
112
EL CAJON, CA 92020

Effective as of 01-NOV-23

HSU, CHRISTOPHER, MD†

Provider ID: N/A

225 W MADISON AVE STE 1
EL CAJON, CA 92020

Effective as of 01-SEP-22

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

450 FLETCHER PKWY STE
112
EL CAJON, CA 92020

Effective as of 01-NOV-23

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

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

C1. List of Network Providers

Specialty Care Physician

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

450 FLETCHER PKWY STE 112
EL CAJON, CA 92020
Effective as of 01-NOV-23

PRABHU, SUJATA, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-DEC-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

450 FLETCHER PKWY STE 112
EL CAJON, CA 92020
Effective as of 01-NOV-23

ZHAO, TAILUN, MD

Provider ID: N/A

300 S PIERCE ST STE 200
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

1032 BROADWAY
EL CAJON, CA 92021
Teleservice

Effective as of 01-JUN-21

ALYAS, ALISIA, PA

Provider ID: N/A

165 S 1ST ST
EL CAJON, CA 92019

CI. List of Network Providers

Specialty Care Physician

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

📍 165 S 1ST ST
EL CAJON, CA 92019

Teleservice

Effective as of 01-APR-21

MERCER, KELLY, PA†

Provider ID: N/A

📍 1032 BROADWAY
EL CAJON, CA 92021

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-JUL-22

MATIALEU, LEOPOLDINE, MD

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-DEC-22

CI. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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

📍 477 N EL CAMINO REAL
STE D200
ENCINITAS, CA 92024
Effective as of 01-JAN-21

FAIQ, JAMILA, NP†

Provider ID: N/A

📍 326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice

Effective as of 01-NOV-22

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

C1. List of Network Providers

Specialty Care Physician

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-JUN-21

MWAURA, WAIRIMU, NP†

Provider ID: N/A
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

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
781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-JUL-23

ESTABROOK, LARA, CRNA


Provider ID: N/A

CI. List of Network Providers


Specialty Care Physician

 320 SANTA FE DR STE 108
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

CI. List of Network Providers Specialty Care Physician

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-AUG-23

ALHANKAWI, DHUHA, MD

Provider ID: N/A
477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024
Effective as of 01-APR-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

C1. List of Network Providers
Specialty Care Physician

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-JUN-23

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-JAN-24

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
 100
 ENCINITAS, CA 92024

Effective as of 01-JAN-24

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
 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

GOLDKLANG, ROBERT, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
 102
 ENCINITAS, CA 92024

Effective as of 01-APR-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

781 GARDEN VIEW CT STE
 100
 ENCINITAS, CA 92024

Effective as of 01-MAR-23

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-JAN-24

LAJOIE, ADRIANNE, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
 102
 ENCINITAS, CA 92024

Effective as of 01-JAN-21

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

CI. List of Network Providers

Specialty Care Physician

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
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

700 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAR-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-APR-21

BESSUDO, ALBERTO, MD†

Provider ID: N/A

326 SANTA FE DR STE 105

ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-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


320 SANTA FE DR STE
107-C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

BAUTISTA, JENNIFER, MD†

Provider ID: N/A


C1. List of Network Providers

Specialty Care Physician

 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-DEC-20

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

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

 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-APR-23

HILL, KAITLYN, MD†

Provider ID: N/A

 477 N EL CAMINO REAL
STE C208
ENCINITAS, CA 92024
Teleservice
Effective as of 01-SEP-21


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

 326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Effective as of 01-FEB-21

MCCLAY, EDWARD, MD†


Provider ID: N/A

 477 N EL CAMINO REAL
STE D200
ENCINITAS, CA 92024
Effective as of 01-JAN-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†

CI. List of Network Providers

Specialty Care Physician

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-JAN-24

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-NOV-23

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

CI. List of Network Providers


Specialty Care Physician

 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

 1011 DEVONSHIRE DR STE F
ENCINITAS, CA 92024

Effective as of 01-AUG-15


LIEBERMAN, RONALD, DPM

Provider ID: N/A

 501 N EL CAMINO REAL
STE 201
ENCINITAS, CA 92024
Effective as of 01-DEC-23

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†

CI. List of Network Providers

Specialty Care Physician

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-SEP-23

ZHANG, MICHELLE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-APR-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


C1. List of Network Providers

Specialty Care Physician

 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

C1. List of Network Providers

Specialty Care Physician

SURGERY COLON

SURGERY

PARRY, LISA, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
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-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

GROTTING, 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

CI. List of Network Providers

Specialty Care Physician

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, ABHAY, MD

Provider ID: N/A

351 SANTA FE DR STE 250
ENCINITAS, CA 92024

Effective as of 01-MAY-23

GUPTA, ANSHU, MD

Provider ID: N/A

700 GARDEN VIEW CT STE
208

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


C1. List of Network Providers

Specialty Care Physician

 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-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


NGUYEN, HUNG, MD†

Provider ID: N/A

 320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-21


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†

CI. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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


C1. List of Network Providers

Specialty Care Physician

 728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-AUG-22


LAI, AMARA, MD

Provider ID: N/A

 488 E VALLEY PKWY STE
411
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

C1. List of Network Providers

Specialty Care Physician

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

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

ZECHA, RONALD, DC

Provider ID: N/A

488 E VALLEY PKWY STE
411

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

CI. List of Network Providers

Specialty Care Physician

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-MAR-22

SHAFT, ALEXANDER, MD†
Provider ID: N/A

488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-FEB-23

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

CI. List of Network Providers

Specialty Care Physician

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


C1. List of Network Providers

Specialty Care Physician

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-JAN-21

GREENSTEIN, JOSHUA, 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-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-JAN-21

KHAWAR, OSMAN, MD†

Provider ID: N/A

 631 E GRAND AVE
ESCONDIDO, CA 92025
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

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

C1. List of Network Providers

Specialty Care Physician

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-NOV-21

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102

ESCONDIDO, CA 92029
Effective as of 01-FEB-22

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, ANCHI, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102

ESCONDIDO, CA 92029
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

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

C1. List of Network Providers

Specialty Care Physician

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, ABIADE, 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-APR-23

AVALLONE, THOMAS, MD†

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-MAY-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
Effective as of 01-NOV-23

ESCONDIDO, CA 92026
Effective as of 01-NOV-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

700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-23

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

830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

CHOPLIN, NEIL, MD†

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-SEP-15

CHOPLIN, NEIL, MD†

C1. List of Network Providers

Specialty Care Physician

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-JUL-21

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-NOV-21

MORTON, ASA, MD†

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-AUG-23

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-21

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-23

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

CI. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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-JAN-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

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

C1. List of Network Providers

Specialty Care Physician

ESCONDIDO, CA 92025
Teleservice
Effective as of 01-APR-23

TOUMA, ELIE, DPM†

Provider ID: N/A
704 E GRAND AVE
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
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

KOH, STEVE, MD†

Provider ID: N/A
255 N ASH ST STE 101
ESCONDIDO, CA 92027
Teleservice
Effective as of 01-JAN-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

C1. List of Network Providers

Specialty Care Physician

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†

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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-JAN-21

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-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-SEP-22

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-JAN-21

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

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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-AUG-20

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-JUL-22

SAMADY, JOSEPH, MD†

Provider ID: N/A

1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JUL-22

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-AUG-20

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


C1. List of Network Providers

Specialty Care Physician

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-JAN-23


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


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†

CI. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers
Specialty Care Physician

CHIROPRACTOR

TUREK, PAUL, DC

Provider ID: N/A

26672 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

C1. List of Network Providers

Specialty Care Physician

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

DEJBAKHS, 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

CI. List of Network Providers Specialty Care Physician

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-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

DANESHMAND, HOOTAN, MD

Provider ID: N/A

27462 PORTOLA PKWY STE
100
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-22

ALLERGY IMMUNOLOGY

BROWN, HOSEA, MD†

Provider ID: N/A

1000 E LATHAM AVE STE B
HEMET, CA 92543

Effective as of 01-MAY-15

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

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

C1. List of Network Providers


Specialty Care Physician

 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[†]

C1. List of Network Providers

Specialty Care Physician

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-DEC-13

RIVA, GREGORY, MD†

Provider ID: N/A

1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-MAR-14

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

C1. List of Network Providers
Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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-OCT-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-MAY-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-DEC-22

IGWE, CHINWENDU, NP†

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JAN-20

IGWE, CHINWENDU, NP†

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545

CI. List of Network Providers

Specialty Care Physician

Effective as of 01-AUG-19

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, 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, 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-JUL-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-DEC-22

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-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

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

JONES, LAKESHA, NP†


Provider ID: N/A

CI. List of Network Providers


Specialty Care Physician

 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

 1030 E FLORIDA AVE
HEMET, CA 92543
Effective as of 01-FEB-24


KUMAR, NINA, NP†
Provider ID: N/A

 422 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-APR-21


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

CI. List of Network Providers

Specialty Care Physician

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, YAHAIRA, NP†
Provider ID: N/A

1003 E FLORIDA AVE STE 101
HEMET, CA 92543
Effective as of 01-MAR-22

SANCHEZ, YAHAIRA, NP†
Provider ID: N/A

1003 E FLORIDA AVE STE 101
HEMET, CA 92543
Effective as of 01-OCT-22

SANCHEZ, YAHAIRA, NP†
Provider ID: N/A

1003 E FLORIDA AVE STE 104
HEMET, CA 92543
Effective as of 01-OCT-22

SANCHEZ, YAHAIRA, NP†
Provider ID: N/A

1003 E FLORIDA AVE STE 101
HEMET, CA 92543
Effective as of 01-DEC-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

C1. List of Network Providers

Specialty Care Physician

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

📍 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

BROWN, KEVIN, DC

Provider ID: N/A

📍 3012 W FLORIDA AVE
HEMET, CA 92545

Effective as of 01-AUG-23

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-FEB-11

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-JUL-23

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

C1. List of Network Providers
Specialty Care Physician

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, 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

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

HAIDER, UZMA, MD†

Provider ID: N/A


C1. List of Network Providers

Specialty Care Physician

 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

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-SEP-09


**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-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


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-APR-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-JAN-22


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-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
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

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers Specialty Care Physician

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-JUL-23

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-AUG-22

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

CI. List of Network Providers

Specialty Care Physician

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-JAN-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,
LCSW†**

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

**VALDEZ-HERNANDEZ, ISRAEL, CHANG, DAVID, MD†
LCSW†**

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-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-SEP-17

**CHARLES COWAN, TRICIA,
DO†**

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-SEP-17

**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

C1. List of Network Providers

Specialty Care Physician

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, DO†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-OCT-20

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-OCT-17

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-MAR-18

DHIMAN, DARSHAN, MD†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
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

DHIMAN, DARSHAN, MD†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-DEC-15

DHIMAN, DARSHAN, MD†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-DEC-15

DHIMAN, DARSHAN, MD†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-DEC-15

DHIMAN, DARSHAN, MD†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-DEC-15

ISHAK, SALAM, MD†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-AUG-20

NAGASUNDER, ARABHI, DO

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Teleservice
Effective as of 01-FEB-24

NAGASUNDER, ARABHI, DO

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Teleservice
Effective as of 01-OCT-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Teleservice
Effective as of 01-OCT-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Teleservice
Effective as of 01-NOV-23

NATH, ASHOK, MD†

Provider ID: N/A

3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-FEB-21

NATH, ASHOK, MD†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-APR-20

YAN, ERIC, MD

C1. List of Network Providers

Specialty Care Physician

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-JUN-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-SEP-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-MAR-22

RIZVI, SYED, MD†

Provider ID: N/A

1600 E FLORIDA AVE STE 315
HEMET, CA 92544
Effective as of 01-FEB-17

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

C1. List of Network Providers

Specialty Care Physician

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 150
HEMET, CA 92545

Effective as of 01-JAN-20

JENSEN, BROOKE, OT†

Provider ID: N/A

☐ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-MAY-21

OPHTHALMOLOGY

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-FEB-22

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-OCT-22

CHOW, JASON, MD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-FEB-24

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-SEP-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

DONALDSON, JARED, MD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-DEC-22

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-SEP-09

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-JUL-18

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

C1. List of Network Providers
Specialty Care Physician

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-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-19

JOSEPH, JEFFREY, MD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-AUG-20

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-JUL-23

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-MAR-14

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-MAY-14

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-JAN-22

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-SEP-09

SORENSEN, ROBERT, MD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JAN-22

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-DEC-21

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

C1. List of Network Providers

Specialty Care Physician

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-SEP-09

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

OPTOMETRIST

ARCHIBALD, JOHN, OD†

Provider ID: N/A

📍 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-DEC-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

📍 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JUL-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-JUL-23

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

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-SEP-09

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-JUL-23

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

LARSON, BRETT, OD†

Provider ID: N/A

📍 3953 W STETSON AVE
HEMET, CA 92545

C1. List of Network Providers

Specialty Care Physician

Effective as of 01-AUG-20

LARSON, BRETT, OD[†]

Provider ID: N/A

📍 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JUL-23

MC CLEARY, DAVID, OD[†]

Provider ID: N/A

📍 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JUL-23

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-AUG-18

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

CI. List of Network Providers

Specialty Care Physician

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-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

CERALDE, ALAN, PA†

Provider ID: N/A

3889 W STETSON AVE STE
100
HEMET, CA 92545

Effective as of 01-NOV-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

CI. List of Network Providers
Specialty Care Physician

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
 ☐ 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

RODDICK, JASON, PA†

Provider ID: N/A
 ☐ 3853 W STETSON AVE STE
 201
 HEMET, CA 92545
 Effective as of 01-JUL-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

CI. List of Network Providers

Specialty Care Physician

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-SEP-17

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-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-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-OCT-20

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-NOV-23

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

CI. List of Network Providers

Specialty Care Physician

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-MAR-14

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-JUL-23

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-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-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

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

BURROUGHS, GLORIA, MD†

Provider ID: N/A

540 N JACINTO ST
HEMET, CA 92543
Effective as of 01-MAR-07

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†

CI. List of Network Providers

Specialty Care Physician

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-JUL-23

MEHTA, AMAL, MD†

Provider ID: N/A

949 CALHOUN PL STE F
HEMET, CA 92543
Effective as of 01-SEP-18

RAMASWAMY, DHARMARAJAN, MD†

Provider ID: N/A

949 CALHOUN PL STE F
HEMET, CA 92543
Effective as of 01-SEP-18

RAMASWAMY, DHARMARAJAN, MD†

Provider ID: N/A

949 CALHOUN PL STE F
HEMET, CA 92543
Effective as of 01-JUL-23

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-DEC-20

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

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-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-SEP-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-SEP-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-MAY-22

BARRERA, KAYLENE, 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-APR-22

C1. List of Network Providers

Specialty Care Physician

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-SEP-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

CI. List of Network Providers
Specialty Care Physician

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-MAY-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

☒ 3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-DEC-21

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-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

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

C1. List of Network Providers
Specialty Care Physician

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-JUL-15

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-NOV-16

LE, SANG, MD†

Provider ID: N/A

3889 W STETSON AVE STE 100
 HEMET, CA 92545
 Effective as of 01-MAR-21

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

C1. List of Network Providers

Specialty Care Physician

 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-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

C1. List of Network Providers

Specialty Care Physician

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-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

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

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers
Specialty Care Physician

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

C1. List of Network Providers
Specialty Care Physician

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-SEP-17

WERTMAN, BRETT, MD

Provider ID: N/A

16305 SAND CANYON AVE
 STE 255
 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

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-FEB-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-MAY-22

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-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-OCT-23

DOAN VAN, NICOLAS, MD†

Provider ID: N/A

16300 SAND CANYON AVE
 STE 708
 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

ELSAYED, SARAH SABRY, MD†

Provider ID: N/A

16300 SAND CANYON AVE
 STE 708
 IRVINE, CA 92618

Effective as of 01-JAN-22

ELSAYED, SARAH SABRY, MD†

Provider ID: N/A

16300 SAND CANYON AVE
 STE 708
 IRVINE, CA 92618

Effective as of 01-OCT-23

C1. List of Network Providers
Specialty Care Physician

ELSAYED, SARAH SABRY, MD†

Provider ID: N/A

16300 SAND CANYON AVE
 STE 708
 IRVINE, CA 92618

Effective as of 01-APR-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-OCT-23

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-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-OCT-23

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

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

C1. List of Network Providers

Specialty Care Physician

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-OCT-23

WONG, JENNIFER, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-JAN-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

YALVAC, ETHAN, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-MAY-22

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-MAR-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-OCT-22

CHOI, JI, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-FEB-23

HONG, HEE, LAC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618

C1. List of Network Providers

Specialty Care Physician

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-FEB-23

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-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


C1. List of Network Providers
Specialty Care Physician

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

C1. List of Network Providers
Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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-JAN-23

MEHTA, SHILPA, MD†

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Teleservice

Effective as of 01-OCT-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-JUN-19

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

CI. List of Network Providers

Specialty Care Physician

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-JAN-23

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

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-OCT-23

BEMANIAN, SHAHROOZ, MD[†]

C1. List of Network Providers

Specialty Care Physician

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-MAY-16

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-20

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-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

CHOI, DAVID, DO†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-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

C1. List of Network Providers

Specialty Care Physician

STE 100
IRVINE, CA 92618
Effective as of 01-AUG-23

KAUFMAN, DAVID, DO

Provider ID: N/A
113 WATERWORKS WAY
STE 155
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
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-OCT-23

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
113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-16

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-JAN-21

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-18

LEE, PAUL, MD

Provider ID: N/A
16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JAN-23

LEE, JAMES, MD

Provider ID: N/A
16305 SAND CANYON AVE

STE 220
IRVINE, CA 92618
Effective as of 01-JUN-23

LEE, JAMES, MD

Provider ID: N/A
16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JUN-23

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-18

OMAN, MATTHEW, MD†

Provider ID: N/A
113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-AUG-18

C1. List of Network Providers

Specialty Care Physician

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

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

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-OCT-20

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-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-23

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


C1. List of Network Providers

Specialty Care Physician

 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-MAY-16

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-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

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

CI. List of Network Providers

Specialty Care Physician

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

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

SARAFIAN, FARJAD, MD

Provider ID: N/A

16100 SAND CANYON AVE
STE 240

IRVINE, CA 92618

Effective as of 01-AUG-20

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

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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-JUN-19

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-SEP-16

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

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-JAN-20


MASAKI, DAMON, MD†

Provider ID: N/A


C1. List of Network Providers
Specialty Care Physician

 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-APR-11

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

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

CI. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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-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-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-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 /

CI. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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-MAR-23

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-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-JAN-18

GE, NENGJIE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 608

C1. List of Network Providers

Specialty Care Physician

IRVINE, CA 92618
Effective as of 01-JAN-17

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-MAY-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

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-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

NGUYEN, BAO-THU, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201

IRVINE, CA 92618*
Effective as of 01-JAN-23

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-JAN-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-FEB-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

CI. List of Network Providers

Specialty Care Physician

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-OCT-23

RUDE, LOREN, OD

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618
Effective as of 01-JAN-23

TRAN, STEPHANIE, OD

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618
Effective as of 01-JAN-23

TRAN, STEPHANIE, OD

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618
Effective as of 01-OCT-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-JAN-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

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-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-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-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-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

BUEN, FLOYD, MD†

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-NOV-20

C1. List of Network Providers

Specialty Care Physician

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-OCT-23

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-JAN-14

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†

C1. List of Network Providers

Specialty Care Physician

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, JOHN, 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-JAN-14

SUN, PAUL, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 100

IRVINE, CA 92618

Effective as of 01-FEB-16

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-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, PAUL, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-JAN-17

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-NOV-14

LAI, KHANG, DO

Provider ID: N/A

☐ 15701 ROCKFIELD BLVD
IRVINE, CA 92618

C1. List of Network Providers

Specialty Care Physician

Effective as of 01-APR-11

LAI, KHANG, DO

Provider ID: N/A

15701 ROCKFIELD BLVD
IRVINE, CA 92618

Effective as of 01-DEC-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-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

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

CI. List of Network Providers

Specialty Care Physician

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-JUL-18

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-JAN-20

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-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

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

VINCENT, EBONIE, DPM†

Provider ID: N/A

16405 SAND CANYON AVE

C1. List of Network Providers
Specialty Care Physician

STE 270
 IRVINE, CA 92618
 Effective as of 01-JAN-21

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

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-NOV-16

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-AUG-17

SALO, CLINT, DO†

Provider ID: N/A
 2 HUGHES STE 100
 IRVINE, CA 92618
 Effective as of 01-NOV-16

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

C1. List of Network Providers

Specialty Care Physician

| | | |
|---|---|--|
|  16305 SAND CANYON AVE STE 201 IRVINE, CA 92618 Effective as of 01-MAR-23 | Effective as of 01-MAR-20 | 350 IRVINE, CA 92618 Effective as of 01-DEC-23 |
| PSYCHOLOGIST | KANG, EILEEN, PhD | MUNAVU, LILY, PSYD |
| ALEXANDER, DEBORAH, PSYD | Provider ID: N/A | Provider ID: N/A |
|  15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-DEC-23 |  6 VENTURE IRVINE, CA 92618 Effective as of 01-MAR-20 |  15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-DEC-23 |
| ALEXANDER, DEBORAH, PSYD | KANG, EILEEN, PhD | MUNAVU, LILY, PSYD |
| Provider ID: N/A | Provider ID: N/A | Provider ID: N/A |
|  15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-DEC-23 |  6 VENTURE IRVINE, CA 92618 Effective as of 01-MAR-20 |  15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-DEC-23 |
| ALEXANDER, DEBORAH, PSYD | MORIN, RUTH, PSYD | MUNAVU, LILY, PSYD |
| Provider ID: N/A | Provider ID: N/A | Provider ID: N/A |
|  15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-DEC-23 |  16405 SAND CANYON AVE STE 220 IRVINE, CA 92618 Effective as of 01-JAN-24 |  15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-DEC-23 |
| ALEXANDER, DEBORAH, PSYD | MORIN, RUTH, PSYD | PETERSON, JENYFFER, PSYD |
| Provider ID: N/A | Provider ID: N/A | Provider ID: N/A |
|  15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-DEC-23 |  16405 SAND CANYON AVE STE 220 IRVINE, CA 92618 Effective as of 01-JAN-24 |  15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-DEC-23 |
| ALEXANDER, DEBORAH, PSYD | MORIN, RUTH, PSYD | PETERSON, JENYFFER, PSYD |
| Provider ID: N/A | Provider ID: N/A | Provider ID: N/A |
|  6 VENTURE IRVINE, CA 92618 Effective as of 01-MAR-20 |  16405 SAND CANYON AVE STE 220 IRVINE, CA 92618 Effective as of 01-JAN-24 |  15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-DEC-23 |
| KANG, EILEEN, PhD | MORIN, RUTH, PSYD | PETERSON, JENYFFER, PSYD |
| Provider ID: N/A | Provider ID: N/A | Provider ID: N/A |
|  6 VENTURE IRVINE, CA 92618 |  16405 SAND CANYON AVE STE 220 IRVINE, CA 92618 Effective as of 01-JAN-24 |  15635 ALTON PKWY STE 350 IRVINE, CA 92618 Effective as of 01-DEC-23 |
| KANG, EILEEN, PhD | MUNAVU, LILY, PSYD | |
| Provider ID: N/A | Provider ID: N/A | |
|  6 VENTURE IRVINE, CA 92618 |  15635 ALTON PKWY STE | |

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers
Specialty Care Physician

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-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

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-18

Effective as of 01-DEC-19

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

NISHANIAN, GARABED, MD†

Provider ID: N/A

16100 SAND CANYON AVE
 STE 350
 IRVINE, CA 92618

Effective as of 01-NOV-15

NISHANIAN, GARABED, MD†

Provider ID: N/A

16100 SAND CANYON AVE
 STE 350
 IRVINE, CA 92618

Effective as of 01-JAN-20

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**

CI. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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-MAR-21

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

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

CI. List of Network Providers

Specialty Care Physician

HAGHVERDIAN, BRANDON, MD

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-DEC-23

HUNTER, MICHAEL, MD

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 400
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-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-SEP-23

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-FEB-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-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-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
STE 400
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

C1. List of Network Providers

Specialty Care Physician

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


CI. List of Network Providers

Specialty Care Physician

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-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-JAN-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JAN-23

C1. List of Network Providers

Specialty Care Physician

YOUDERIAN, 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-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

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

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-DEC-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-JAN-23

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

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-OCT-23

C1. List of Network Providers
Specialty Care Physician

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-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-MAY-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

C1. List of Network Providers
Specialty Care Physician

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-JUN-18

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-JAN-21

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

Effective as of 01-DEC-19

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-JUN-18

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-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

C1. List of Network Providers

Specialty Care Physician

| | | |
|---|---|--|
|  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-OCT-22 | Effective as of 01-AUG-23 | Provider ID: N/A |
| NAKAMURA, LEAH, MD† Provider ID: N/A | SHOURESHI, POONE, MD Provider ID: N/A |  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 |
|  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-JAN-23 | Effective as of 01-AUG-23 | Effective as of 01-JUN-18 |
| NAKAMURA, LEAH, MD† Provider ID: N/A | SHOURESHI, POONE, MD Provider ID: N/A | SINGH, KARAN, MD† Provider ID: N/A |
|  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-JUN-18 | Effective as of 01-AUG-23 |  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 |
| NAKAMURA, LEAH, MD† Provider ID: N/A | SHOURESHI, POONE, MD Provider ID: N/A | Effective as of 01-JUN-18 |
|  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-APR-21 | Effective as of 01-AUG-23 | SINGH, KARAN, MD† Provider ID: N/A |
| NAKAMURA, LEAH, MD† Provider ID: N/A | SHOURESHI, POONE, MD Provider ID: N/A |  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 |
|  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-JAN-21 | Effective as of 01-AUG-23 | Effective as of 01-JUN-18 |
| SHOURESHI, POONE, MD Provider ID: N/A | SINGH, KARAN, MD† Provider ID: N/A | SINGH, KARAN, MD† Provider ID: N/A |
|  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-AUG-23 | Effective as of 01-JAN-21 |  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 |
| SHOURESHI, POONE, MD Provider ID: N/A | SINGH, KARAN, MD† Provider ID: N/A | Effective as of 01-JAN-23 |
|  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 | Effective as of 01-DEC-19 | SINGH, KARAN, MD† Provider ID: N/A |
| | 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-DEC-19 |
| | | SINGH, KARAN, MD† Provider ID: N/A |
| | |  16305 SAND CANYON AVE STE 200 |

C1. List of Network Providers
Specialty Care Physician

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-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-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-JUN-18

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-APR-21

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-JAN-21

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-DEC-19

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-SEP-18

C1. List of Network Providers

Specialty Care Physician

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-JAN-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-JUN-18

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-JAN-21

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-SEP-18

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

C1. List of Network Providers

Specialty Care Physician

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

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

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

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

C1. List of Network Providers

Specialty Care Physician

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-MAY-20

COHEN, DAVID, MD†

Provider ID: N/A

9850 GENESEE AVE STE
940

LA JOLLA, CA 92037

Effective as of 01-SEP-21

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†

CI. List of Network Providers

Specialty Care Physician

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**

C1. List of Network Providers

Specialty Care Physician

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

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

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

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
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

CI. List of Network Providers

Specialty Care Physician

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-AUG-21

CZYPULL, MONICA, NP

Provider ID: N/A

📍 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-SEP-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, CHRISTA, NP†

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-21

C1. List of Network Providers

Specialty Care Physician

JONES, LAILA, NP

Provider ID: N/A

9850 GENESEE AVE STE
320

LA JOLLA, CA 92037

Effective as of 01-JUN-23

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

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

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

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

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

MCCLAIN, MEGAN, NP†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

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

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

C1. List of Network Providers

Specialty Care Physician

MICK, SHARON, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

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

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
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-21

TOMICICH, STEPHANIE, NP†

Provider ID: N/A

9834 GENESEE AVE STE

C1. List of Network Providers

Specialty Care Physician

416
LA JOLLA, CA 92037
Effective as of 01-JAN-21

TOMICICH, STEPHANIE, NP†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

TRAN, RICHARD, NPF

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-23

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

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-JUN-21

WILLEY, MARTI, NP†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

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

C1. List of Network Providers

Specialty Care Physician

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

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

ELY-KONOSKE, RACHEL, CRNM

Provider ID: N/A

9300 CAMPUS POINT 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

C1. List of Network Providers

Specialty Care Physician

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

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

HOGUE, BRENNIA, MD

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Effective as of 01-JUN-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

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Effective as of 01-JUL-21

MUELLER, MATTHEW, DO†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUL-21

PARK, JAY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-21

PARK, JAY, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

CI. List of Network Providers

Specialty Care Physician

Effective as of 01-NOV-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

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

IYENGAR, RAVI, MD

Provider ID: N/A

📍 9350 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

C1. List of Network Providers

Specialty Care Physician

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-JAN-21

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

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

CI. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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

9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

LAM, PAMELA, DO†

Provider ID: N/A

9850 GENESEE AVE STE
900
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

LEWIS, GREG, MD†

Provider ID: N/A

9888 GENESEE AVE
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

9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MOOLANI, UJJALA, MD

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
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

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-21

PATEL, KRUTI, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-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

9850 GENESEE AVE STE
900
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

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

9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

STEVENS, KENNETH, MD†

C1. List of Network Providers

Specialty Care Physician

Provider ID: N/A

9850 GENESEE AVE STE
900
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

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

TRAN, PHI, DO†

Provider ID: N/A

9888 GENESEE AVE
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

C1. List of Network Providers

Specialty Care Physician

FLORES, EDNA, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Effective as of 01-JUN-18

NEPHROLOGY

AL-DAHMAN, 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-JAN-21

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

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

C1. List of Network Providers

Specialty Care Physician

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

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

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†

C1. List of Network Providers

Specialty Care Physician

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, 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
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, 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†

CI. List of Network Providers

Specialty Care Physician

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-21

HARVEY, SCOTT, MD†

Provider ID: N/A

📍 9444 MEDICAL CENTER 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

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

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

📍 9415 CAMPUS POINT DR


C1. List of Network Providers

Specialty Care Physician

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

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
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


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-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

 9850 GENESEE AVE STE

310
LA JOLLA, CA 92037
Effective as of 01-NOV-21


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

 9300 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

 9834 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-JAN-21


CULOTTA, ANTHONY, MD

Provider ID: N/A

 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-FEB-24


ESLANI, MEDI, MD

Provider ID: N/A

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
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

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
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-NOV-22

FISH, STEVEN, MD†

Provider ID: N/A

CI. List of Network Providers

Specialty Care Physician

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

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-JAN-21

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-SEP-22

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-APR-23

HUDSON, HENRY, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-APR-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-SEP-22

JIN, MAN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

JIN, MAN, MD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUN-23

LANG, PAUL, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
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

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
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

CI. List of Network Providers

Specialty Care Physician

LA JOLLA, CA 92037
Effective as of 01-JUL-23

MORTON, ASA, MD

Provider ID: N/A
9834 GENESEE AVE STE
428
LA JOLLA, CA 92037
Effective as of 01-AUG-23

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

PERRY, ARTHUR, MD

Provider ID: N/A
9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-OCT-95

PRATT, STEVEN, MD†

Provider ID: N/A
9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-OCT-12

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

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
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

SHEILS, CATHERINE, MD

Provider ID: N/A
9834 GENESEE AVE STE
200
LA JOLLA, CA 92037
Effective as of 01-JAN-24

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
9350 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

SONG, DELU, MD†

CI. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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

9350 CAMPUS POINT DR

LA JOLLA, CA 92037

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

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

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-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

CHANG, ANGELA, MD†

Provider ID: N/A

9834 GENESEE AVE STE 112
LA JOLLA, CA 92037

Effective as of 01-OCT-21

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

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

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

DECONDE, ADAM, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

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

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

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

CI. List of Network Providers

Specialty Care Physician

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

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

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

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

GILANI, SAPIDEH, 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

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
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

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
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

GUO, THERESA, 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

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
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

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
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

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
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

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

C1. List of Network Providers
Specialty Care Physician

 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037
 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

 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

 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093
 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

 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

 9350 CAMPUS POINT DR
 STE LLA
 LA JOLLA, CA 92037
 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

 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

 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093
 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

 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

CI. List of Network Providers

Specialty Care Physician

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

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

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

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

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

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

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

9400 CAMPUS POINT 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

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

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

C1. List of Network Providers

Specialty Care Physician

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

WEISSBROD, PHILIP, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

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-JAN-21

WOO, LINDA, MD†

Provider ID: N/A

9834 GENESEE AVE STE 101
LA JOLLA, CA 92037

Effective as of 01-JUL-22

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

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093
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

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

C1. List of Network Providers Specialty Care Physician

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
8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-JAN-22

HIGGINS, JOSHUA, PA†


Provider ID: N/A
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-JAN-22

HUNTER, JACOB, PA

Provider ID: N/A

CI. List of Network Providers

Specialty Care Physician

 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

 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
Effective as of 01-MAY-21


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

CI. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers
Specialty Care Physician

**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

CI. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers
Specialty Care Physician

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-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

📍 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-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

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-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-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

C1. List of Network Providers

Specialty Care Physician

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

BOUELLE, KERRI, PhD

Provider ID: N/A

3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

BOUELLE, 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-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

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

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

C1. List of Network Providers

Specialty Care Physician

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

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

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, LALAINÉ, MD[†]

Provider ID: N/A

9850 GENESEE AVE STE
370
LA JOLLA, CA 92037

Effective as of 01-JAN-21

CORATE, LALAINÉ, MD[†]

Provider ID: N/A

9850 GENESEE AVE STE
370
LA JOLLA, CA 92037

Effective as of 01-JUL-20

CORATE, LALAINÉ, MD[†]

Provider ID: N/A

9850 GENESEE AVE STE
780
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-JAN-21

FRICKS, CARL, MD[†]

Provider ID: N/A

9850 GENESEE AVE STE
370

LA JOLLA, CA 92037

Effective as of 01-JUL-20

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

CI. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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, LEWIS, 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


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

CI. List of Network Providers

Specialty Care Physician


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

 9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

MCDONALD, MARIN, MD†

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-22


MCNAMEE, CAIRINE, MD†

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21


MCNAMEE, CAIRINE, MD

Provider ID: N/A

 9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23


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

C1. List of Network Providers
Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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-SEP-18

KIM, JANET, MD

Provider ID: N/A

9850 GENESEE AVE STE
420
LA JOLLA, CA 92037
Effective as of 01-FEB-17

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

9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037
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

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-JAN-21

BEIERMEISTER, KEITH, MD†

Provider ID: N/A

9834 GENESEE AVE STE
201
LA JOLLA, CA 92037
Effective as of 01-AUG-13

C1. List of Network Providers

Specialty Care Physician

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-SEP-22

BHOYRUL, SUNIL, MD[†]

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-JAN-21

BORTZ, PASCAL, MD[†]

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-JAN-21

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

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

C1. List of Network Providers

Specialty Care Physician

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-FEB-24

SHAPER, EMANUEL, MD

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037

Effective as of 01-MAY-23

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

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-OCT-21

STEPHENSON, SAMUEL, MD†

Provider ID: N/A

9400 CAMPUS POINT DR

LA JOLLA, CA 92093

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

C1. List of Network Providers

Specialty Care Physician

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

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-21

GOEB, YANNICK, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
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-SEP-15

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-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

UMANSKY, JEFFREY, MD†

Provider ID: N/A

C1. List of Network Providers


Specialty Care Physician

 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

 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

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

 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

 9434 MEDICAL CENTER 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

 9300 CAMPUS POINT 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-SEP-21


COHEN, EDWARD, MD†

Provider ID: N/A

 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-OCT-12


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

C1. List of Network Providers

Specialty Care Physician

COHEN, EDWARD, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-21

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-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-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-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-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-19

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

CI. List of Network Providers

Specialty Care Physician

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-SEP-22

YUH, BENJAMIN, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Effective as of 01-JAN-23

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-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

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 463
LA MESA, CA 91942

Effective as of 01-FEB-24

SHASKY, GARY, AuD†

Provider ID: N/A

📍 5565 GROSSMONT
CENTER DR STE 153
LA MESA, CA 91942

CI. List of Network Providers
Specialty Care Physician

Effective as of 01-JAN-21

**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

CI. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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-JAN-14

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-SEP-20

DO, LUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505

LA MESA, CA 91942

Effective as of 01-JUL-22

FADDA, GEORGE, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JUL-22

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-AUG-16

FADDA, GEORGE, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-AUG-16

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

C1. List of Network Providers

Specialty Care Physician

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

LEININGER, DANIEL, DO†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Teleservice

Effective as of 01-OCT-22

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-SEP-20

MILLER, LUCY, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-APR-15

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

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-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

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JUL-22

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

C1. List of Network Providers
Specialty Care Physician

**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-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

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

7339 EL CAJON BLVD STE J

AND K
LA MESA, CA 91942
Effective as of 01-MAR-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-SEP-22

CARRABY, ARNETT, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

CARRABY, ARNETT, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-JUL-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


C1. List of Network Providers

Specialty Care Physician

 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-JUN-23


CHIU, STEPHAN, MD†

Provider ID: N/A

 5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-FEB-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 STE 551
LA MESA, CA 91942
Effective as of 01-JUN-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

 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

C1. List of Network Providers

Specialty Care Physician

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-JAN-21

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

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-SEP-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

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-SEP-22

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

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-MAR-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-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-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

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-MAY-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

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

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

CI. List of Network Providers

Specialty Care Physician

LA MESA, CA 91942
Effective as of 01-MAR-22

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

HUDSON, HENRY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-SEP-22

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

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

5565 GROSSMONT
CENTER DR STE 551
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

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-MAR-23

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-SEP-22

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

C1. List of Network Providers
Specialty Care Physician

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

PAPASTERGIOU, GEORGIOS, MD†

Provider ID: N/A

8851 CENTER DR STE 406
 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-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-AUG-20

PEAIRS, JAMES, MD†

Provider ID: N/A

8851 CENTER DR STE 406
 LA MESA, CA 91942
 Effective as of 01-SEP-22

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

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

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

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

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-MAR-22

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

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

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers
Specialty Care Physician

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-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

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

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

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-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-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-APR-21

MOSHTAGHI, OMID, MD

Provider ID: N/A

5565 GROSSMONT
 CENTER DR
 LA MESA, CA 91942

Effective as of 01-JAN-24

C1. List of Network Providers
Specialty Care Physician

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

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

PATSIAS, ALEXIS, MD†

Provider ID: N/A

5565 GROSSMONT
 CENTER DR STE 101
 LA MESA, CA 91942

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

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

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 101
 LA MESA, CA 91942

Teleservice

Effective as of 01-OCT-22

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 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

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-SEP-22

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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-JAN-21

COLLINS, MICHAEL, DPM†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-AUG-23

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-DEC-23

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

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

CI. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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

SAHATDJIAN, EVA, PT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-AUG-23

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

C1. List of Network Providers

Specialty Care Physician

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-JUL-23

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

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-SEP-22

RICKARDS, ENASS, MD†

Provider ID: N/A
8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-APR-23

RICKARDS, ENASS, MD†

Provider ID: N/A
8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-JUL-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-DEC-22

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

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

CI. List of Network Providers

Specialty Care Physician

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-JAN-21

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

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

CI. List of Network Providers

Specialty Care Physician

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-DEC-18

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-MAY-22

BINGHAM, LUCAS, MD

Provider ID: N/A

☐ 600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-MAY-22

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

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

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-JUL-21

PENG, YING, MD†

Provider ID: N/A


CI. List of Network Providers

Specialty Care Physician

 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-DEC-20

PENG, YING, MD[†]


Provider ID: N/A

 333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-DEC-20

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-SEP-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-NOV-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

CI. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers
Specialty Care Physician

***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-JAN-19

SPANGGORD, HOLLY, MD†

Provider ID: N/A

📍 31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-23

***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-NOV-23

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

SURGERY GENERAL

CHANG, STEVEN, MD

Provider ID: N/A

📍 31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

C1. List of Network Providers

Specialty Care Physician

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-APR-12

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-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

C1. List of Network Providers
Specialty Care Physician

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-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

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-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

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-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-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

C1. List of Network Providers
Specialty Care Physician

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-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

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

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-JAN-23

MOUSAVI, SHAHRYAR, MD

CI. List of Network Providers

Specialty Care Physician

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-OCT-23

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

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

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-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

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

☐ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-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

C1. List of Network Providers

Specialty Care Physician

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-FEB-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

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

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

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

C1. List of Network Providers
Specialty Care Physician

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-FEB-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-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

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

PATEL, MILAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

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-FEB-23

C1. List of Network Providers

Specialty Care Physician

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-AUG-20

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-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

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

C1. List of Network Providers
Specialty Care Physician

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-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-FEB-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

CI. List of Network Providers

Specialty Care Physician

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

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

RUGGIO, JOSEPH, MD†

Provider ID: N/A

☞ 24022 CALLE DE LA PLATA
STE 500

LAGUNA HILLS, CA 92653

Effective as of 01-FEB-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

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-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-APR-20

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

CI. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

COSTALES, STEPHEN, DC

Provider ID: N/A

24741 ALICIA PKWY STE D
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

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-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

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-OCT-23

BANDUKWALA, RAHIL, DO†

Provider ID: N/A

C1. List of Network Providers

Specialty Care Physician

| | | |
|--|---|---|
|  23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-22 | Effective as of 01-JUN-19 | Provider ID: N/A |
| BANDUKWALA, RAHIL, DO† Provider ID: N/A | CHANG, KU JUEY, MD Provider ID: N/A |  23521 PASEO DE VALENCIA STE 106 LAGUNA HILLS, CA 92653 |
|  23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-23 | Effective as of 01-NOV-16 | Effective as of 01-JUN-22 |
| BANDUKWALA, RAHIL, DO† Provider ID: N/A | CHANG, KU JUEY, MD Provider ID: N/A | FARJOU DI, FARHAD, MD† Provider ID: N/A |
|  23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-JUN-19 | Effective as of 01-OCT-23 |  23521 PASEO DE VALENCIA STE 106 LAGUNA HILLS, CA 92653 |
| BANDUKWALA, RAHIL, DO† Provider ID: N/A | CHANG, KU JUEY, MD Provider ID: N/A | Effective as of 01-JUN-22 |
|  23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-JUL-16 | Effective as of 01-AUG-21 | KRISHNAN, PRIYANKA, MD Provider ID: N/A |
| CHAN, JESSICA, MD† Provider ID: N/A | FARJOU DI, FARHAD, MD† Provider ID: N/A |  23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 |
|  24321 AVENIDA DE LA CARLOTA LAGUNA HILLS, CA 92653 Effective as of 01-APR-23 | Effective as of 01-MAY-22 | Teleservice Effective as of 01-JUN-19 |
| CHAN, JESSICA, MD† Provider ID: N/A | FARJOU DI, FARHAD, MD† Provider ID: N/A | KRISHNAN, PRIYANKA, MD Provider ID: N/A |
|  24321 AVENIDA DE LA CARLOTA LAGUNA HILLS, CA 92653 Effective as of 01-NOV-22 | Effective as of 01-MAY-22 |  23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 |
| CHANG, KU JUEY, MD Provider ID: N/A | FARJOU DI, FARHAD, MD† Provider ID: N/A | Teleservice Effective as of 01-JUL-16 |
|  23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 | Effective as of 01-MAY-22 | KRISHNAN, PRIYANKA, MD Provider ID: N/A |
| FARJOU DI, FARHAD, MD† |  23521 PASEO DE VALENCIA STE 108 LAGUNA HILLS, CA 92653 |  23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 |
| | Effective as of 01-MAY-22 | Teleservice Effective as of 01-OCT-22 |
| | FARJOU DI, FARHAD, MD† | KRISHNAN, PRIYANKA, MD Provider ID: N/A |
| |  23521 PASEO DE VALENCIA STE 108 LAGUNA HILLS, CA 92653 |  23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 |
| | Effective as of 01-MAY-22 | Teleservice Effective as of 01-APR-18 |
| | FARJOU DI, FARHAD, MD† | |

CI. List of Network Providers
Specialty Care Physician

KRISHNAN, PRIYANKA, MD

Provider ID: N/A

23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-FEB-16

KRISHNAN, PRIYANKA, MD

Provider ID: N/A

23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-AUG-21

KRISHNAN, PRIYANKA, MD

Provider ID: N/A

23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653

Teleservice

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-OCT-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

MARKMAN, LISA, MD

Provider ID: N/A

23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653

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-OCT-22

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-JAN-23

MEHTA, SHILPA, MD†

Provider ID: N/A

23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653

CI. List of Network Providers

Specialty Care Physician

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

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 503
LAGUNA HILLS, CA 92653*

Effective as of 01-JUN-19

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

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

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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-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

C1. List of Network Providers

Specialty Care Physician

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-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-NOV-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

CI. List of Network Providers

Specialty Care Physician

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 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

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

C1. List of Network Providers

Specialty Care Physician

| | | |
|--|--|--|
|  24411 HEALTH CENTER DR STE 260 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-23 | Effective as of 01-OCT-23 | Provider ID: N/A |
| BUSH, MELISSA, MD† Provider ID: N/A | BUSH, MELISSA, MD† Provider ID: N/A |  24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-SEP-19 |
|  24411 HEALTH CENTER DR STE 260 LAGUNA HILLS, CA 92653 Effective as of 01-FEB-23 |  24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-NOV-11 | CHAU, CINDY, MD† Provider ID: N/A |
| BUSH, MELISSA, MD† Provider ID: N/A | BUSH, MELISSA, MD† Provider ID: N/A |  24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-JUN-19 |
|  24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-APR-11 |  24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-JUL-04 | CHAU, CINDY, MD† Provider ID: N/A |
| BUSH, MELISSA, MD† Provider ID: N/A | BUSH, MELISSA, MD† Provider ID: N/A |  24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-23 |
|  24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-20 |  24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-23 | CHAU, CINDY, MD† Provider ID: N/A |
| BUSH, MELISSA, MD† Provider ID: N/A | BUSH, MELISSA, MD† Provider ID: N/A |  24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-23 |
|  24411 HEALTH CENTER DR STE 260 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-23 |  24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-SEP-16 | CHAU, CINDY, MD† Provider ID: N/A |
| BUSH, MELISSA, MD† Provider ID: N/A | BUSH, MELISSA, MD† Provider ID: N/A |  24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-FEB-23 |
|  24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-22 |  24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-SEP-16 | DAY, ROBERT, MD† Provider ID: N/A |
| BUSH, MELISSA, MD† Provider ID: N/A | BUSH, MELISSA, MD† Provider ID: N/A |  24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-MAY-22 |
|  24411 HEALTH CENTER DR STE 300 LAGUNA HILLS, CA 92653 |  24411 HEALTH CENTER DR STE 260 LAGUNA HILLS, CA 92653 Effective as of 01-SEP-19 | KFIR, MENASHE, MD† Provider ID: N/A |
| | CHAU, CINDY, MD† |  24411 HEALTH CENTER DR STE 300 |

CI. List of Network Providers

Specialty Care Physician

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-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

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-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

MILLS, MARLIN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 540

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-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

C1. List of Network Providers

Specialty Care Physician

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-JAN-18

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-JAN-18

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

OBSTETRICS / GYNECOLOGY

AL-AZAWI, HIND, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

C1. List of Network Providers
Specialty Care Physician

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

C1. List of Network Providers
Specialty Care Physician

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-18

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

C1. List of Network Providers
Specialty Care Physician


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-18

O TOOLE, MARY, MD

Provider ID: N/A
 24411 HEALTH CENTER DR
 STE 200


LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-21

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-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

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

C1. List of Network Providers

Specialty Care Physician

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-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

BANUELOS, LYDIA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 309
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

BANUELOS, LYDIA, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-22

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

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

C1. List of Network Providers
Specialty Care Physician

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-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-JAN-20

**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 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

**EIFRIG, CHARLES WILLIAM,
 MD†**

Provider ID: N/A

23521 PASEO DE VALENCIA
 STE 207
 LAGUNA HILLS, CA 92653
 Effective as of 01-DEC-20

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

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

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
 STE 207
 LAGUNA HILLS, CA 92653
 Effective as of 01-OCT-20

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
 STE 207
 LAGUNA HILLS, CA 92653
 Effective as of 01-OCT-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

C1. List of Network Providers
Specialty Care Physician

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| <p>☞ 23521 PASEO DE VALENCIA STE 207 LAGUNA HILLS, CA 92653 Effective as of 01-NOV-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-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-JAN-22</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-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>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-FEB-14</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>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>HWANG, JOHN, MD†</p> | <p>Provider ID: N/A</p> <p>☞ 23521 PASEO DE VALENCIA STE 207 LAGUNA HILLS, CA 92653 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 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 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 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 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 Effective as of 01-OCT-23</p> <p>JACOBS, JEFFREY, MD† Provider ID: N/A</p> <p>☞ 23961 CALLE DE LA MAGDALENA STE 300</p> |
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C1. List of Network Providers

Specialty Care Physician

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

JACOBS, JEFFREY, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

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 306
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

JOSON, PETER, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 309
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-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

KELLER, CHARLES, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-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

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

KHAN, SAMIRA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

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, 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, 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

C1. List of Network Providers

Specialty Care Physician

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-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

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

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

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-22

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-JAN-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-MAR-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

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

C1. List of Network Providers
Specialty Care Physician

| | | |
|---|---|---|
| <p>☐ 23521 PASEO DE VALENCIA STE 305 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-SEP-22</p> | <p>LAGUNA HILLS, CA 92653 Effective as of 01-SEP-23 PERRY, ANGELA, MD Provider ID: N/A</p> | <p>Effective as of 01-OCT-23 RATHOD, RAJIV, MD[†] Provider ID: N/A</p> |
| <p>MCGUIRE, DESMOND, MD[†] Provider ID: N/A</p> | <p>☐ 23521 PASEO DE VALENCIA STE 305 LAGUNA HILLS, CA 92653 Effective as of 01-SEP-23</p> | <p>☐ 23521 PASEO VALENCIA 309 LAGUNA HILLS, CA 92653 Effective as of 01-FEB-15</p> |
| <p>☐ 23521 PASEO DE VALENCIA STE 207 LAGUNA HILLS, CA 92653 Effective as of 01-DEC-20</p> | <p>PRENDIVILLE, PAUL, MD Provider ID: N/A</p> | <p>RATHOD, RAJIV, MD[†] Provider ID: N/A</p> |
| <p>NOGUCHI, JONATHAN, MD Provider ID: N/A</p> | <p>☐ 24022 CALLE DE LA PLATA LAGUNA HILLS, CA 92653 Effective as of 01-OCT-23</p> | <p>☐ 24022 CALLE DE LA PLATA STE 475 LAGUNA HILLS, CA 92653 Effective as of 01-FEB-16</p> |
| <p>☐ 23961 CALLE DE LA MAGDALENA STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-23</p> | <p>PRENDIVILLE, PAUL, MD Provider ID: N/A</p> | <p>RATHOD, RAJIV, MD[†] Provider ID: N/A</p> |
| <p>PATEL, ALPA, MD[†] Provider ID: N/A</p> | <p>☐ 24022 CALLE DE LA PLATA LAGUNA HILLS, CA 92653 Effective as of 01-JAN-18</p> | <p>☐ 24022 CALLE DE LA PLATA STE 475 LAGUNA HILLS, CA 92653 Effective as of 01-APR-22</p> |
| <p>☐ 24022 CALLE DE LA PLATA STE 305 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-23</p> | <p>PRENDIVILLE, PAUL, MD Provider ID: N/A</p> | <p>RATHOD, RAJIV, MD[†] Provider ID: N/A</p> |
| <p>PATEL, ALPA, MD[†] Provider ID: N/A</p> | <p>☐ 24022 CALLE DE LA PLATA LAGUNA HILLS, CA 92653 Effective as of 01-JAN-23</p> | <p>☐ 24022 CALLE DE LA PLATA STE 475 LAGUNA HILLS, CA 92653 Effective as of 01-APR-22</p> |
| <p>☐ 24022 CALLE DE LA PLATA STE 305 LAGUNA HILLS, CA 92653 Effective as of 01-FEB-22</p> | <p>PRENDIVILLE, PAUL, MD Provider ID: N/A</p> | <p>RATHOD, RAJIV, MD[†] Provider ID: N/A</p> |
| <p>PERRY, ANGELA, MD Provider ID: N/A</p> | <p>☐ 24022 CALLE DE LA PLATA LAGUNA HILLS, CA 92653 Effective as of 01-JUL-14</p> | <p>☐ 24022 CALLE DE LA PLATA STE 475 LAGUNA HILLS, CA 92653 Effective as of 01-APR-22</p> |
| <p>☐ 23521 PASEO DE VALENCIA STE 305 LAGUNA HILLS, CA 92653 Effective as of 01-NOV-23</p> | <p>PRENDIVILLE, PAUL, MD Provider ID: N/A</p> | <p>RATHOD, RAJIV, MD[†] Provider ID: N/A</p> |
| <p>PERRY, ANGELA, MD Provider ID: N/A</p> | <p>☐ 24022 CALLE DE LA PLATA LAGUNA HILLS, CA 92653 Effective as of 01-JUL-14</p> | <p>☐ 24022 CALLE DE LA PLATA STE 475 LAGUNA HILLS, CA 92653 Effective as of 01-APR-22</p> |
| <p>☐ 23521 PASEO DE VALENCIA STE 305</p> | <p>RATHOD, RAJIV, MD[†] Provider ID: N/A</p> | <p>RATHOD, RAJIV, MD[†] Provider ID: N/A</p> |

C1. List of Network Providers
Specialty Care Physician

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 475
 LAGUNA HILLS, CA 92653
 Effective as of 01-APR-22

ROUHANI, BEHNAZ, MD

Provider ID: N/A

23961 CALLE DE LA
 MAGDALENA STE 300
 LAGUNA HILLS, CA 92653
 Effective as of 01-APR-23

ROUHANI, BEHNAZ, MD

Provider ID: N/A

23961 CALLE DE LA
 MAGDALENA STE 300
 LAGUNA HILLS, CA 92653
 Effective as of 01-OCT-23

ROUHANI, BEHNAZ, MD

Provider ID: N/A

24401 CALLE DE LA LOUISA
 STE 300
 LAGUNA HILLS, CA 92653
 Effective as of 01-SEP-19

ROUHANI, BEHNAZ, MD

Provider ID: N/A

24401 CALLE DE LA LOUISA
 STE 300
 LAGUNA HILLS, CA 92653
 Effective as of 01-SEP-19

ROUHANI, BEHNAZ, MD

Provider ID: N/A

23961 CALLE DE LA
 MAGDALENA STE 300
 LAGUNA HILLS, CA 92653
 Effective as of 01-SEP-22

SALEHI-HAD, HANI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
 STE 309

LAGUNA HILLS, CA 92653

Effective as of 01-JUN-21

SALEHI-HAD, HANI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
 STE 309
 LAGUNA HILLS, CA 92653
 Effective as of 01-JUN-21

SALEHI-HAD, HANI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
 STE 309
 LAGUNA HILLS, CA 92653
 Effective as of 01-JUN-21

SALIB, GEORGE, MD†

Provider ID: N/A

24422 AVENIDA DE LA
 CARLOTA STE 110
 LAGUNA HILLS, CA 92653
 Effective as of 01-JUN-21

SALIB, GEORGE, MD†

Provider ID: N/A

24422 AVENIDA DE LA
 CARLOTA STE 110
 LAGUNA HILLS, CA 92653
 Effective as of 01-MAR-20

SALIB, GEORGE, MD†

Provider ID: N/A

24422 AVENIDA DE LA
 CARLOTA STE 110
 LAGUNA HILLS, CA 92653
 Effective as of 01-SEP-18

SPANGGORD, HOLLY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 305
 LAGUNA HILLS, CA 92653
 Effective as of 01-NOV-14

SPANGGORD, HOLLY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 305
 LAGUNA HILLS, CA 92653
 Effective as of 01-OCT-23

SPANGGORD, HOLLY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 305
 LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-18

SPANGGORD, HOLLY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 305
 LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-19

SPANGGORD, HOLLY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 305
 LAGUNA HILLS, CA 92653
 Effective as of 01-DEC-14

TAYANI, RAMIN, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
 STE 305
 LAGUNA HILLS, CA 92653
 Effective as of 01-MAR-23

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
 LAGUNA HILLS, CA 92653
 Effective as of 01-NOV-14

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

23961 CALLE DE LA
 MAGDALENA STE 300

C1. List of Network Providers

Specialty Care Physician

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-14

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

TOMPKINS, BRETT, DO

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

TOMPKINS, BRETT, DO

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

TOMPKINS, BRETT, DO

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

WANG, YE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

WANG, YE, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

WANG, YE, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

WANG, YE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

WANG, YE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

WILLIAMS, MARK, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475

LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

WILLIAMS, MARK, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

WILLIAMS, MARK, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

WILLIAMS, MARK, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

WILLIAMS, MARK, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

YOU, TIMOTHY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

YOU, TIMOTHY, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-05

YOU, TIMOTHY, MD†

CI. List of Network Providers
Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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-OCT-22

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

CI. List of Network Providers
Specialty Care Physician

STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

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-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

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

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

C1. List of Network Providers

Specialty Care Physician

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, 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-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-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

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, 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, 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

CI. List of Network Providers

Specialty Care Physician

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

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-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-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-JAN-21

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-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-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

C1. List of Network Providers

Specialty Care Physician

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-MAR-21

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

CI. List of Network Providers

Specialty Care Physician

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

POURADIB, AMIR, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-21

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

C1. List of Network Providers

Specialty Care Physician

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-JUL-16

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-NOV-19

POLISKIE, MICHAEL, DPM†

Provider ID: N/A

23521 PASEO DE VALENCIA STE 108
LAGUNA HILLS, CA 92653

CI. List of Network Providers

Specialty Care Physician

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-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-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

C1. List of Network Providers

Specialty Care Physician

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-22

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-23

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-MAY-12

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-NOV-19

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-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-MAR-19

SINGH, SAMARJIT, MD†

C1. List of Network Providers

Specialty Care Physician

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-22

SINGH, SAMARJIT, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

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-JAN-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-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

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-OCT-23

VO, BRYAN, MD

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-12

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

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

RADIATION ONCOLOGY

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

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-JAN-18

CHAN, LINDA, MD†

C1. List of Network Providers

Specialty Care Physician

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

HARSOLIA, ASIF, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-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-JAN-23

HARSOLIA, ASIF, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

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-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-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-SEP-19

KHALEGHI DAMAVANDI, MIR

C1. List of Network Providers

Specialty Care Physician

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

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-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-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

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 112
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

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-DEC-22

HARGROVE, RACHEL, MD[†]

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

TENG, WANG, MD[†]

Provider ID: N/A

CI. List of Network Providers

Specialty Care Physician

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 231
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SYN, GENE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

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-OCT-23

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-SEP-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

C1. List of Network Providers
Specialty Care Physician

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-NOV-19

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-NOV-19

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

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

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

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

C1. List of Network Providers
Specialty Care Physician

Provider ID: N/A

23521 PASEO DE VALENCIA
 STE 108
 LAGUNA HILLS, CA 92653
 Effective as of 01-MAR-24

RAHNEMA, CYRUS, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
 STE 108
 LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-24

RAHNEMA, CYRUS, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
 STE 108
 LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-24

RAHNEMA, CYRUS, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
 STE 108
 LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-24

RAHNEMA, CYRUS, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
 STE 108
 LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-24

ROBERTSON, ELSIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 350
 LAGUNA HILLS, CA 92653
 Effective as of 01-MAR-23

ROBERTSON, ELSIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 350

LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

RONA, KAIS, MD

Provider ID: N/A

11 MAREBLU STE 200
 LAGUNA HILLS, CA 92656*
 Effective as of 01-FEB-23

SHARMA, RAHUL, DO†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 350
 LAGUNA HILLS, CA 92653
 Effective as of 01-NOV-19

SHARMA, RAHUL, DO†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 350
 LAGUNA HILLS, CA 92653
 Effective as of 01-NOV-19

SHAVER, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 350
 LAGUNA HILLS, CA 92653
 Effective as of 01-NOV-19

SHAVER, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 350
 LAGUNA HILLS, CA 92653
 Effective as of 01-NOV-19

SHAVER, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 350
 LAGUNA HILLS, CA 92653
 Effective as of 01-OCT-23

SHAVER, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 350
 LAGUNA HILLS, CA 92653
 Effective as of 01-SEP-22

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 350
 LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-18

TUNG, SHAWNDEEP, MD

Provider ID: N/A

24401 CALLE DE LA LOUISA
 STE 102
 LAGUNA HILLS, CA 92653
 Effective as of 01-JUL-21

TUNG, SHAWNDEEP, MD

Provider ID: N/A

24401 CALLE DE LA LOUISA
 STE 102
 LAGUNA HILLS, CA 92653
 Effective as of 01-JUL-21

TUNG, SHAWNDEEP, MD

Provider ID: N/A

24401 CALLE DE LA LOUISA
 STE 102
 LAGUNA HILLS, CA 92653
 Effective as of 01-JUL-21

TUNG, SHAWNDEEP, MD

Provider ID: N/A

24401 CALLE DE LA LOUISA
 STE 102
 LAGUNA HILLS, CA 92653
 Effective as of 01-JUL-21

TUNG, SHAWNDEEP, MD

Provider ID: N/A

24401 CALLE DE LA LOUISA
 STE 102

CI. List of Network Providers

Specialty Care Physician

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-JAN-23

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-OCT-23

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-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-MAY-12

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-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-NOV-12

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

C1. List of Network Providers
Specialty Care Physician

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-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-AUG-19

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

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-18

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-19

SHARMA, RAHUL, DO†

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-JAN-12

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-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-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

TENG, WANG, MD†


Provider ID: N/A

CI. List of Network Providers
Specialty Care Physician

 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23


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-OCT-22

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-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-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-OCT-22


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-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

CI. List of Network Providers

Specialty Care Physician

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 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

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-APR-22

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-OCT-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-MAY-22

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

CI. List of Network Providers

Specialty Care Physician

 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-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


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

C1. List of Network Providers

Specialty Care Physician

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 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-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

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

UROLOGY

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-JAN-23

BUI, DON, MD†

Provider ID: N/A

📍 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

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-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

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

C1. List of Network Providers

Specialty Care Physician

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-JAN-23

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-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

CI. List of Network Providers

Specialty Care Physician

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

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-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

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

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-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-DEC-23

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-FEB-20

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

CI. List of Network Providers

Specialty Care Physician

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-JAN-21

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-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-OCT-23

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-OCT-23

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-JAN-21

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

CI. List of Network Providers

Specialty Care Physician


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-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-JAN-23

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

CI. List of Network Providers

Specialty Care Physician

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

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

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

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-APR-21

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SPITZ, AARON, MD†

Provider ID: N/A

CI. List of Network Providers

Specialty Care Physician

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-OCT-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-JAN-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

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

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

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

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

CI. List of Network Providers

Specialty Care Physician

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-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-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-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

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

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

CI. List of Network Providers

Specialty Care Physician

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-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-NOV-13

MCINTOSH, ANDREW, MD†

Provider ID: N/A

30131 TOWN CENTER DR
STE 195
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAR-21

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 /

C1. List of Network Providers

Specialty Care Physician

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-OCT-23

VENEZIANO, CHRISTOPHER, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-FEB-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

C1. List of Network Providers
Specialty Care Physician

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-DEC-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

C1. List of Network Providers

Specialty Care Physician

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-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

GRAHAM, SCOTT, MD†

Provider ID: N/A

📄 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

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

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

JOHNSON, BRYCE, MD†

Provider ID: N/A

📄 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

JOHNSON, BRYCE, MD†

Provider ID: N/A

C1. List of Network Providers

Specialty Care Physician

| | | |
|--|---|---|
|  24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-DEC-21 | Effective as of 01-DEC-21 | Provider ID: N/A |
| JOHNSON, BRYCE, MD† Provider ID: N/A | KADAKIA, NIMISH, MD† Provider ID: N/A |  24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 |
|  24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-JAN-18 | Effective as of 01-SEP-23 | Effective as of 01-DEC-18 |
| JOHNSON, BRYCE, MD† Provider ID: N/A | KIM, ABRAHAM, MD† Provider ID: N/A | KIM, ABRAHAM, MD† Provider ID: N/A |
|  24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-OCT-22 | Effective as of 01-AUG-18 |  24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 |
| JOHNSON, BRYCE, MD† Provider ID: N/A | KIM, ABRAHAM, MD† Provider ID: N/A | Effective as of 01-SEP-23 |
|  24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-MAR-21 | Effective as of 01-SEP-18 | KIM, ABRAHAM, MD† Provider ID: N/A |
| JOHNSON, BRYCE, MD† Provider ID: N/A | KIM, ABRAHAM, MD† Provider ID: N/A |  24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 |
|  24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-FEB-21 | Effective as of 01-SEP-18 | Effective as of 01-JAN-24 |
| KADAKIA, NIMISH, MD† Provider ID: N/A | KIM, ABRAHAM, MD† Provider ID: N/A | KIM, ABRAHAM, MD† Provider ID: N/A |
|  24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-OCT-22 | Effective as of 01-SEP-20 |  24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 |
| KADAKIA, NIMISH, MD† Provider ID: N/A | KIM, ABRAHAM, MD† Provider ID: N/A | Effective as of 01-JAN-23 |
|  24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 | Effective as of 01-SEP-20 | KIM, ABRAHAM, MD† Provider ID: N/A |
| | KIM, ABRAHAM, MD† Provider ID: N/A |  24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 |
| |  24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 | Effective as of 01-JAN-24 |
| | KIM, ABRAHAM, MD† Provider ID: N/A | KIM, ABRAHAM, MD† Provider ID: N/A |
| |  24331 EL TORO RD STE 200 LAGUNA WOODS, CA |  24331 EL TORO RD STE 200 LAGUNA WOODS, CA |

C1. List of Network Providers
Specialty Care Physician

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-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

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-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

C1. List of Network Providers

Specialty Care Physician

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-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

C1. List of Network Providers
Specialty Care Physician

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-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

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

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

CI. List of Network Providers
Specialty Care Physician

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

C1. List of Network Providers
Specialty Care Physician

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-NOV-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-OCT-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[†]

CI. List of Network Providers
Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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-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

MAHESHWARI, ANOOP, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 219
LAKE ELSINORE, CA 92532
Effective as of 01-AUG-14

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
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

EDDOW, JIM, PT†

Provider ID: N/A

425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-20

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

C1. List of Network Providers

Specialty Care Physician

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 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-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-FEB-19

BENIK, KAREN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

C1. List of Network Providers

Specialty Care Physician

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-DEC-18

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

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

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-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-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 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 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD†

C1. List of Network Providers

Specialty Care Physician

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-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-NOV-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-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-OCT-23

KRISHNAN, PRIYANKA, MD

Provider ID: N/A

23331 EL TORO RD STE 102
LAKE FOREST, CA 92630
Effective as of 01-AUG-21

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

C1. List of Network Providers

Specialty Care Physician

JAMAL, MOHAMMAD, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-OCT-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

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-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

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-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

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

SZU, ERIC, MD

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-FEB-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

CI. List of Network Providers

Specialty Care Physician

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-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-NOV-18

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-OCT-23

DESILVA, GAYANI, MD[†]

C1. List of Network Providers

Specialty Care Physician

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

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

JAKKULA, JAGAN, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-SEP-19

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-NOV-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD

CI. List of Network Providers

Specialty Care Physician

STE 131
LAKE FOREST, CA 92630
Effective as of 01-NOV-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 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 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

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

C1. List of Network Providers

Specialty Care Physician

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-MAR-24

PANG, GARY, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-SEP-19

ANESTHESIOLOGY PAIN MANAGEMENT

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

CHEN, HAMILTON, 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-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

C1. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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, 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

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-NOV-23

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-DEC-20

HAIDER, UZMA, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-DEC-20

FAMILY PRACTICE

ZURITA, DANIELA, MD†

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586

CI. List of Network Providers
Specialty Care Physician

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

☒ 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

☒ 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-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

CI. List of Network Providers

Specialty Care Physician

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-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-MAR-21

LAC, PETER, MD†

Provider ID: N/A
☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-DEC-23

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
☒ 29878 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-MAR-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
☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
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-JUN-19

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

YAN, ERIC, MD†

Provider ID: N/A
☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-MAY-20

C1. List of Network Providers

Specialty Care Physician

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

YOUSSEF, AMR, DO[†]

Provider ID: N/A

📍 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-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-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

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

CI. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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

BARR, AUSTIN, OD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-MAR-23

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***

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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

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

KESEL, KELSEY, PT

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-MAR-24

CI. List of Network Providers

Specialty Care Physician

KESEL, KELSEY, PT

Provider ID: N/A

📄 29798 HAUN RD STE 201
MENIFEE, CA 92586
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

📄 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

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

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

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, 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-JUL-23

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

📄 29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

MEHTA, AMAL, MD†

CI. List of Network Providers

Specialty Care Physician

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-SEP-18

TRIVEDI, JANKI, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-AUG-20

TRIVEDI, JANKI, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

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

C1. List of Network Providers

Specialty Care Physician

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-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

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-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

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-FEB-23

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

C1. List of Network Providers

Specialty Care Physician

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-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

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-OCT-08

GERAYLI, AFSHIN, MD[†]

Provider ID: N/A

☒ 25982 PALA STE 280
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-JAN-16

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

☒ 25982 PALA STE 280
MISSION VIEJO, CA 92691

C1. List of Network Providers

Specialty Care Physician

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-AUG-20

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

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

25982 PALA STE 280
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

25982 PALA STE 280
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

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

C1. List of Network Providers

Specialty Care Physician

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-MAY-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 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

C1. List of Network Providers

Specialty Care Physician

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-MAY-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

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

CI. List of Network Providers

Specialty Care Physician

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


CI. List of Network Providers

Specialty Care Physician

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-DEC-02


BARRERA, JOSEPH, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691*
Effective as of 01-NOV-12


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-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


C1. List of Network Providers

Specialty Care Physician

 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-MAR-22


HOSSEINI, ALIREZA, MD[†]

Provider ID: N/A

 25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-MAR-22


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

 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-OCT-99


MULFORD, MIM, 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-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

C1. List of Network Providers

Specialty Care Physician

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-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-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-APR-11

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

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

CHU, ERIC, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 240
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

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

CI. List of Network Providers

Specialty Care Physician

26800 CROWN VALLEY
PKWY STE 475
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

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

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-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

ZABIHI, RAMIN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

GYNECOLOGY

KANALY, KIM, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

KANALY, KIM, 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-APR-11

WALLACE, PATRICIA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691
Effective as of 01-DEC-08

WALLACE, PATRICIA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

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

CI. List of Network Providers

Specialty Care Physician

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-FEB-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-JUL-21

LAZO, NELLY, MD†

Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JUL-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

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-JAN-18

REDDY, JAGADEESH, MD

Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-16

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

CI. List of Network Providers

Specialty Care Physician

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-AUG-20

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

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†

CI. List of Network Providers

Specialty Care Physician

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-OCT-23

BENDER, RICHARD, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JAN-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

CI. List of Network Providers

Specialty Care Physician

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-JAN-15

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

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†

CI. List of Network Providers

Specialty Care Physician

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

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

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-APR-23

VORA, RONAK, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

NEUROLOGY CHILD

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 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

C1. List of Network Providers

Specialty Care Physician

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 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 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 460
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

***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

C1. List of Network Providers
Specialty Care Physician

 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

C1. List of Network Providers

Specialty Care Physician

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-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

CI. List of Network Providers

Specialty Care Physician

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-NOV-21

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-NOV-21

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

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-DEC-22

AMRA, NOOR, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
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-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-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

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-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

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-FEB-08

C1. List of Network Providers

Specialty Care Physician

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-NOV-14

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

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-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

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-NOV-14

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-MAR-12

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-JAN-18

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-AUG-19

SALEHI-HAD, HANI, MD

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

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

C1. List of Network Providers

Specialty Care Physician

SALEHI-HAD, HANI, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 220
MISSION VIEJO, CA 92691

Effective as of 01-JUN-21

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

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-MAY-23

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-APR-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


CI. List of Network Providers

Specialty Care Physician

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-OCT-22


BREDENKAMP, JAMES, MD[†]

Provider ID: N/A

 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-SEP-99


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-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


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-MAR-08

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-SEP-10


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-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


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-JAN-18

CROCKETT, DENNIS, MD[†]

Provider ID: N/A

 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

C1. List of Network Providers

Specialty Care Physician

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-SEP-10

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-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

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-04

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

MUNDI, JAGMEET, 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-OCT-22

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-FEB-16

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

26726 CROWN VALLEY

C1. List of Network Providers

Specialty Care Physician

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-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-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-SEP-15

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 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

CI. List of Network Providers

Specialty Care Physician

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

26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

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

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 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-JUN-16

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-JAN-14

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-12

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

C1. List of Network Providers

Specialty Care Physician

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-SEP-19

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-DEC-20

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-OCT-18

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

CI. List of Network Providers

Specialty Care Physician

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-APR-11

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

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-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-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

CI. List of Network Providers

Specialty Care Physician

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,

CI. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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-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-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-JUN-22

FRANCIS, CATHERINE, PSYD

Provider ID: N/A
26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21

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

C1. List of Network Providers
Specialty Care Physician

 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-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


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

CI. List of Network Providers

Specialty Care Physician

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-MAY-12

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

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

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

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

27800 MEDICAL CENTER
RD STE 160
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

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


C1. List of Network Providers

Specialty Care Physician

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


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


CI. List of Network Providers

Specialty Care Physician

 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†

C1. List of Network Providers

Specialty Care Physician

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-21

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-OCT-23

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

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-MAR-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

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

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

C1. List of Network Providers

Specialty Care Physician

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-JUL-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

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

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-JUN-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

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

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-OCT-23

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

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

BACON, LOUISE, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD


CI. List of Network Providers

Specialty Care Physician

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


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


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

 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-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-OCT-23

LAM, VINH, MD†

Provider ID: N/A

 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-DEC-18

CI. List of Network Providers

Specialty Care Physician

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-SEP-22

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-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-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-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


CI. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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

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

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

C1. List of Network Providers

Specialty Care Physician

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-OCT-23

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-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-23

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

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

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

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

CI. List of Network Providers

Specialty Care Physician

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-MAR-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-APR-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-SEP-19

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230

MISSION VIEJO, CA 92691
Effective as of 01-APR-08

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

C1. List of Network Providers

Specialty Care Physician

Effective as of 01-JUL-23

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-OCT-23

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

C1. List of Network Providers

Specialty Care Physician

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-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-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-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


C1. List of Network Providers

Specialty Care Physician

 27800 MEDICAL CENTER
RD STE 138
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14


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

 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

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-FEB-23


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

C1. List of Network Providers
Specialty Care Physician

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-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-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-JAN-23

ELKHOURY, FUAD, MD

Provider ID: N/A
 26691 PLAZA STE 120
 MISSION VIEJO, CA 92691
 Effective as of 01-OCT-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

CI. List of Network Providers

Specialty Care Physician

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-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

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

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-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

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-OCT-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-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

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-JAN-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

CI. List of Network Providers

Specialty Care Physician

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

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-OCT-22

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

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-JAN-21

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-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

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

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-JUN-22

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

26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

C1. List of Network Providers

Specialty Care Physician

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

26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

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

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

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-APR-21

SINGH, KARAN, 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-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

26691 PLAZA STE 120

MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

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

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

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


CI. List of Network Providers

Specialty Care Physician

 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

 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

 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


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

 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

 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

CI. List of Network Providers

Specialty Care Physician

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-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

C1. List of Network Providers

Specialty Care Physician

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

MESSENGER, BRADLEY, MD[†]

Provider ID: N/A

39755 MURRIETA HOT SPRINGS RD BLDG G MURRIETA, CA 92563

Teleservice

Effective as of 01-FEB-22

MESSENGER, 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-SEP-18

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

CI. List of Network Providers

Specialty Care Physician

MURRIETA, CA 92563
Teleservice
Effective as of 01-MAY-20

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-MAR-20

PAREKH, NIRAJ, MD†

Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

CI. List of Network Providers

Specialty Care Physician

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-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-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

C1. List of Network Providers

Specialty Care Physician

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-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

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

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-OCT-22

HUERTA, CARMEN, NP†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-DEC-22

HUERTA, CARMEN, NP†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-MAY-22

C1. List of Network Providers

Specialty Care Physician

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
217
MURRIETA, CA 92562

Teleservice

Effective as of 01-NOV-18

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

KHERADMAND, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200

C1. List of Network Providers

Specialty Care Physician

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

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

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

CI. List of Network Providers

Specialty Care Physician

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 200
MURRIETA, CA 92562
Teleservice
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-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

C1. List of Network Providers

Specialty Care Physician

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 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-APR-17

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-FEB-18

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-APR-17

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-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-FEB-18

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

**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**

C1. List of Network Providers

Specialty Care Physician

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-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

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-APR-17

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

C1. List of Network Providers

Specialty Care Physician

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
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
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

CI. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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[†]

C1. List of Network Providers

Specialty Care Physician

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†

C1. List of Network Providers

Specialty Care Physician

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


CI. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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-JUL-19

CHIN, ERIC, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JAN-22

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-FEB-21

CHIN, ERIC, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-FEB-21

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-FEB-24

CHOW, JASON, MD†

Provider ID: N/A
25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JUL-23

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
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-SEP-22

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

CI. List of Network Providers

Specialty Care Physician

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 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
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-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-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

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-JAN-17

JOHNSON, ROGER, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562

Effective as of 01-JUL-23

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

JOSEPH, JEFFREY, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562

Effective as of 01-DEC-21

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†

C1. List of Network Providers

Specialty Care Physician

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

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

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

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

PHILLIPS, BARRATT, MD†

Provider ID: N/A

25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-AUG-18

SORENSEN, ROBERT, MD†

Provider ID: N/A

25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-DEC-21

SORENSEN, ROBERT, MD†

Provider ID: N/A

25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-JAN-22

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†

C1. List of Network Providers

Specialty Care Physician

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 105
MURRIETA, CA 92563*
Effective as of 01-JUL-23

ABDOU, RAMI, MD†

Provider ID: N/A

☐ 39755 DATE ST STE 106
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-JUN-05

FORRESTER, MICHAEL, MD†

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

CI. List of Network Providers

Specialty Care Physician

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, 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-FEB-23

PEDIATRIC CARDIOLOGY

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

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

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

CI. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers
Specialty Care Physician

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-JUL-23

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

SHIN, CHRISTOPHER, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-SEP-22

SHIN, CHRISTOPHER, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-JAN-23

CI. List of Network Providers

Specialty Care Physician

SHIN, CHRISTOPHER, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-MAY-21

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

TRANSFIGURACION SHIN, CHRISTIANNE, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-DEC-16

WELLS, JOSEPH, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-SEP-16

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

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-FEB-15

SIEN, STEFAN, DO†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-NOV-12

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

C1. List of Network Providers

Specialty Care Physician

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-DEC-22

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-AUG-22

PATEL, NIKHIL, MD†

Provider ID: N/A

25485 MEDICAL CENTER
DR STE 106
MURRIETA, CA 92562
Effective as of 01-JAN-24

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

C1. List of Network Providers

Specialty Care Physician

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

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

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

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

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

C1. List of Network Providers

Specialty Care Physician

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

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

C1. List of Network Providers

Specialty Care Physician

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, 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, 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-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

C1. List of Network Providers

Specialty Care Physician

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-23

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

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-21

POLLACK, JAMES, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-FEB-23

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

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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

521 E ELDER STREET
SUITE 202
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

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

C1. List of Network Providers

Specialty Care Physician

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-DEC-22

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

TOOMA, GHASSAN, MD†

Provider ID: N/A

📍 28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-DEC-23

TOOMA, GHASSAN, MD†

Provider ID: N/A

📍 28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-DEC-22

TOOMA, GHASSAN, MD†

C1. List of Network Providers

Specialty Care Physician

Provider ID: N/A

28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-APR-03

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-JUN-15

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-SEP-14

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-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-APR-21

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-NOV-20

C1. List of Network Providers
Specialty Care Physician

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

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JAN-24

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-MAY-20

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-OCT-15

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-MAY-23

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†

CI. List of Network Providers

Specialty Care Physician

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-MAY-23

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-FEB-22

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

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

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-JUN-15

VEMULAPALLI, SREENIVAS, MD†

Provider ID: N/A

25495 MEDICAL CENTER

C1. List of Network Providers

Specialty Care Physician

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-OCT-14

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-MAY-20

VEMULAPALLI, SREENIVAS, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-DEC-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-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-JUL-23

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-JAN-21

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-SEP-22

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-AUG-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

C1. List of Network Providers

Specialty Care Physician

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-JAN-21

PANDHI, JAY, MD†

Provider ID: N/A

📍 655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-MAR-20

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 STE 4
NATIONAL CITY, CA 91950
Effective as of 01-NOV-23

LY, NANCY, MD

Provider ID: N/A

📍 1415 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-JUN-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-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-AUG-23

PANDHI, JAY, MD†

CI. List of Network Providers

Specialty Care Physician

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

502 EUCLID AVE STE 104
NATIONAL CITY, CA 91950
Effective as of 01-JAN-23

WYSOCZANSKI, MARIUSZ, MD

Provider ID: N/A

1415 E 8TH ST STE 8
NATIONAL CITY, CA 91950
Effective as of 01-JUN-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

C1. List of Network Providers

Specialty Care Physician

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 401
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-21

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-JAN-21

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-JUL-22

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 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

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

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 304
NATIONAL CITY, CA 91950
Teleservice
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-JAN-21

GONZALEZ, JOSE, MD†

Provider ID: N/A
📍 655 EUCLID AVE STE 304

C1. List of Network Providers

Specialty Care Physician

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 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUL-22

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-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 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUL-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

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-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

UEBELHOER, NATHAN, DO†

Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

EMERGENCY MEDICINE

TABILA, BRIAN, MD†

Provider ID: N/A
610 EUCLID AVE STE 202
NATIONAL CITY, CA 91950

CI. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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-JUL-22

CALDERON MOLINA, JUAN, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-NOV-23

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-JAN-21

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-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

C1. List of Network Providers

Specialty Care Physician

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-NOV-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

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-MAR-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-JAN-21

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Effective as of 01-SEP-22

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

C1. List of Network Providers

Specialty Care Physician

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-22

HUDSON, HENRY, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

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-JAN-22

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-NOV-21

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

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

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-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-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-APR-22

PAPASTERGIOU, GEORGIOS, MD†

Provider ID: N/A

1520 E PLAZA BLVD
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-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

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

C1. List of Network Providers

Specialty Care Physician

NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

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

C1. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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

NGUYEN, HAN, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-JUN-23

SANICOLAS, MARIA THERESA, DPM†

Provider ID: N/A

610 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

SANICOLAS, MARIA THERESA, DPM†

Provider ID: N/A

610 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

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-APR-23

TSAI, GRACE, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-FEB-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

C1. List of Network Providers Specialty Care Physician

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

C1. List of Network Providers


Specialty Care Physician

 400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-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-DEC-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-OCT-18

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-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-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

 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-24

FAZEL, NASIM, MD

Provider ID: N/A

C1. List of Network Providers

Specialty Care Physician

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-24

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

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

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-SEP-18

FOREMAN, TANYA, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-17

FOREMAN, TANYA, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-15

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

C1. List of Network Providers
Specialty Care Physician

1441 AVOCADO AVE STE
 409
 NEWPORT BEACH, CA
 92660

Effective as of 01-NOV-23

HENDERSON, GREGORY, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
 309
 NEWPORT BEACH, CA
 92660

Effective as of 01-NOV-23

KAMEL, JOSEPH, DO

Provider ID: N/A

360 SAN MIGUEL DR STE
 501
 NEWPORT BEACH, CA
 92660

Effective as of 01-APR-23

KAMEL, JOSEPH, DO

Provider ID: N/A

360 SAN MIGUEL DR STE
 501
 NEWPORT BEACH, CA
 92660

Effective as of 01-MAR-24

KAMEL, JOSEPH, DO

Provider ID: N/A

360 SAN MIGUEL DR STE
 501
 NEWPORT BEACH, CA
 92660

Effective as of 01-MAR-24

**KARAVAN JAHROMI, MAHSA,
 MD†**

Provider ID: N/A

1401 AVOCADO AVE STE
 703
 NEWPORT BEACH, CA
 92660

Effective as of 01-SEP-19

KHERADMAND, SHIVA, DO†

Provider ID: N/A

240 NEWPORT CENTER DR
 STE 105
 NEWPORT BEACH, CA
 92660

Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

Provider ID: N/A

240 NEWPORT CENTER DR
 STE 105
 NEWPORT BEACH, CA
 92660

Effective as of 01-DEC-21

LANDER, JEFFREY, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
 703
 NEWPORT BEACH, CA
 92660

Effective as of 01-DEC-22

LANDER, JEFFREY, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
 806
 NEWPORT BEACH, CA
 92660

Effective as of 01-DEC-22

LANDER, JEFFREY, MD†

Provider ID: N/A

400 NEWPORT CENTER
 DR STE 602
 NEWPORT BEACH, CA
 92660

Effective as of 01-DEC-22

LANDER, JEFFREY, MD†

Provider ID: N/A

1401 AVOCADO AVE STE

703

NEWPORT BEACH, CA
 92660

Effective as of 01-DEC-21

LANDER, JEFFREY, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
 703
 NEWPORT BEACH, CA
 92660

Effective as of 01-DEC-21

LANDER, JEFFREY, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
 806
 NEWPORT BEACH, CA
 92660

Effective as of 01-AUG-22

LANDER, JEFFREY, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
 806
 NEWPORT BEACH, CA
 92660

Effective as of 01-AUG-22

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

C1. List of Network Providers

Specialty Care Physician

LANDER, JEFFREY, MD†

Provider ID: N/A

📍 1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

LANDER, JEFFREY, MD†

Provider ID: N/A

📍 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-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-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

📍 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-JUL-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

📍 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-OCT-23

LEVIN, JACQUELINE, DO†

Provider ID: N/A

📍 400 NEWPORT CENTER
DR STE 702
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-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

C1. List of Network Providers

Specialty Care Physician

LIEM, WIEKE, MD†

Provider ID: N/A

📍 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

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-OCT-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-JAN-23

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-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-JUN-19

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

NAMI, NAVID, DO†

Provider ID: N/A

📍 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-18

C1. List of Network Providers

Specialty Care Physician

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-SEP-19

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-JAN-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-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-APR-21

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-FEB-23

NAMI, NAVID, DO[†]

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-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

NGUYEN, DENNIS, MD[†]

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660


Effective as of 01-FEB-23

CI. List of Network Providers

Specialty Care Physician

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-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-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-MAY-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

ROSHDIEH, BABAK, MD†


Provider ID: N/A

 1401 AVOCADO AVE STE 703
NEWPORT BEACH, CA 92660

Effective as of 01-JAN-23

ROSHDIEH, BABAK, MD†

Provider ID: N/A

 1401 AVOCADO AVE STE 703
NEWPORT BEACH, CA 92660

Effective as of 01-MAY-22

CI. List of Network Providers

Specialty Care Physician

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-OCT-23

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

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

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

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-JUN-21

C1. List of Network Providers

Specialty Care Physician

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-NOV-20

GASTROENTEROLOGY

SAINI, SURINDER, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
807
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-12

SAINI, SURINDER, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
807
NEWPORT BEACH, CA
92660

Effective as of 01-APR-11

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-JAN-11

SUGIHARA, CORINNE, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
608
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-11

OPHTHALMOLOGY

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

C1. List of Network Providers

Specialty Care Physician

DR STE 605
NEWPORT BEACH, CA
92660
Effective as of 01-OCT-22

AGARWAL, MADHU, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660
Effective as of 01-APR-23

AGARWAL, MADHU, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660
Effective as of 01-APR-23

CIES, WILLIAM, MD

Provider ID: N/A
360 SAN MIGUEL DR STE
407
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-JAN-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-OCT-23

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

EIFRIG, CHARLES WILLIAM, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660
Effective as of 01-DEC-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

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

C1. List of Network Providers

Specialty Care Physician

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-JAN-18

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-JAN-20

LIU, WENJING, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
410
NEWPORT BEACH, CA
92660
Effective as of 01-OCT-22

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

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-DEC-20

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

C1. List of Network Providers
Specialty Care Physician

***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

C1. List of Network Providers


Specialty Care Physician

 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

C1. List of Network Providers
Specialty Care Physician

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-JUL-12

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

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

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

ROSING, JAMES, MD

Provider ID: N/A

1441 AVOCADO AVE STE
 708
 NEWPORT BEACH, CA
 92660

CI. List of Network Providers

Specialty Care Physician

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-APR-11

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

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-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-NOV-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

C1. List of Network Providers

Specialty Care Physician

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-DEC-23

LAWSON, ERIN, MD

Provider ID: N/A

📍 3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Effective as of 01-JUL-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

📍 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-FEB-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

📍 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

BALDWIN, ANDREA, NP†

Provider ID: N/A

📍 818 PIER VIEW WAY

CI. List of Network Providers

Specialty Care Physician

OCEANSIDE, CA 92054
Effective as of 01-JAN-24

BALDWIN, ANDREA, NP†

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-NOV-22

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

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-FEB-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

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

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

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

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

818 PIER VIEW WAY
OCEANSIDE, CA 92054
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

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

C1. List of Network Providers

Specialty Care Physician

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

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

PRITZKER, JOELY, NP

Provider ID: N/A

517 N HORNE ST
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

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

CI. List of Network Providers

Specialty Care Physician

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

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

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-NOV-20

ANGRA, KUNAL, 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-SEP-22

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-JUL-22

GILBOA, RUTH, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20

LEE, HELEN, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-AUG-22

LEE, HELEN, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-NOV-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

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

C1. List of Network Providers

Specialty Care Physician

ROSS, ANDREW, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

SAMADY, JOSEPH, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

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-APR-07

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-AUG-20

SAMADY, JOSEPH, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-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-JUL-22

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

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-AUG-20

VENKAT, ARUN, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-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-SEP-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

C1. List of Network Providers

Specialty Care Physician

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

818 PIER VIEW WAY
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

517 N HORNE ST
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


C1. List of Network Providers

Specialty Care Physician

 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-JAN-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-JUL-22


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-JUL-23


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


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-FEB-10


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-JAN-21

SHIM, MICHAEL, MD†

Provider ID: N/A

 3923 WARING RD STE A

C1. List of Network Providers

Specialty Care Physician

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-SEP-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-SEP-21

KHARADJIAN, TALAR, MD†

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-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

517 N HORNE ST
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

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

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

CI. List of Network Providers

Specialty Care Physician

CRUZ, VANESSA, LCSW

Provider ID: N/A

📍 517 N HORNE ST
OCEANSIDE, CA 92054
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

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

📍 818 PIER VIEW WAY
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

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054
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

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

📍 818 PIER VIEW WAY
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

📍 4700 N RIVER RD
OCEANSIDE, CA 92057
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

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

📍 818 PIER VIEW WAY
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


C1. List of Network Providers

Specialty Care Physician

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

 4700 N RIVER RD
OCEANSIDE, CA 92057
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

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

C1. List of Network Providers

Specialty Care Physician

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-SEP-21

SMITH, MARK, MD[†]

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-FEB-10

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-OCT-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

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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

2210 MESA DR STE 5
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

605 CROUCH ST
OCEANSIDE, CA 92054

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

3220 MISSION AVE STE 1
OCEANSIDE, CA 92058

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

CI. List of Network Providers Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Teleservice
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

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

3907 WARING RD STE 2
OCEANSIDE, CA 92056
Effective as of 01-AUG-23

CORONA, FRANK, MD

Provider ID: N/A

3231 WARING CT STE D
OCEANSIDE, CA 92056
Effective as of 01-JUN-99

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, BARBARA, PT

Provider ID: N/A

457 COLLEGE BLVD STE 6
OCEANSIDE, CA 92057
Effective as of 01-FEB-24

BOUTELLE, DAVID, PT

Provider ID: N/A

467 COLLEGE BLVD STE 6
OCEANSIDE, CA 92057
Effective as of 01-DEC-21

CI. List of Network Providers

Specialty Care Physician

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-JAN-21

DEEMER, ANDREW, MD†

Provider ID: N/A

3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-SEP-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

CI. List of Network Providers

Specialty Care Physician

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

WAKILY, HUSSNA, MD[†]

Provider ID: N/A

 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-SEP-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-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

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

GUERENA, MICHAEL, MD[†]

Provider ID: N/A

 3609 VISTA WAY
OCEANSIDE, CA 92056

Effective as of 01-SEP-21

PHILLIPS, JASON, MD[†]

Provider ID: N/A

 3907 WARING RD STE 4
OCEANSIDE, CA 92056

Effective as of 01-SEP-21

PHILLIPS, JASON, MD[†]

Provider ID: N/A

 3609 VISTA WAY
OCEANSIDE, CA 92056

Effective as of 01-JAN-15

SHAPIRO, ROBERT, MD

Provider ID: N/A

 3609 VISTA WAY
OCEANSIDE, CA 92056

C1. List of Network Providers

Specialty Care Physician

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-SEP-21

VILCHIS, CAROLINE, MD[†]

Provider ID: N/A

📍 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-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-JAN-21

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

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

C1. List of Network Providers

Specialty Care Physician

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-NOV-23

CELANO, NICHOLAS, MD

Provider ID: N/A

15725 POMERADO RD STE

CI. List of Network Providers

Specialty Care Physician

102
POWAY, CA 92064
Effective as of 01-JAN-24

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-DEC-22

SCHNEIDER, DARIUS, MD

Provider ID: N/A
15525 POMERADO RD STE
A1
POWAY, CA 92064
Effective as of 01-JAN-23

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-JAN-23

REDDY, SMITHA, MD†

Provider ID: N/A
15725 POMERADO RD STE
117

C1. List of Network Providers
Specialty Care Physician

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-SEP-22

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-JAN-21

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

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

C1. List of Network Providers

Specialty Care Physician

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-JUL-22

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-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†

C1. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-AUG-12

GUIDE, SHIREEN, MD†

Provider ID: N/A

229829 SANTA MARGARITA
PKWY STE 500
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-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

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

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-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

WANG, JAMES, MD†

Provider ID: N/A

29833 SANTA MARGARITA
PKWY STE 100

CI. List of Network Providers

Specialty Care Physician

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

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

C1. List of Network Providers

Specialty Care Physician

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-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

GERAYLI, AFSHIN, MD†

Provider ID: N/A
647 CAMINO DE LOS
MARES STE 223
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-19

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-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

C1. List of Network Providers

Specialty Care Physician

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

DRURY, PAUL, MD[†]

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-SEP-19

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-NOV-19

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

CARLIN, CHRISTOPHER, MD[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

CI. List of Network Providers

Specialty Care Physician

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

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

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-SEP-18

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-MAR-23

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-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

CI. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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 103
SAN CLEMENTE, CA 92673

Effective as of 01-FEB-23

BANUELOS, LYDIA, MD[†]

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 107
SAN CLEMENTE, CA 92673

Effective as of 01-DEC-22

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-MAR-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

CI. List of Network Providers
Specialty Care Physician

Provider ID: N/A

653 CAMINO DE LOS MARES STE 103
 SAN CLEMENTE, CA 92673
 Effective as of 01-JAN-24

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-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-MAR-10

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

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-JAN-15

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO LOS MARES 107
 SAN CLEMENTE, CA 92673
 Effective as of 01-APR-11

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


CI. List of Network Providers

Specialty Care Physician

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†

CI. List of Network Providers

Specialty Care Physician

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-NOV-14

CI. List of Network Providers

Specialty Care Physician

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-JAN-18

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

C1. List of Network Providers
Specialty Care Physician

 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

C1. List of Network Providers

Specialty Care Physician

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

📍 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

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 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

ALKATIB, RHONDA, MD†

Provider ID: N/A

📍 2655 CAMINO DEL RIO N
STE 120

SAN DIEGO, CA 92108

Effective as of 01-SEP-22

COHEN, GARY, MD

Provider ID: N/A

📍 9833 PACIFIC HEIGHTS
BLVD STE J

SAN DIEGO, CA 92121

Effective as of 01-OCT-95

COHEN, GARY, MD

Provider ID: N/A

📍 9833 PACIFIC HEIGHTS
BLVD STE J

SAN DIEGO, CA 92121

Effective as of 01-FEB-07

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

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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

200 W ARBOR DR
SAN DIEGO, CA 92103
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

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

C1. List of Network Providers

Specialty Care Physician

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

LENER, JONATHAN, MD

Provider ID: N/A

412 WASHINGTON ST
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

LENER, JONATHAN, MD

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

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-JAN-21

MAI, TUAN, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512

SAN DIEGO, CA 92103

Effective as of 01-MAR-20

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-NOV-12

CHUNG, KIYON, MD†

Provider ID: N/A

4060 4TH AVE STE 650

CI. List of Network Providers

Specialty Care Physician

SAN DIEGO, CA 92103
Effective as of 01-JUL-22

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

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

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-MAR-13

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, TRI, MD†

Provider ID: N/A

4206 44TH ST
SAN DIEGO, CA 92115*
Teleservice
Effective as of 01-SEP-22

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

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†

C1. List of Network Providers

Specialty Care Physician

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

2131 3RD AVE
SAN DIEGO, CA 92101
Effective as of 01-DEC-23

DURAN, EDWARD, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
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

C1. List of Network Providers

Specialty Care Physician

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-MAY-11

KERAMATI, SHAHIN, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

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

CI. List of Network Providers

Specialty Care Physician

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

412 WASHINGTON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-23

SHAH, KULIN, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

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

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JAN-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

412 WASHINGTON ST
SAN DIEGO, CA 92103

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†**

C1. List of Network Providers

Specialty Care Physician

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

4910 DIRECTORS PL
SAN DIEGO, CA 92121

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

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131

Effective as of 01-MAR-21

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

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

4910 DIRECTORS PL
SAN DIEGO, CA 92121

Effective as of 01-FEB-24

JULIAN, FIDES, LAC†

Provider ID: N/A

9333 GENESEE AVE STE
200
SAN DIEGO, CA 92121

Effective as of 01-MAR-21

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

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

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

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

CI. List of Network Providers

Specialty Care Physician

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

9333 GENESEE AVE
SAN DIEGO, CA 92121
Effective as of 01-DEC-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

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

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

ASHMAN, ELLEN, NP†

Provider ID: N/A

4520 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

C1. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

ERICKSON, LISA, NP†

Provider ID: N/A

200 W ARBOR DR
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

CI. List of Network Providers

Specialty Care Physician

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

📍 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-AUG-22

C1. List of Network Providers

Specialty Care Physician

JENKINS, ERIN, NP

Provider ID: N/A

4510 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

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

KI, TRISH, NP†

Provider ID: N/A

6973 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

16950 VIA TAZON
SAN DIEGO, CA 92127
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

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

CI. List of Network Providers

Specialty Care Physician

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-MAY-21

MOONEY, PATRICIA, NP†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JAN-24

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

C1. List of Network Providers

Specialty Care Physician

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

9995 CARMEL MOUNTAIN
RD STE B10-B11

SAN DIEGO, CA 92129

Effective as of 01-JAN-21

ORPILLA, IMELDA, NP

Provider ID: N/A

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Effective as of 01-AUG-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

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Effective as of 01-SEP-22

QUINTO, CINDY, NP

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

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

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-OCT-23

C1. List of Network Providers

Specialty Care Physician

REAL, MARIA, NP

Provider ID: N/A

4171 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

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

SABIN, NANCY, NP

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

SALINAS, NIECEL, NP†

Provider ID: N/A

200 W ARBOR DR

CI. List of Network Providers

Specialty Care Physician

SAN DIEGO, CA 92103
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

SALOTTI, JOANIE, NP†

Provider ID: N/A

📍 4510 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

📍 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

SMITH, JENNIFER, NP†

Provider ID: N/A

📍 4520 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

C1. List of Network Providers

Specialty Care Physician

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

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

WIETZKE, MATTHEW, NP

Provider ID: N/A

200 W ARBOR DR
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

CI. List of Network Providers

Specialty Care Physician

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

WONG, MAYBELLE, NP

Provider ID: N/A

350 DICKINSON ST
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

C1. List of Network Providers

Specialty Care Physician

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

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
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

📍 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

📍 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

ELY-KONOSKE, RACHEL, CRNM

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
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

CI. List of Network Providers

Specialty Care Physician

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

📍 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126
Effective as of 01-AUG-22

GILIBERTO, JOSEPH, DC†

Provider ID: N/A

📍 9995 CARMEL MOUNTAIN
RD STE D
SAN DIEGO, CA 92129
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

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

LE, BRANDON, DC

Provider ID: N/A

📍 4290 POLK AVE
SAN DIEGO, CA 92105
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-JUL-21

ANGRA, KUNAL, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 415
SAN DIEGO, CA 92103

C1. List of Network Providers

Specialty Care Physician

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

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-MAR-20

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-JUN-18

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

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

C1. List of Network Providers

Specialty Care Physician

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
350
SAN DIEGO, CA 92121

Effective as of 01-JAN-21

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

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

6386 ALVARADO CT STE
209
SAN DIEGO, CA 92120

Effective as of 01-FEB-22

HAN, AMY, MD

Provider ID: N/A

4060 4TH AVE STE 209
SAN DIEGO, CA 92103

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-JAN-21

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-SEP-22

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

C1. List of Network Providers

Specialty Care Physician

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

📍 6386 ALVARADO CT STE
209
SAN DIEGO, CA 92120
Effective as of 01-FEB-22

MAFONG, ERICK, MD

Provider ID: N/A

📍 4060 4TH AVE STE 209
SAN DIEGO, CA 92103
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

📍 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

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


C1. List of Network Providers

Specialty Care Physician

 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-NOV-23

ZUBAIR, RAHEEL, MD

Provider ID: N/A

 9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

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

C1. List of Network Providers

Specialty Care Physician

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
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

IYENGAR, RAVI, MD

Provider ID: N/A
4168 FRONT ST
SAN DIEGO, CA 92103

CI. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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-MAR-15

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-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-SEP-15

DESTA, TADDESE, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-JAN-14

DESTA, TADDESE, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-JAN-21

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-JAN-23

NOVO, MEGAN, MD

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-MAY-23

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-AUG-20

REDDY, JOSEPH, MD†

C1. List of Network Providers

Specialty Care Physician

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-SEP-15

SCHAEFFER, CYNTHIA, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-APR-21

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

SHAFFER, KATHERINE, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-MAR-19

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

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SYAL, GAURAV, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

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

THOMAS, CARLTON, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

YOUSSEF, FADY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

YOUSSEF, FADY, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

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

CI. List of Network Providers Specialty Care Physician

GYNECOLOGIC ONCOLOGY

BAHADOR, AFSHIN, MD

Provider ID: N/A

📍 5030 CAMINO DE LA SIESTA STE 204
SAN DIEGO, CA 92108
Effective as of 01-APR-23

DUGGAN, BRIDGETTE, MD

Provider ID: N/A

📍 5030 CAMINO DE LA SIESTA STE 204
SAN DIEGO, CA 92108
Effective as of 01-MAY-23

NYAKUDARIKA, NATSAI, MD

Provider ID: N/A

📍 5030 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 STE 101
SAN DIEGO, CA 92120
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

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
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

DAVIS, KELLE, MA†

Provider ID: N/A

📍 9340 CLAIREMONT MESA BLVD STE D
SAN DIEGO, CA 92123
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-JUL-22

BASERI, BABAK, MD†

Provider ID: N/A

📍 3965 5TH AVE STE 230
SAN DIEGO, CA 92103*

C1. List of Network Providers

Specialty Care Physician

Effective as of 01-APR-23

BESSUDO, ALBERTO, MD†

Provider ID: N/A

☐ 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Teleservice

Effective as of 01-NOV-21

BESSUDO, ALBERTO, MD†

Provider ID: N/A

☐ 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Teleservice

Effective as of 01-JAN-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-JUL-22

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-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


C1. List of Network Providers

Specialty Care Physician

 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-APR-23


SAUNDERS, PHILLIP, DO†

Provider ID: N/A

 3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-NOV-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

SCHWERKOSKE, JOHN, MD†


Provider ID: N/A

 3965 5TH AVE STE 230

SAN DIEGO, CA 92103
Effective as of 01-SEP-22


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


RUBENSIK, TAMARA, MD†

Provider ID: N/A

 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-21

RUBENSIK, TAMARA, MD†


Provider ID: N/A

 200 W ARBOR DR
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

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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
6402 EL CAJON BLVD STE
100&102
SAN DIEGO, CA 92115

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

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

C1. List of Network Providers

Specialty Care Physician

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

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-JAN-24

TRIVEDI, MEHUL, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

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

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-21

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

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

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

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

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-SEP-23

INTERVENTIONAL

CI. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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-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

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-FEB-23

TITOVA, ANASTASIA, LPCC
Provider ID: N/A
4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-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†

C1. List of Network Providers

Specialty Care Physician

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

200 W ARBOR DR
SAN DIEGO, CA 92103
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

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

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

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

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

BEHREND, TERRY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

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

C1. List of Network Providers

Specialty Care Physician

SAN DIEGO, CA 92123
Effective as of 01-SEP-21

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

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-SEP-20

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-NOV-23

DAVIS, JASON, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

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-JUL-22

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

HAMMES, JOHN, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103*
Effective as of 01-JAN-24

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

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-SEP-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

C1. List of Network Providers

Specialty Care Physician

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-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-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

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

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

C1. List of Network Providers

Specialty Care Physician

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-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

KHAMISHON, BORIS, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2301
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

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

CI. List of Network Providers

Specialty Care Physician

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
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAR-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
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
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ALEXANDER, SINDU, MD[†]

Provider ID: N/A
330 LEWIS ST
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

C1. List of Network Providers

Specialty Care Physician

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

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

CARDENAS, MICHAEL, MD†

Provider ID: N/A

4168 FRONT ST
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

6030 VILLAGE WAY
SAN DIEGO, CA 92130
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

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

6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

CI. List of Network Providers

Specialty Care Physician

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

📍 6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-DEC-23

MACKAY, GILLIAN, MD

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-DEC-23

MELENDEZ, ARIANA, MD

Provider ID: N/A

📍 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

MELENDEZ, ARIANA, MD

Provider ID: N/A

📍 200 W ARBOR DR
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

C1. List of Network Providers

Specialty Care Physician

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

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

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


C1. List of Network Providers

Specialty Care Physician

 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

 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

ARNETT, JUSTIN, MD


Provider ID: N/A

 3020 CHILDRENS WAY

SAN DIEGO, CA 92123
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


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


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

 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-MAY-23


AVALLONE, THOMAS, MD

Provider ID: N/A

 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-MAR-24

BINDER, NICHOLAS, MD†

Provider ID: N/A

 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-MAR-18

C1. List of Network Providers

Specialty Care Physician

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

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

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

BOLO, KYLE, MD

Provider ID: N/A

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
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-JUL-21

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-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-JAN-21

GUALTIERI, CHRISTOPHER, MD†

Provider ID: N/A

3969 4TH AVE STE 300
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

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-JAN-22

C1. List of Network Providers

Specialty Care Physician

HUDSON, HENRY, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-APR-23

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-OCT-21

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-SEP-22

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-JUN-18

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

C1. List of Network Providers

Specialty Care Physician

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, SARJAN, MD†

Provider ID: N/A
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-AUG-20

PATEL, SARJAN, MD†

Provider ID: N/A
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-14

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-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, GITANE, MD†

Provider ID: N/A
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

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
4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-JAN-24

PHAN, RYAN, MD†

Provider ID: N/A
10737 CAMINO RUIZ
SAN DIEGO, CA 92126
Effective as of 01-SEP-22

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
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

PRABHU, SUJATA, MD†

C1. List of Network Providers

Specialty Care Physician

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-AUG-20

PRABHU, SUJATA, MD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-DEC-20

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

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 S
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

ROBINSON, FANE, MD†

Provider ID: N/A

7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123
Effective as of 01-SEP-15

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-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

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

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121

C1. List of Network Providers

Specialty Care Physician

Effective as of 01-FEB-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-DEC-22

YAMADA, KENTARO, MD†

Provider ID: N/A

📍 1040 UNIVERSITY AVE STE
B209A
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

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

CI. List of Network Providers

Specialty Care Physician

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

10737 CAMINO RUIZ STE
215-220
SAN DIEGO, CA 92126
Effective as of 01-JAN-21

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

JOMOC, CAITLIN, OD

Provider ID: N/A

200 W ARBOR DR

SAN DIEGO, CA 92103
Effective as of 01-FEB-24

JOMOC, CAITLIN, OD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
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

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-DEC-22

MARR, RYAN, OD

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
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


C1. List of Network Providers

Specialty Care Physician

 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

 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-SEP-23


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

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


CI. List of Network Providers

Specialty Care Physician

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

 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
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


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

 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
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

 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

C1. List of Network Providers

Specialty Care Physician

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

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
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

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

C1. List of Network Providers

Specialty Care Physician

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

MAGIT, ANTHONY, 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

200 W ARBOR DR
SAN DIEGO, CA 92103

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

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

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

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

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

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-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

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

C1. List of Network Providers

Specialty Care Physician

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

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
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

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


CI. List of Network Providers

Specialty Care Physician

 330 LEWIS ST STE 202
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


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

 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

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†

CI. List of Network Providers

Specialty Care Physician

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-22

GAVRILYUK, OLEG, MD†

Provider ID: N/A

📍 6699 ALVARADO RD STE
2302
SAN DIEGO, CA 92120
Effective as of 01-SEP-20

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

📍 3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Effective as of 01-JAN-21

ABRAHAMSEN, KELSEY, PA

Provider ID: N/A

C1. List of Network Providers

Specialty Care Physician

555 W C ST STE 102
SAN DIEGO, CA 92101
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

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

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

11770 BERNARDO PLAZA
CT STE 270

C1. List of Network Providers

Specialty Care Physician

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-JUL-21

GUTH, CARA, PA†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-JAN-24

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

4551 EL CAJON BLVD
SAN DIEGO, CA 92115
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

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

C1. List of Network Providers

Specialty Care Physician

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-NOV-23

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

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

NGUYEN, THUY-VY, PA†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-AUG-22

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†

CI. List of Network Providers

Specialty Care Physician

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-NOV-23

TAYLOR, RYAN, PA

Provider ID: N/A

9333 GENESEE AVE STE
350

C1. List of Network Providers

Specialty Care Physician

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-JAN-24

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

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Effective as of 01-APR-21

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

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

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

ALMIRANTE, MARIA, DPM

Provider ID: N/A

1016 OUTER RD

C1. List of Network Providers

Specialty Care Physician

SAN DIEGO, CA 92154
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

C1. List of Network Providers

Specialty Care Physician

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

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

ROMERO, CAMILA, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

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

C1. List of Network Providers


Specialty Care Physician

 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-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

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


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


C1. List of Network Providers

Specialty Care Physician

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-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


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

CI. List of Network Providers

Specialty Care Physician

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 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

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

CI. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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†

CI. List of Network Providers

Specialty Care Physician

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

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

C1. List of Network Providers

Specialty Care Physician

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

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

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

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

C1. List of Network Providers

Specialty Care Physician

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-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

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

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

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

MUNOZ PINEDA, JORGE, MD

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

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

C1. List of Network Providers

Specialty Care Physician

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


C1. List of Network Providers

Specialty Care Physician

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-JAN-21

STRAKA, CHRISTOPHER, MD†

Provider ID: N/A

 16918 DOVE CANYON RD

CI. List of Network Providers

Specialty Care Physician

STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-APR-23

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
📍 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

AGANOVIC, LEJLA, MD

Provider ID: N/A
📍 408 DICKINSON ST
SAN DIEGO, CA 92103
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

CI. List of Network Providers

Specialty Care Physician

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

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

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

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

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

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

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

330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

CARSWELL, AIMEE, MD

Provider ID: N/A

330 LEWIS ST

SAN DIEGO, CA 92103
Effective as of 01-DEC-23

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

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CHANG, JENNIFER, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

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

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

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

C1. List of Network Providers

Specialty Care Physician

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

408 DICKINSON ST
SAN DIEGO, CA 92103
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

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

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

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

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

CHUNG, CHRISTINE, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
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

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

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

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

CI. List of Network Providers

Specialty Care Physician

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 92120
Effective as of 01-FEB-24

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
330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

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

CI. List of Network Providers

Specialty Care Physician

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

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

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

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

HSIAO, ALBERT, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HUANG, BRADY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

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

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

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

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

330 LEWIS ST
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

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

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

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

6655 ALVARADO RD
SAN DIEGO, CA 92120

C1. List of Network Providers

Specialty Care Physician

Effective as of 01-FEB-24

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

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

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

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

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

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

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

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

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

LIM, VIVIAN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

MAREK BYKOWSKI, JULIE, MD

Provider ID: N/A

6655 ALVARADO RD

CI. List of Network Providers

Specialty Care Physician

SAN DIEGO, CA 92120
Effective as of 01-FEB-24

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

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

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

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

MCNAMEE, CAIRINE, MD

Provider ID: N/A

📍 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

MCNAMEE, CAIRINE, MD

Provider ID: N/A

📍 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

MCNAMEE, CAIRINE, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

MCNAMEE, CAIRINE, MD[†]

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

MCNAMEE, CAIRINE, MD[†]

Provider ID: N/A

📍 330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

NORBASH, ALEXANDER, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

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

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

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-FEB-22

OBOYLE, MARY, MD[†]

C1. List of Network Providers

Specialty Care Physician

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

OBOYLE, MARY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

OJEDA-FOURNIER, HAYDEE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

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

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

PATHRIA, MINI, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

RAKOW-PENNER, REBECCA, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

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

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

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

CI. List of Network Providers

Specialty Care Physician

RITCHIE, DAVID, MD

Provider ID: N/A

330 LEWIS ST
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

SADAT, SAYED, DO

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

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

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SEARLEMAN, ADAM, MD

Provider ID: N/A

330 LEWIS ST
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

6655 ALVARADO RD

SAN DIEGO, CA 92120
Effective as of 01-FEB-24

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

SPENGLER, NATHAN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

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

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

C1. List of Network Providers

Specialty Care Physician

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

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

THOMPSON, COLE, 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

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

3366 5TH AVE
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
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, JOHN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

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

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

CI. List of Network Providers Specialty Care Physician

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

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

RUBENSTEIN, KELLY, RD

Provider ID: N/A

📍 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

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

📍 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

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

C1. List of Network Providers

Specialty Care Physician

STE 120
SAN DIEGO, CA 92131
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

5677 OBERLIN DR STE 106
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

FUREY, CINDY, PT

Provider ID: N/A

5555 RESERVOIR DR STE

300
SAN DIEGO, CA 92120
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-AUG-23

PAPA, AMY, PT

Provider ID: N/A

4445 EASTGATE MALL STE
103
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

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

CI. List of Network Providers

Specialty Care Physician

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

📍 11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127
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

📍 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123
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

📍 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123
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

📍 7510 CLAIREMONT MESA
BLVD STE 102
SAN DIEGO, CA 92111
Effective as of 01-APR-22

CI. List of Network Providers

Specialty Care Physician

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

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

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

9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

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

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

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

THOMPSON, DANIELLE, SP

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

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

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-DEC-21

EISENSTEIN, SAMUEL, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

C1. List of Network Providers

Specialty Care Physician

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

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

LOPEZ, NICOLE, 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

📍 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

C1. List of Network Providers

Specialty Care Physician

 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

 6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Effective as of 01-FEB-24


**CASILLAS BERUMEN, SERGIO,
MD**
Provider ID: N/A

 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
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-DEC-17


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-JAN-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-JUL-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

 200 W ARBOR DR
SAN DIEGO, CA 92103
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

JINDAL, RISHI, MD†
Provider ID: N/A

CI. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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-JAN-14

SISE, MICHAEL, MD†

Provider ID: N/A

550 WASHINGTON ST STE
641

SAN DIEGO, CA 92103

Effective as of 01-FEB-07

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


CI. List of Network Providers

Specialty Care Physician

 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-OCT-23


BOURLAND, BRYAN, DO

Provider ID: N/A

 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121*
Effective as of 01-SEP-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

 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-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

C1. List of Network Providers

Specialty Care Physician

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-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

CI. List of Network Providers

Specialty Care Physician

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-SEP-20

KIMBALL, MICHAEL, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JUL-23

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-AUG-23

MULDOON, MICHAEL, MD†

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
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-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-SEP-22

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

C1. List of Network Providers

Specialty Care Physician

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

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
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
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

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-SEP-20

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

CI. List of Network Providers

Specialty Care Physician

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
350
SAN DIEGO, CA 92121
Effective as of 01-MAR-16

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-SEP-22

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

350A

SAN DIEGO, CA 92121
Effective as of 01-AUG-23

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

CI. List of Network Providers


Specialty Care Physician

 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

C1. List of Network Providers

Specialty Care Physician

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

☒ 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

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

☒ 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-NOV-22

COHEN, EDWARD, MD†

Provider ID: N/A

☒ 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-24

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

☒ 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

DICKS, BRIAN, MD

CI. List of Network Providers

Specialty Care Physician

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
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-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

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-FEB-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-NOV-21

HOLDEN, MARC, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-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

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

JUMA, SAAD, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
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 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

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

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 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

NEUSTEIN, PAUL, 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

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

CI. List of Network Providers

Specialty Care Physician

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

☐ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

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-JAN-24

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-NOV-22

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

☐ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

ROBERTS, JAMES, MD

Provider ID: N/A

☐ 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

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

☐ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-OCT-19

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

☐ 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-JUL-22

SALEM, CAROL, MD†

Provider ID: N/A

☐ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

C1. List of Network Providers

Specialty Care Physician

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-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

☐ 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

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

☐ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

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

☐ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

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

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

☐ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-NOV-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-JAN-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

C1. List of Network Providers

Specialty Care Physician

Teleservice

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-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

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

230 PROSPECT PL STE 210
SAN DIEGO, CA 92118

Effective as of 01-JAN-24

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

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-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 201
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-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

CI. List of Network Providers
Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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-JAN-23

KIM, ESTHER, MD

Provider ID: N/A

31451 RANCHO VIEJO RD
STE 101
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-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

C1. List of Network Providers

Specialty Care Physician

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-JAN-18

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

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,

CI. List of Network Providers

Specialty Care Physician

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-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-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-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-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-OCT-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-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-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-JAN-23

YEAM, INCHEL, MD†

Provider ID: N/A

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

Effective as of 01-DEC-23

YEAM, INCHEL, MD†

Provider ID: N/A

📍 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,


CI. List of Network Providers

Specialty Care Physician

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

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-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

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-OCT-23

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-JAN-23

CI. List of Network Providers

Specialty Care Physician

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

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

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

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

CI. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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-MAY-21

MOONEY, PATRICIA, NP†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-JUL-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

C1. List of Network Providers

Specialty Care Physician

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 VALPRED A 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

📍 1595 GRAND AVE STE 100
SAN MARCOS, CA 92078

Effective as of 01-MAR-24

TRAINER, JASON, DC†

Provider ID: N/A

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

Effective as of 01-JUL-22

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-AUG-20

VENKAT, ARUN, MD†

Provider ID: N/A

📍 838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-SEP-22

VENKAT, ARUN, MD†

Provider ID: N/A

📍 838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-MAR-17

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 VALPRED A 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 VALPRED A 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

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers
Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

☐ 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

C1. List of Network Providers

Specialty Care Physician

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-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

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

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

334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-SEP-22

AL NAHLAWI, BASMA, MD†

CI. List of Network Providers

Specialty Care Physician

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-MAY-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


C1. List of Network Providers

Specialty Care Physician

 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

C1. List of Network Providers Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

**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

CI. List of Network Providers


Specialty Care Physician

 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-JUL-22

KELCHNER, MATTHEW, DC[†]


Provider ID: N/A

 120 TOWN CENTER PKWY
SANTEE, CA 92071
Effective as of 01-DEC-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

CI. List of Network Providers

Specialty Care Physician

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-JUN-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

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-SEP-22

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-JUL-22


ROSS, ANDREW, MD†

Provider ID: N/A


C1. List of Network Providers
Specialty Care Physician

 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-JUN-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 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


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

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-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-JUL-22


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-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

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

C1. List of Network Providers

Specialty Care Physician

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


CI. List of Network Providers

Specialty Care Physician

 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-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

GUPTA, SAMEER, MD†

Provider ID: N/A


 41715 WINCHESTER RD STE

206
TEMECULA, CA 92590
Effective as of 01-JAN-16

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

C1. List of Network Providers

Specialty Care Physician

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-JUN-21

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

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
28780 SINGLE OAK DR STE
290
TEMECULA, CA 92590
Effective as of 01-JAN-22

ALFAY, WISAM, MD

Provider ID: N/A
27450 YNEZ RD STE 109
TEMECULA, CA 92591
Effective as of 01-MAR-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-JUN-23

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-JUL-22

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

C1. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers Specialty Care Physician

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


CI. List of Network Providers

Specialty Care Physician

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


KHERADMANT, SHIVA, DO†

Provider ID: N/A

 44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-JAN-22


KHERADMANT, SHIVA, DO†

Provider ID: N/A

 44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22


KHERADMANT, SHIVA, DO†

Provider ID: N/A

 44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22


KHERADMANT, SHIVA, DO†

Provider ID: N/A

 44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21


KHERADMANT, SHIVA, DO†

Provider ID: N/A

 44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21


KHERADMANT, SHIVA, DO†

Provider ID: N/A

 44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21


KHERADMANT, 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

CI. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAR-21

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-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-DEC-23

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

C1. List of Network Providers

Specialty Care Physician

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-APR-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-JAN-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-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-JUL-23

CHANG, DAVID, MD†

C1. List of Network Providers

Specialty Care Physician

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

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-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-JUN-23

NANDI, SHANKHA, DO†

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAR-21

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

C1. List of Network Providers

Specialty Care Physician

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-OCT-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

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-OCT-21

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-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

CI. List of Network Providers

Specialty Care Physician

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-NOV-20

BEKENDAM, PAMELA, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590

Effective as of 01-NOV-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-AUG-20

BEKENDAM, PAMELA, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590

Effective as of 01-AUG-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-NOV-08

BURNS, RICHARD, MD†

Provider ID: N/A

41637 MARGARITA RD STE

CI. List of Network Providers

Specialty Care Physician

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-JUL-23

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

C1. List of Network Providers

Specialty Care Physician

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-NOV-20

YUNG, EDWARD, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-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

CI. List of Network Providers Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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

CI. List of Network Providers

Specialty Care Physician

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-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

JAKKULA, JAGAN, 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

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

C1. List of Network Providers

Specialty Care Physician

Effective as of 01-AUG-22

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

CI. List of Network Providers

Specialty Care Physician

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

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

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

C1. List of Network Providers
Specialty Care Physician

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

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 STE 101
 TEMECULA, CA 92592
 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

C1. List of Network Providers

Specialty Care Physician

27699 JEFFERSON AVE STE 202 Effective as of 01-NOV-21

TEMECULA, CA 92590
Effective as of 01-MAY-23

SABIN, SCOTT, PT†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 101 Effective as of 01-NOV-21

TEMECULA, CA 92592
Effective as of 01-FEB-19

SABIN, SCOTT, PT†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 101 Effective as of 01-NOV-21

TEMECULA, CA 92592
Effective as of 01-FEB-19

SIVA, ANDREW, PT†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 101 Effective as of 01-JUN-21

TEMECULA, CA 92592
Effective as of 01-JUN-21

SIVA, ANDREW, PT†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 101 Effective as of 01-JUN-21

TEMECULA, CA 92592
Effective as of 01-JUN-21

SIVA, ANDREW, PT†

Provider ID: N/A

27699 JEFFERSON AVE STE 202 Effective as of 01-JUN-20

TEMECULA, CA 92590
Effective as of 01-NOV-21

SIVA, ANDREW, PT†

Provider ID: N/A

27699 JEFFERSON AVE STE 202 Effective as of 01-JUN-20

TEMECULA, CA 92590

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

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

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

C1. List of Network Providers

Specialty Care Physician

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

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-JUL-23

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

Effective as of 01-NOV-20

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


CI. List of Network Providers

Specialty Care Physician

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-MAY-22


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-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-22


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-MAY-22


ESSIEN, FRANCIS, 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-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


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

C1. List of Network Providers

Specialty Care Physician

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-SEP-22

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-MAY-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-DEC-17

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

C1. List of Network Providers

Specialty Care Physician

Provider ID: N/A

27699 JEFFERSON AVE STE 305
TEMECULA, CA 92590
Effective as of 01-APR-23

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

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

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-MAY-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21

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

CI. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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-OCT-22

FRENCH, MICHAEL, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-DEC-22

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

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

C1. List of Network Providers

Specialty Care Physician

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-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

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

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


CI. List of Network Providers
Specialty Care Physician

 40949 WINCHESTER RD
 TEMECULA, CA 92591
 Effective as of 01-MAR-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-JAN-24

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-AUG-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

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-NOV-19

MUDGE, BRADLEY, MD†
 Provider ID: N/A

 44605 AVENIDA DE
 MISSIONES STE 202
 TEMECULA, CA 92592
 Teleservice
 Effective as of 01-OCT-19

URIAS, DANIEL, MD
 Provider ID: N/A

 27699 JEFFERSON AVE STE


C1. List of Network Providers

Specialty Care Physician

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-APR-23

BANSAL, NEERAJ, MD


Provider ID: N/A

 31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592
Effective as of 01-MAY-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

C1. List of Network Providers

Specialty Care Physician

 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-SEP-21

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-JUL-01

ZIERING, ROBERT, MD†

Provider ID: N/A

 2067 W VISTA WAY STE 140
VISTA, CA 92083


Effective as of 01-AUG-20

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

C1. List of Network Providers

Specialty Care Physician

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

C1. List of Network Providers

Specialty Care Physician

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

517 N HORNE ST
VISTA, CA 92083

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

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

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

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

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

HALGEDAHL, YI, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-21

HALGEDAHL, YI, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

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

HOWELL, AMANDA, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

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

C1. List of Network Providers

Specialty Care Physician

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

KAYE, ALYSON, NP

Provider ID: N/A

105 DURIAN ST
VISTA, CA 92083
Effective as of 01-FEB-24

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

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-DEC-23

KESSLER, JENNIFER, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
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

1000 VALE TERRACE DR

VISTA, CA 92084
Effective as of 01-JAN-24

NAVA, PETER, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
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

C1. List of Network Providers

Specialty Care Physician

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-JAN-24

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

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-JAN-24

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

134 GRAPEVINE RD
VISTA, CA 92083

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

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

C1. List of Network Providers

Specialty Care Physician

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

134 GRAPEVINE RD
VISTA, CA 92083*

Effective as of 01-NOV-23

DONNELL, MARTI, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*

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

134 GRAPEVINE RD
VISTA, CA 92083*

Effective as of 01-APR-23

MARTINEZ, LESLY, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*

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

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-AUG-22

VIDAL, MONICA, DO[†]

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

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

C1. List of Network Providers

Specialty Care Physician

2067 W VISTA WAY STE 295
VISTA, CA 92083*

Effective as of 01-APR-23

ANDREY, JEFFREY, MD†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083

Effective as of 01-SEP-22

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

2067 W VISTA WAY STE 295
VISTA, CA 92083*

Effective as of 01-APR-23

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

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

CI. List of Network Providers

Specialty Care Physician

ACOSTA, AZUCENA, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Teleservice

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-FEB-24

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

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

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

SANCHEZ, ADRIANA, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

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

SMITH, SONYA, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

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

CI. List of Network Providers

Specialty Care Physician

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

1000 VALE TERRACE DR
VISTA, CA 92084

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

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-JUL-22

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

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-JUN-21

LEON, JOSUE, 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-JUL-22

LEONARD, LISA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

CI. List of Network Providers

Specialty Care Physician

LEONARD, LISA, MD†

Provider ID: N/A

📍 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-OCT-21

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-NOV-21

CHEN, HEATHER, MD†

Provider ID: N/A

📍 2067 W VISTA WAY STE 120
VISTA, CA 92083

Effective as of 01-FEB-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

C1. List of Network Providers

Specialty Care Physician

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-JUL-22

GEE, JENNIFER, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

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

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-OCT-21

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

KASAI, SARAH, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-DEC-23

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

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-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

1000 VALE TERRACE DR
VISTA, CA 92084

Teleservice

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-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

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

RICH, RYAN, OD

Provider ID: N/A

C1. List of Network Providers

Specialty Care Physician

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-JUL-22

TAM, EMILY, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

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

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

TAM, EMILY, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
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-JAN-24

GLASSER, DANIEL, PA

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

KUPIS, ROBERT, PA

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-SEP-22

KUPIS, ROBERT, PA

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

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

C1. List of Network Providers

Specialty Care Physician

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

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

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

C1. List of Network Providers

Specialty Care Physician

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, BARBARA, PT

Provider ID: N/A

2067 W VISTA WAY STE 185
VISTA, CA 92083

Effective as of 01-JAN-24

BOUTELLE, DAVID, PT

Provider ID: N/A

2067 W VISTA WAY STE 185
VISTA, CA 92083

Effective as of 01-FEB-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

C1. List of Network Providers

Specialty Care Physician

VISTA, CA 92083
Teleservice
Effective as of 01-JUL-21

BEJKO, ETEVA, MD†

Provider ID: N/A
2023 W VISTA WAY STE H
VISTA, CA 92083
Teleservice
Effective as of 01-DEC-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-SEP-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-DEC-14

HANNA, KAREN, MD†

Provider ID: N/A
2385 S MELROSE DR
VISTA, CA 92081
Teleservice
Effective as of 01-JAN-21

HANNA, KAREN, MD†

Provider ID: N/A
2385 S MELROSE DR
VISTA, CA 92081
Teleservice
Effective as of 01-DEC-14

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

C1. List of Network Providers

Specialty Care Physician

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-MAY-15

CHANG, DAVID, MD[†]

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-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

C1. List of Network Providers

Specialty Care Physician

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-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

JONES, VALORIA, LCSW†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595

Effective as of 01-JAN-23

NEPHROLOGY

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-15

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 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

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

C1. List of Network Providers
Specialty Care Physician

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 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

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

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

C1. List of Network Providers
Specialty Care Physician

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 308
 WILDOMAR, CA 92595
 Effective as of 01-MAY-09

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 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-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

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

C1. List of Network Providers

Specialty Care Physician

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-JUN-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-SEP-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

C1. List of Network Providers
Specialty Care Physician

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

C1. List of Network Providers


Specialty Care Physician

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-MAY-22


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-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

 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

C1. List of Network Providers
Specialty Care Physician

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-APR-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-MAR-20

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

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-SEP-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-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

C1. List of Network Providers

Specialty Care Physician

| | | |
|---|---|---|
|  36320 INLAND VALLEY DR STE 101A WILDOMAR, CA 92595 Effective as of 01-DEC-23 | Effective as of 01-SEP-16 | Provider ID: N/A |
| DADA, STEPHEN, MD Provider ID: N/A | ESSIEN, FRANCIS, MD† Provider ID: N/A |  36320 INLAND VALLEY DR STE 101 WILDOMAR, CA 92595 Effective as of 01-SEP-22 |
|  36320 INLAND VALLEY DR STE 101A WILDOMAR, CA 92595 Effective as of 01-NOV-23 | Effective as of 01-SEP-16 | GORSKI, TITO, MD† Provider ID: N/A |
| DEARING, DAVID, MD† Provider ID: N/A |  36320 INLAND VALLEY DR STE 101 WILDOMAR, CA 92595 |  36320 INLAND VALLEY DR STE 101 WILDOMAR, CA 92595 Effective as of 01-DEC-23 |
|  36243 INLAND VALLEY DR STE 280 WILDOMAR, CA 92595 Effective as of 01-DEC-12 | Effective as of 01-SEP-22 | GORSKI, TITO, MD† Provider ID: N/A |
| ESSIEN, FRANCIS, MD† Provider ID: N/A |  36320 INLAND VALLEY DR STE 101 WILDOMAR, CA 92595 |  36320 INLAND VALLEY DR STE 101 WILDOMAR, CA 92595 Effective as of 01-DEC-23 |
|  36320 INLAND VALLEY DR STE 101A WILDOMAR, CA 92595 Effective as of 01-APR-22 | Effective as of 01-SEP-16 | HUSTED, JOHN, MD† Provider ID: N/A |
| ESSIEN, FRANCIS, MD† Provider ID: N/A |  36320 INLAND VALLEY DR STE 101 WILDOMAR, CA 92595 |  36243 INLAND VALLEY DR STE 280 WILDOMAR, CA 92595 Effective as of 01-MAR-13 |
|  36320 INLAND VALLEY DR STE 101A WILDOMAR, CA 92595 Effective as of 01-MAY-22 | Effective as of 01-SEP-16 | JOHNSEN, HEGE, MD† Provider ID: N/A |
| ESSIEN, FRANCIS, MD† Provider ID: N/A |  36320 INLAND VALLEY DR STE 101 WILDOMAR, CA 92595 |  36320 INLAND VALLEY DR STE 101A WILDOMAR, CA 92595 Effective as of 01-MAR-19 |
|  36320 INLAND VALLEY DR STE 101A WILDOMAR, CA 92595 Effective as of 01-MAY-22 | Effective as of 01-SEP-16 | JOHNSEN, HEGE, MD† Provider ID: N/A |
| ESSIEN, FRANCIS, MD† Provider ID: N/A |  36320 INLAND VALLEY DR STE 101 WILDOMAR, CA 92595 |  36320 INLAND VALLEY DR STE 101A WILDOMAR, CA 92595 Effective as of 01-APR-22 |
|  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 |  36320 INLAND VALLEY DR STE 101 |
| | GORSKI, YARA, MD† | |

C1. List of Network Providers
Specialty Care Physician

WILDOMAR, CA 92595
Effective as of 01-DEC-17

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 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 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 101

WILDOMAR, CA 92595
Effective as of 01-SEP-22

KARMUR, AMIT, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-DEC-23

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-APR-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-MAR-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-NOV-22

NOURI, SARVENAZ, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-NOV-22

C1. List of Network Providers

Specialty Care Physician

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-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-MAR-19

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 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

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

KARMUR, AMIT, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595

Effective as of 01-MAY-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595

C1. List of Network Providers

Specialty Care Physician

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-APR-22

TIU, BRIAN, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 101A
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-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

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

WANG, XIUJIE, MD†



Provider ID: N/A

 36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595



Effective as of 01-OCT-20

C3. Skilled Nursing Facilities (SNFs)



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

C3. Skilled Nursing Facilities (SNFs)



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

C3. Skilled Nursing Facilities (SNFs)

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

C3. Skilled Nursing Facilities (SNFs)

**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

C3. Skilled Nursing Facilities (SNFs)

 (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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

ALPINE

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

Phone: 619-445-6200

After Hours Phone:
619-445-6200

License Number: 20A17296

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

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: 90000681

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: 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: 619-662-4100

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

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics


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: 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.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: PA20490

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: 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.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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

 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


 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. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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 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

♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA PEDIATRICS
🌐 Website: www.ihpsocal.org

CHULA VISTA PEDIATRICS

Provider ID: 482034
📍 855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353

☎ Phone: 619-662-4100
🕒 After Hours Phone:
619-662-4100
License Number: A82912
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

CHULA VISTA PEDIATRICS

Provider ID: 482034
📍 855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353
☎ Phone: 619-662-4100
🕒 After Hours Phone:

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

619-662-4100
License Number: C51110
Accepting New Patients: YES
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA PEDIATRICS
 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
American Sign Language (ASL): N
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: A144995
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

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
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-RICE FAM HC
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641
 352 L ST
CHULA VISTA, CA
91911-1208
 Phone: 619-515-2325

Fax: 619-420-0660
 After Hours Phone:
619-515-2325
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 DIEGO-RICE FAM HC
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC






Provider ID: 417641
 352 L ST
CHULA VISTA, CA
91911-1208
 Phone: 619-515-2325
Fax: 619-420-0660
 After Hours Phone:
619-515-2325
License Number: 550002305
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 DIEGO-RICE FAM HC
 Website: www.fhcsd.org

OTAY FAMILY HEALTH CLINIC







Provider ID: 314546
 1637 3RD AVE STE H
CHULA VISTA, CA

D. Blue Shield Promise Medi-Cal List of Network Providers



D1. Federally Qualified Health Clinics





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
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: OTAY
FAMILY HEALTH CLINIC
 Website: www.ihpsocal.org

OTAY FAMILY HEALTH CLINIC







Provider ID: 314546
 1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823
 Phone: 619-205-1376
 After Hours Phone:
619-205-1376
License Number: A179598
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

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
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: OTAY
FAMILY HEALTH CLINIC
 Website: www.ihpsocal.org

OTAY FAMILY HEALTH CLINIC








Provider ID: 314546
 1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823
 Phone: 619-662-4100
Fax: 619-336-2323
 After Hours Phone:
619-662-4100
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

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

CHULA VISTA FAMILY HLTH CTR








Provider ID: 206355
 251 LANDIS AVE

D. Blue Shield Promise Medi-Cal List of Network Providers








D1. Federally Qualified Health Clinics

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
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: 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: 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: 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: A148014
Accepting New Patients: YES
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No


D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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: 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: 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: 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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

| | | |
|--|--|--|
|  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: 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 | 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 | 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 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 | 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 |


D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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


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: 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: 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: 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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

| | | |
|--|--|--|
|  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: 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 | 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: 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 | 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 | |


D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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

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: 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

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

D. Blue Shield Promise Medi-Cal List of Network Providers








D1. Federally Qualified Health Clinics

 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
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

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):
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: 20A13225
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


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

 Website: www.ihpsocal.org  Website: www.ihpsocal.org  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):
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: 20A9060

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: A114600

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: 20A19485

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

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

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):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

 Website: www.ihpsocal.org  Website: www.ihpsocal.org  Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A115598

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: 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

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):
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: A115699

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

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):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

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):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

 Website: www.ihpsocal.org  Website: www.ihpsocal.org  Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A123492

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: 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

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):
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):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

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):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

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):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

 Website: www.ihpsocal.org  Website: www.ihpsocal.org  Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A159831

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: A163183

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: A177922

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: 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

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):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

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):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

 Website: www.ihpsocal.org  Website: www.ihpsocal.org  Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A40473

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: 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 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: A56153

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: 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

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):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

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


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

 Website: www.ihpsocal.org  Website: www.ihpsocal.org  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: A80185

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: A93785

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: A77936

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

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):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

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


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

 Website: www.ihpsocal.org  Website: www.ihpsocal.org  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):
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: 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: 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

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


American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


 Website: www.ihpsocal.org


 Website: www.ihpsocal.org

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: G59670

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: 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: NP12112

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

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

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


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

 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
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

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


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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


 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:

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 Languages(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


EL CAJON

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

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

 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
Medical Group/IPA: CENTRO MEDICO EL CAJON

 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
Medical Group/IPA: CENTRO MEDICO EL CAJON

 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
Medical Group/IPA: CENTRO MEDICO EL CAJON


 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

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N
Medical Group/IPA: CENTRO MEDICO EL CAJON

 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

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

 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

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: 619-269-1262

 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

 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

 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: A68184

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

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

 Website: N/A

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

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

 Phone: 619-312-0347


 After Hours Phone:
619-312-0347

License Number: 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

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):
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

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

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

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

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


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

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:


D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics




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
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

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics







 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


D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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

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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

 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

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

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

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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
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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

 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

 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

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org


 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

 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

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

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

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A108228

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

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A114181

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

 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

 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

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

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A134303

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

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A144974

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

 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

 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

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

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A152462

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

 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
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A178499

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

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

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

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A72005

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


 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
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498


 After Hours Phone:
619-515-2498

License Number: DC33869

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: 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

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

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: G78814

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

 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
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

 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
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

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

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: NP95009292

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

 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
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498


 After Hours Phone:
619-515-2498

License Number: PA23258

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: 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

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

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: PT295173

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: 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

Fax: 619-269-0191

 After Hours Phone:
619-515-2498

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: 20A19473

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: 619-515-2499


 After Hours Phone:
619-515-2499

License Number: RN428876

Accepting New Patients: YES

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


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

 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


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

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

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

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:

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics







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: jaquelinca@fhcsd.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

ENCINITAS


TRUECARE

Provider ID: 480243
 1130 2ND ST
ENCINITAS, CA
92024-5008
 *Phone: 760-753-7842*
Fax: 760-736-8740
 *After Hours Phone: 760-753-7842*
License Number: 80000638
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: 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: 760-736-6767*
 *After Hours Phone: 760-736-6767*
License Number: PA19437

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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
92024-5008

Phone: 760-753-7842

After Hours Phone:
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

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

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

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


Medical Group/IPA: IHP of
Southern Cal-PHP


 Website: N/A


ESCONDIDO

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941

 704 E GRAND AVE
ESCONDIDO, CA
92025-4405

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: 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

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: 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: 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

D. Blue Shield Promise Medi-Cal List of Network Providers





D1. Federally Qualified Health Clinics

 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






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

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
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: 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: G83438
Accepting New Patients: YES

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

 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 PIDS AND PRENATAL

Provider ID: 206266

 425 N DATE ST
ESCONDIDO, CA
92025-3413

 Phone: 760-520-8340

 After Hours Phone:
760-520-8340

License Number: A56054

Accepting New Patients: YES

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE PIDS AND


PRENATAL


 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE PIDS AND PRENATAL

Provider ID: 206266

 425 N DATE ST
ESCONDIDO, CA
92025-3413

 Phone: 760-520-8340

 After Hours Phone:
760-520-8340

License Number: A67626

Accepting New Patients: YES

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


 *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: 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 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: 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*

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


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

 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:


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

**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**


D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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

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: 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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

American Sign Language (ASL): Site English Spoken: Yes
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 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: 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 ESCONDIDO







Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics






 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: 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: 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


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

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 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 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 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


D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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 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

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)








D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics



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:
iselaocha@borregohealth.org




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 PIDS 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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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

FALLBROOK

VISTA COMMUNITY CLINIC

Provider ID: 624122

📍 321 E ALVARADO ST
FALLBROOK, CA
92028-2912

☎ Phone: 760-723-6200

☎ After Hours Phone:
760-723-6200

License Number: NP95003447

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

☎ 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

FALLBROOK FAMILY HLTH CTR

Provider ID: 183910

📍 1328 S MISSION RD
FALLBROOK, CA
92028-4006

☎ Phone: 760-451-4770

☎ After Hours Phone:

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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: 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.vistacommu
nityclinic.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.vistacommu
nityclinic.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.vistacommu
nityclinic.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: 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.vistacommu
nityclinic.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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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: 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: 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: 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


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


D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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

Accepting New Patients: YES

 Site English Spoken: Yes


D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: LA MESA PEDIATRICS

 *Website: N/A*

Cultural Competency: Yes

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: LA MESA PEDIATRICS

 *Website: N/A*

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


Accepting New Patients: YES

 *Site English Spoken: Yes*

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


Accepting New Patients: YES

 *Site English Spoken: Yes*

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

NPI: 1033759311

Accepting New Patients: Y

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


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:

iselaocchoa@borregohealth.org

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

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


Provider ID: 353843

 10039 VINE ST

NEIGHBORHOOD

HEALTHCARE LAKESIDE


Provider ID: 353843

 10039 VINE ST

NEIGHBORHOOD

HEALTHCARE LAKESIDE


Provider ID: 353843


 10039 VINE ST


D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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: 619-515-2500

 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


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics


 *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*

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics







 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
91945-1604
 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):
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

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics


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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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: 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

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


D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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: 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

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

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

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


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: 619-434-7308


 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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

| | | |
|---|--|--|
| <p><i>g</i></p> <p>LA MAESTRA FAMILY CLINIC INC</p> <p>Provider ID: 185270</p> <p> 217 HIGHLAND AVE NATIONAL CITY, CA 91950-1518</p> <p> Phone: 619-434-7308</p> <p> After Hours Phone: 619-434-7308</p> <p>License Number: A123929</p> <p>Accepting New Patients: YES</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC</p> <p> Website: www.lamaestra.org</p> | <p><i>g</i></p> <p>LA MAESTRA FAMILY CLINIC INC</p> <p>Provider ID: 185270</p> <p> 217 HIGHLAND AVE NATIONAL CITY, CA 91950-1518</p> <p> Phone: 619-434-7308</p> <p> After Hours Phone: 619-434-7308</p> <p>License Number: G45632</p> <p>Accepting New Patients: YES</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC</p> <p> Website: www.lamaestra.org</p> | <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC</p> <p> Website: www.lamaestra.org</p> |
| <p>LA MAESTRA FAMILY CLINIC INC</p> <p>Provider ID: 185270</p> <p> 217 HIGHLAND AVE NATIONAL CITY, CA 91950-1518</p> <p> Phone: 619-434-7308</p> <p> After Hours Phone: 619-434-7308</p> <p>License Number: C55979</p> <p>Accepting New Patients: YES</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: LA</p> | <p>LA MAESTRA FAMILY CLINIC INC</p> <p>Provider ID: 185270</p> <p> 217 HIGHLAND AVE NATIONAL CITY, CA 91950-1518</p> <p> Phone: 619-434-7308</p> <p>Fax: 619-434-7310</p> <p> After Hours Phone: 619-434-7308</p> <p>License Number: NP95013257</p> <p>Accepting New Patients: YES</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> | <p>LA MAESTRA FAMILY CLINIC INC</p> <p>Provider ID: 185270</p> <p> 217 HIGHLAND AVE NATIONAL CITY, CA 91950-1518</p> <p> Phone: 619-798-3977</p> <p> After Hours Phone: 619-798-3977</p> <p>License Number: A41375</p> <p>Accepting New Patients: YES</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> |

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

American Sign Language (ASL): Site English Spoken: Yes
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

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

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


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


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

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: 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

 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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

American Sign Language (ASL): License Number: G88347

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*

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*

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 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*


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

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: A71304


Accepting New Patients: YES

Site English Spoken: Yes

Site Language(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: 619-428-4463

 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 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

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 NATIONAL CITY

Provider ID: 227412



 1136 D AVE
NATIONAL CITY, CA
91950-3412

 Phone: 619-662-4100

 After Hours Phone:


D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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: 619-336-2323
 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: 619-336-2323
 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 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 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


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

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.operationsamahan.org


OPERATION SAMAHAN GRANGER SCHOOL BASED

Provider ID: 418302

 2101 GRANGER AVE
NATIONAL CITY, CA
91950-6208

 Phone: 844-200-2426

Fax: 619-434-8999

 After Hours Phone:
844-200-2426

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.operationsamahan.org


OPERATION SAMAHAN GRANGER SCHOOL BASED

Provider ID: 418302

 2101 GRANGER AVE
NATIONAL CITY, CA
91950-6208

 Phone: 844-200-2426

Fax: 619-434-8999

 After Hours Phone:
844-200-2426

License Number: 550002622

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.operationsamahan.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

 2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410

 Phone: 844-200-2426

 After Hours Phone:
844-200-2426

License Number: 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.operationsamahan.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

 2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410

 Phone: 844-200-2426

 After Hours Phone:
844-200-2426

License Number: NP22974

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







OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102







 2743 HIGHLAND AVE
NATIONAL CITY, CA


D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics








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.operationsamahan.org

OPERATION SAMAHAN - NATIONAL C



Provider ID: 417102
 2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410
 Phone: 844-200-2426
Fax: 619-474-3919
 After Hours Phone:
844-200-2426
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

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 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

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

D. Blue Shield Promise Medi-Cal List of Network Providers



D1. Federally Qualified Health Clinics

 Website: www.fhcsd.org
 Email: lucinaj@fhcsd.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 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 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

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics





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

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*

Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: TRUECARE
 *Website: N/A*

OCEANSIDE

TRUECARE

Provider ID: 480315
 3220 MISSION AVE STE 1
 OCEANSIDE, CA
 92058-1354
 *Phone: 760-433-3155*
 *After Hours Phone: 760-433-3155*
License Number: PA19825
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: 760-736-6767*
 *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: 760-433-3155*
Fax: 760-736-8740
 *After Hours Phone: 760-433-3155*
License Number: 80000240
Accepting New Patients: YES
 *Site English Spoken: Yes*

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
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT*

TRUECARE





Provider ID: 480315
 3220 MISSION AVE STE 1
 OCEANSIDE, CA
 92058-1354
 *Phone: 760-433-3155*
 *After Hours Phone: 760-433-3155*



D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics





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: 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


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





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 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 PIER VIEW WAY

Provider ID: 402434
 818 PIER VIEW WAY
OCEANSIDE, CA
92054-2803
 Phone: 760-631-5000
Fax: 760-414-3892
 After Hours Phone:
760-631-5000
License Number: 80000510

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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

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

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

Provider ID: 206341

4700 N RIVER RD
OCEANSIDE, CA 2057-6043

Phone: 760-631-5000

After Hours Phone:
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

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

D. Blue Shield Promise Medi-Cal List of Network Providers





D1. Federally Qualified Health Clinics

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*
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*

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*

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
 *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:*

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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: 20A15689
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
 After Hours Phone:
760-757-4566
License Number: C152937
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
 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
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
 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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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: 760-757-3004

 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: 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: 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

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.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

HORNE STREET

Provider ID: 402436

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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 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 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):
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: 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):




D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics




| | | |
|--|--|--|
| <p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP of Southern Cal-PHP</p> <p> Website: www.vistacommunityclinic.org</p> | <p>License Number: 080000002</p> <p>NPI: 1649662719</p> <p>Accepting New Patients: Y</p> <p>Min/Max Age: 0\999</p> <p> Site English Spoken: Y</p> <p>Cultural Competency: Y</p> <p> Hours: M-F 8:00AM-5:00PM SA 9:00AM-4:00PM</p> <p>American Sign Language (ASL): N</p> | <p>nityclinic.org</p> |
| <p>VISTA COMMUNITY CLINIC</p> <p>Provider ID: 206341</p> <p> 4700 N RIVER RD OCEANSIDE, CA 92057</p> <p> Phone: (760) 631-5000</p> <p>Fax: (760) 414-3892</p> <p> After Hours Phone: (760) 631-5000</p> <p>License Number: 550004110</p> <p>NPI: 1316501562</p> <p>Accepting New Patients: Y</p> <p>Min/Max Age: 0\999</p> <p> Site English Spoken: Y</p> <p>Cultural Competency: Y</p> <p> Hours: M-F 8:00AM-5:00PM SA 9:00AM-4:00PM</p> <p>American Sign Language (ASL): N</p> | <p>VISTA COMMUNITY CLINIC</p> <p>Provider ID: 206341</p> <p> 4700 N RIVER RD OCEANSIDE, CA 92057</p> <p> Phone: (760) 631-5000</p> <p>Fax: (760) 414-3892</p> <p> After Hours Phone: (760) 631-5000</p> <p>License Number: 550003781</p> <p>NPI: 1649662719</p> <p>Accepting New Patients: Y</p> <p>Min/Max Age: 0\999</p> <p> Site English Spoken: Y</p> <p>Cultural Competency: Y</p> <p> Hours: M-F 8:00AM-5:00PM SA 9:00AM-4:00PM</p> <p>American Sign Language (ASL): N</p> | <p>VISTA COMMUNITY CLINIC</p> <p>Provider ID: 206341</p> <p> 4700 N RIVER RD OCEANSIDE, CA 92057</p> <p> Phone: (760) 631-5000</p> <p>Fax: (760) 414-3892</p> <p> After Hours Phone: (760) 631-5000</p> <p>License Number: 550004110</p> <p>NPI: 1649662719</p> <p>Accepting New Patients: Y</p> <p>Min/Max Age: 0\999</p> <p> Site English Spoken: Y</p> <p>Cultural Competency: Y</p> <p> Hours: M-F 8:00AM-5:00PM SA 9:00AM-4:00PM</p> <p>American Sign Language (ASL): N</p> |
| <p>VISTA COMMUNITY CLINIC</p> <p>Provider ID: 206341</p> <p> 4700 N RIVER RD OCEANSIDE, CA 92057</p> <p> Phone: (760) 631-5000</p> <p>Fax: (760) 414-3892</p> <p> After Hours Phone: (760) 631-5000</p> | <p>VISTA COMMUNITY CLINIC</p> <p>Provider ID: 206341</p> <p> 4700 N RIVER RD OCEANSIDE, CA 92057</p> <p> Phone: (760) 631-5000</p> <p>Fax: (760) 414-3892</p> <p> After Hours Phone: (760) 631-5000</p> | <p>VISTA COMMUNITY CLINIC</p> <p>Provider ID: 206341</p> <p> 4700 N RIVER RD OCEANSIDE, CA 92057</p> <p> Phone: (760) 631-5000</p> <p>Fax: (760) 414-3892</p> <p> After Hours Phone: (760) 631-5000</p> <p>License Number: 080000002</p> <p>NPI: 1851300123</p> <p>Accepting New Patients: Y</p> <p>Min/Max Age: 0\999</p> <p> Site English Spoken: Y</p> <p>Cultural Competency: Y</p> |

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics




 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: 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: 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

PAUMA VALLEY

NEIGHBORHOOD HEALTHCARE PAUMA VALLEY

Provider ID: 206267

 16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524

 Phone: 760-742-9919

 After Hours Phone:
760-742-9919


License Number: A114419
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: 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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics



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
 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: 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 92064-4520
 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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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

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

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.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: 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.operationsa
mahan.org

OPERATION SAMAHAN

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889

Phone: 844-200-2426

After Hours Phone: 844-200-2426

License Number: NP95003211

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.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

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.operationsamahan.org

OPERATION SAMAHAN

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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.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.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

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

Phone: 844-200-2426

After Hours Phone:
844-200-2426

License Number: DC15775

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: 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.operationsamahan.org

OPERATION SAMAHAN - MIRA

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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: 432308

9855 ERMA RD STE 105
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

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:

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308

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

 Phone: 844-200-2426

Fax: 858-536-8034


 After Hours Phone:
844-200-2426

License Number: 80000146

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

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):
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: 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-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: 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

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):
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

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

 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):
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: 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-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: A114181
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: 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-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: A118095
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: 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-BEACH
AREA
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA





Provider ID: 402851
 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

 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):
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):
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):
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: 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

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):
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: 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-BEACH
AREA
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

 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):
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: A76785
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: 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):
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: DC20729
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: DPM4819
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

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

 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):
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):
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: 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 Language(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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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

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

After Hours Phone:
858-279-0925

License Number: DPM4434

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

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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

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):

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: 858-633-4680

 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

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

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


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics


 *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 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: 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: 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:*

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics






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
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

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: 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: 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

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

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics


 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: 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 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: 20A15459

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: 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

D. Blue Shield Promise Medi-Cal List of Network Providers



D1. Federally Qualified Health Clinics


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: 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: 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: A136616
Accepting New Patients: YES

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

 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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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


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


D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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: 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: 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


D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


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: 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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

 *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*

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

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): American Sign Language (ASL): N

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

 Website: www.fhcsd.org


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

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

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):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH

CENTERS


 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

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

 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

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: A103099

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

FAMILY HLTH CTR SD

NORTH PARK FAMILY HEALTH

NORTH PARK FAMILY HEALTH


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

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):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

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

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):
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: A113001

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):
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: A126181

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

NORTH PARK FAMILY HEALTH

NORTH PARK FAMILY HEALTH


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

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

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

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

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

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

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: A148014

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: A163464

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: A178499

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

NORTH PARK FAMILY HEALTH

NORTH PARK FAMILY HEALTH


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

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):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

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

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

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):
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):
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: 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

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):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH

NORTH PARK FAMILY HEALTH


NORTH PARK FAMILY HEALTH

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

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

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):
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: PA21042

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
Fax: 619-683-7586
 After Hours Phone:
619-515-2424

License Number: 90000469

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: 20A14794

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


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

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):
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):
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: A113001

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: 20A15068

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: 20A20252

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: 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


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

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

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):
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):
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):
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):
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):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

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):
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: A68463


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: G78814

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: A180044

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: 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

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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

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

 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):

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: 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: 233597

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics




 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: 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):
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: 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: A152267
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

D. Blue Shield Promise Medi-Cal List of Network Providers







D1. Federally Qualified Health Clinics

| | | |
|---|--|--|
|  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 |  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  Website: www.sdfamilycare.org |  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  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

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


MID-CITY COMMUNITY CLINIC

Provider ID: 233532
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690
 Phone: 619-280-2058

MID-CITY COMMUNITY CLINIC






Provider ID: 233532
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690
 Phone: 619-280-2058

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED


Provider ID: 517998
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

 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):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH COMMUNITY
HEIGHTS FAMILY MED
 Website: N/A

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
 Phone: 619-255-9154
 After Hours Phone:
619-255-9154
License Number: A123929
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.or
g

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
 Website: www.lamaestra.or
g

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
 Phone: 619-255-9155
 After Hours Phone:
619-255-9155
License Number: 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.or
g


LA MAESTRA FAMILY CLINIC INC


D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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

 Website: www.lamaestra.org

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

 Website: www.lamaestra.org

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


 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

LA MAESTRA FAMILY CLINIC INC

LA MAESTRA FAMILY CLINIC INC

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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

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

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: 619-749-5480

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

MAESTRA FAMILY CLINIC INC

Website: www.lamaestra.org

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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

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 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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


Medical Group/IPA: FAMILY HEALTH CTR OF SDELM ST


 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: 619-515-2426

 After Hours Phone:
619-515-2426

License Number: 20A17577

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

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: NP95004443

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

Accepting New Patients: YES

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N
Medical Group/IPA: FAMILY HEALTH CTR IBARRA

 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
Medical Group/IPA: FAMILY HEALTH CTR IBARRA

 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
Medical Group/IPA: FAMILY HEALTH CTR IBARRA

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
Medical Group/IPA: FAMILY HEALTH CTR IBARRA

 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: PA59481

Accepting New Patients: YES

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N
Medical Group/IPA: FAMILY HEALTH CTR IBARRA

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CTR IBARRA


HEALTH CTR IBARRA

 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): N
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

 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): N
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


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: A76785

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


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: 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


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


 After Hours Phone:
619-515-2525

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: FAMILY
HLTH CTR SAN DIEGOCITY

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

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

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


HLTH CTR SAN DIEGOCITY
COLLEGE


 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


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):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

DOWNTOWN FAMILY CTR AT
CONNECTIONS


 Website: www.fhcsd.org


FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113-1195

 Phone: 619-515-2422

 After Hours Phone:
619-515-2422

License Number: A121451

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



D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


 *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
 *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*

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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

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

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

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

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941

 Phone: 619-515-2435

 After Hours Phone:
619-515-2435

License Number: PA16245

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

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

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

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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

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

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

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

Provider ID: 517403

 316 25TH ST
SAN DIEGO, CA 92102-3016

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A156607

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


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

 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

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

Provider ID: 517403


 316 25TH ST
SAN DIEGO, CA 92102-3016


 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

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

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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

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

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


 Phone: 619-233-8500

 After Hours Phone:
619-233-8500

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

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


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

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

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

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

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

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


License Number: PA54617
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


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

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: 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: 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: 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


 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113


 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360




 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300




 After Hours Phone:
619-515-2300




D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics




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
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

License Number: A116680


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: 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): American Sign Language (ASL): 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): American Sign Language (ASL): 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): American Sign Language (ASL): 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): American Sign Language (ASL): 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): American Sign Language (ASL): 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

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

License Number: A142703

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: 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): American Sign Language (ASL): 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): American Sign Language (ASL): 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): American Sign Language (ASL): 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): American Sign Language (ASL): 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): American Sign Language (ASL): 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

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

License Number: A154298


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: 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): American Sign Language (ASL): 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): American Sign Language (ASL): 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): American Sign Language (ASL): 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): American Sign Language (ASL): 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): American Sign Language (ASL): 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




D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics




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
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

License Number: A46161


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: 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): American Sign Language (ASL): 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): American Sign Language (ASL): 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): American Sign Language (ASL): 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): American Sign Language (ASL): 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): American Sign Language (ASL): 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




D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics




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
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300




D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics




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




LOGAN HEIGHTS FAMILY HEALTH 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




LOGAN HEIGHTS FAMILY HEALTH 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

LOGAN HEIGHTS FAMILY HEALTH 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
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

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

License Number: NP10906
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: 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: NP17852
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: 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

LOGAN HEIGHTS FAMILY HEALTH 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


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

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

License Number: NP95001705

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: 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: NP95007253

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: 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

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

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


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




D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics




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
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



D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
 Phone: 619-662-4100

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

| | | |
|---|---|---|
|  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 Medical Group/IPA: SAN YSIDRO HEALTH CHC - OCEAN VIEW  Website: www.ihpsocal.org |  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 Medical Group/IPA: SAN YSIDRO HEALTH CHC - OCEAN VIEW  Website: www.ihpsocal.org |  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 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: 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

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
 Phone: 619-662-4100

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
 Phone: 619-662-4100

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

| | | |
|--|--|---|
| 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 Medical Group/IPA: SAN YSIDRO HEALTH CHC - OCEAN VIEW Website: www.ihpsocal.org | 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 CHC - OCEAN VIEW Website: www.ihpsocal.org | 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 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: 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

SAN YSIDRO HEALTH CHC - OCEAN VIEW






Provider ID: 227409
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
 Phone: 619-662-4100

FAMILY HEALTH CTR SAN DIEGO-OAK PARK


Provider ID: 418142
 5160 FEDERAL BLVD

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics






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

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
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
 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
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
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
Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK
 Website: www.fhcsd.org

KING CHAVEZ HEALTH CENTER







Provider ID: 451167

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics






 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):
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: 20A7435
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: 20A8204
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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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


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: 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

D. Blue Shield Promise Medi-Cal List of Network Providers







D1. Federally Qualified Health Clinics






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
 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: 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: 619-263-2499
 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
 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: A113001
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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


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: A68463


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


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: 20A14772

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


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

 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

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

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


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: A113448

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


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: A115598

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


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

 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

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

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


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: A126187

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


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: A140912

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


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

 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

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

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


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: A161373

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


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: A164859

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


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

 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

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

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


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: C174538

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


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: 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


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


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

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

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


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

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org


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: NP19911

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


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: NP95001492

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: 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

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

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


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

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org


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: NP95021154

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


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: PA58081

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: 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

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

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


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: PA60864

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


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


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

 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

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

Cultural Competency: No

American Sign Language (ASL):
N


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics


 *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
NPI: 1699216622

 *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

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):

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

| | | | |
|--|---|---|--|
| <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: Operation Samahan</i></p> <p> <i>Website: www.operationsamahan.org</i></p> | <p> 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129</p> <p> <i>Phone: (844) 200-2426</i></p> <p><i>Fax: (858) 695-9074</i></p> <p> <i>After Hours Phone: (844) 200-2426</i></p> <p><i>License Number: 550003857</i></p> <p><i>NPI: 1699216622</i></p> <p><i>Accepting New Patients: Y</i></p> <p><i>Min/Max Age: 0\150</i></p> <p> <i>Site English Spoken: Y</i></p> <p> <i>Site Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p> <i>Hours: M-TU 8:30AM-5:30PM W 10:00AM-7:00PM TH-F 8:30AM-5:30PM</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: Operation Samahan</i></p> <p> <i>Website: www.operationsamahan.org</i></p> | <p><i>Cultural Competency: N</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: Operation Samahan</i></p> <p> <i>Website: www.operationsamahan.org</i></p> | |
| <p>OPERATION SAMAHAN RANCHO PENASQUITOS</p> <p><i>Provider ID: 418535</i></p> <p> 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129</p> <p> <i>Phone: (844) 200-2426</i></p> <p><i>Fax: (858) 695-9074</i></p> <p> <i>After Hours Phone: (844) 200-2426</i></p> <p><i>License Number: 550002478</i></p> <p><i>NPI: 1699216622</i></p> <p><i>Accepting New Patients: Y</i></p> <p><i>Min/Max Age: 0\150</i></p> <p> <i>Site English Spoken: Y</i></p> <p> <i>Site Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p> <i>Hours: M-TU 8:30AM-5:30PM W 10:00AM-7:00PM TH-F 8:30AM-5:30PM</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: Operation Samahan</i></p> <p> <i>Website: www.operationsamahan.org</i></p> | <p>OPERATION SAMAHAN - MIRA MESA</p> <p><i>Provider ID: 417101</i></p> <p> 10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126</p> <p> <i>Phone: (844) 200-2426</i></p> <p><i>Fax: (858) 578-4417</i></p> <p> <i>After Hours Phone: (844) 200-2426</i></p> <p><i>License Number: 080000146</i></p> <p><i>NPI: 1871680397</i></p> <p><i>Accepting New Patients: Y</i></p> <p><i>Min/Max Age: 0\150</i></p> <p> <i>Site English Spoken: Y</i></p> <p> <i>Site Language(s) Spoken: Spanish, Tagalog</i></p> <p><i>Cultural Competency: Y</i></p> <p> <i>Hours: M-F 8:00AM-4:30PM</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: Operation Samahan</i></p> <p> <i>Website: www.operationsamahan.org</i></p> | <p>OPERATION SAMAHAN - MIRA MESA</p> <p><i>Provider ID: 432308</i></p> <p> 9855 ERMA RD STE 105 SAN DIEGO, CA 92131</p> <p> <i>Phone: (844) 200-2426</i></p> <p><i>Fax: (858) 536-8034</i></p> <p> <i>After Hours Phone: (844) 200-2426</i></p> <p><i>License Number: 080000146</i></p> <p><i>NPI: 1861933897</i></p> <p><i>Accepting New Patients: Y</i></p> <p><i>Min/Max Age: 0\999</i></p> <p> <i>Site English Spoken: Y</i></p> | <p>MID-CITY COMMUNITY CLINIC</p> <p><i>Provider ID: 233597</i></p> <p> 4290 POLK AVE</p> |

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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

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: IHP of
Southern Cal-PHP
🌐 Website: www.sdfamilycare.org
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

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
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
🌐 Website: N/A

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

 **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: 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

 **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

 **Accessibility:** CONTACT PROVIDER


Medical Group/IPA: IHP of Southern Cal-PHP

 **Website:** www.sdfamilycare.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: nancy@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>

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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

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

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

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

Medical Group/IPA: Family
Health Centers of San Diego

Website: www.fhcsd.org
Email: sabay@fhcsd.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)

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


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

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 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

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

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

NORTH PARK FAMILY HEALTH CENTERS






Provider ID: 416831


D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics




 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
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: Family

Health Centers of San Diego
 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103
 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


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


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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


Southern Cal-PHP

 Website: www.syhealth.org/clinics/king-chavez-health-center

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


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

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 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: NM235997
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

D. Blue Shield Promise Medi-Cal List of Network Providers








D1. Federally Qualified Health Clinics

 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








 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
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

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

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
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: 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



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

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
 After Hours Phone: 760-736-6767
License Number: PA17101

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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: 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): N

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: PA21723

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: 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

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: 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

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

Fax: 760-736-8740

After Hours Phone: 760-736-6767

License Number: 80000167

Accepting New Patients: YES





































D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

| | | |
|---|---|--|
| <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE <input type="checkbox"/> Website: www.ihpsocal.org | Cultural Competency: No American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE <input type="checkbox"/> Website: www.ihpsocal.org | N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE <input type="checkbox"/> Website: www.ihpsocal.org |
| TRUECARE Provider ID: 625875 <input type="checkbox"/> 1595 GRAND AVE STE 100 SAN MARCOS, CA 92078-2450 <input type="checkbox"/> Phone: 760-520-8200 Fax: 360-462-2749 <input type="checkbox"/> After Hours Phone: 760-520-8200 Accepting New Patients: YES <input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE <input type="checkbox"/> Website: www.ihpsocal.org | TRUECARE Provider ID: 625875 <input type="checkbox"/> 1595 GRAND AVE STE 100 SAN MARCOS, CA 92078-2450 <input type="checkbox"/> Phone: 760-736-6767 Fax: 760-736-6744 <input type="checkbox"/> After Hours Phone: 760-736-6767 License Number: 1598122871 Accepting New Patients: YES <input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE <input type="checkbox"/> Website: www.ihpsocal.org | TRUECARE Provider ID: 625875 <input type="checkbox"/> 1595 GRAND AVE STE 100 SAN MARCOS, CA 92078-2450 <input type="checkbox"/> Phone: 760-736-6767 Fax: 760-736-6744 <input type="checkbox"/> After Hours Phone: 760-736-6767 License Number: PA17718 Accepting New Patients: YES <input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE <input type="checkbox"/> Website: www.ihpsocal.org |
| TRUECARE Provider ID: 625875 <input type="checkbox"/> 1595 GRAND AVE STE 100 SAN MARCOS, CA 92078-2450 <input type="checkbox"/> Phone: 760-520-8200 Fax: 360-462-2749 <input type="checkbox"/> After Hours Phone: 760-520-8200 License Number: 80000167 Accepting New Patients: YES <input type="checkbox"/> Site English Spoken: Yes | TRUECARE Provider ID: 625875 <input type="checkbox"/> 1595 GRAND AVE STE 100 SAN MARCOS, CA 92078-2450 <input type="checkbox"/> Phone: 760-736-6767 Fax: 760-736-6744 <input type="checkbox"/> After Hours Phone: 760-736-6767 License Number: NP18788 Accepting New Patients: YES <input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): | TRUECARE Provider ID: 614511 <input type="checkbox"/> 1595 GRAND AVE STE 106 SAN MARCOS, CA 92078-2450 <input type="checkbox"/> Phone: 760-736-6767 Fax: 760-736-6744 <input type="checkbox"/> After Hours Phone: 760-736-6767 License Number: 80000167 Accepting New Patients: YES <input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT |

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

| | | |
|--|---|---|
| <p><i>PROVIDER</i> Medical Group/IPA: TRUECARE  Website: www.ihpsocal.org  Website: www.ihpsocal.org</p> | <p>Medical Group/IPA: TRUECARE Website: www.ihpsocal.org</p> | <p>TRUECARE Provider ID: 625875  1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973  Phone: 760-736-6767  After Hours Phone: 760-736-6767 License Number: 20A15159 Accepting New Patients: YES <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE  Website: www.ihpsocal.org</p> |
| <p>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 <input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE  Website: www.ihpsocal.org</p> | <p>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 <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE  Website: www.ihpsocal.org</p> | <p>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 <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE  Website: www.ihpsocal.org</p> |
| <p>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 <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p> | <p>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 <input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE  Website: www.ihpsocal.org</p> | <p>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 <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE  Website: www.ihpsocal.org</p> |

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: A116562

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

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

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

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

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: A93248

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

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

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

TRUECARE








Provider ID: 625875

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics







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
 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: 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: 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

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: 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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


 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




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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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: 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: A167529

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: A145480

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: 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: A32571

Accepting New Patients: YES

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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: 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: C42207

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: A51843

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: DPM2930

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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: 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: NP95003721

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: 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: 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: NP95004315

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


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: 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 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 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: 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 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 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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

Cultural Competency: No

American Sign Language (ASL): License Number: A111118

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: 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: 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*


D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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): License Number: A175006

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): License Number: A178949

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): License Number: A74960

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: 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 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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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):
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

License Number: G52183

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


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

 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: 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 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: 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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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 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:

D. Blue Shield Promise Medi-Cal List of Network Providers






D1. Federally Qualified Health Clinics


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


D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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: 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


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: 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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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: 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: A127188

Accepting New Patients: YES

- Site English Spoken: Yes

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

-  *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
- 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): 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
- 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
- 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


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

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

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: 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: 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: A159673

Accepting New Patients: YES

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

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: 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: 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: 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: A177337

Accepting New Patients: YES


































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

Cultural Competency: No

American Sign Language (ASL):


D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

| | | |
|---|--|--|
| <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</i></p> <p> <i>Website: www.ihpsocal.org</i></p> | <p><i>License Number: A40061</i></p> <p><i>Accepting New Patients: YES</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish, Tagalog, Portuguese</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> | <p>YSIDRO HEALTH CENTER</p> <p><i>Provider ID: 206292</i></p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> <i>Phone: 619-662-4100</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p><i>License Number: A49267</i></p> <p><i>Accepting New Patients: YES</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish, Tagalog, Portuguese</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> |
| <p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p><i>Provider ID: 206292</i></p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> <i>Phone: 619-662-4100</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p><i>License Number: A180886</i></p> <p><i>Accepting New Patients: YES</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish, Tagalog, Portuguese</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> | <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</i></p> <p> <i>Website: www.ihpsocal.org</i></p> | <p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p><i>Provider ID: 206292</i></p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> <i>Phone: 619-662-4100</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p><i>License Number: A40480</i></p> <p><i>Accepting New Patients: YES</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish, Tagalog, Portuguese</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> |
| <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</i></p> <p> <i>Website: www.ihpsocal.org</i></p> | <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</i></p> <p> <i>Website: www.ihpsocal.org</i></p> | <p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p><i>Provider ID: 206292</i></p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> <i>Phone: 619-662-4100</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p><i>License Number: A49307</i></p> <p><i>Accepting New Patients: YES</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish, Tagalog, Portuguese</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> |
| <p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p><i>Provider ID: 206292</i></p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> <i>Phone: 619-662-4100</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> | <p>SAN YSIDRO HEALTH SAN</p> | <p>N</p> |


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics


 *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: 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: 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: 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*


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

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: 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: 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

 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

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics


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: 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: DC33693

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: 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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics


| | | |
|---|---|---|
|  Website: www.ihpsocal.org | American Sign Language (ASL): N | 619-662-4100 License Number: NP95003355 |
| SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER |  Accessibility: CONTACT PROVIDER | Accepting New Patients: YES |
| Provider ID: 206292 | Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER |  Site English Spoken: Yes |
|  4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 |  Website: www.ihpsocal.org |  Site Languages(s) Spoken: Spanish, Tagalog, Portuguese |
|  Phone: 619-662-4100 | SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER | Cultural Competency: No |
|  After Hours Phone: 619-662-4100 | Provider ID: 206292 | American Sign Language (ASL): N |
| License Number: G80107 |  4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 |  Accessibility: CONTACT PROVIDER |
| Accepting New Patients: YES |  Phone: 619-662-4100 | Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER |
|  Site English Spoken: Yes |  After Hours Phone: 619-662-4100 |  Website: www.ihpsocal.org |
|  Site Languages(s) Spoken: Spanish, Tagalog, Portuguese | License Number: NP12112 | SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER |
| Cultural Competency: No | Accepting New Patients: YES | Provider ID: 206292 |
| American Sign Language (ASL): N |  Site English Spoken: Yes |  4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 |
|  Accessibility: CONTACT PROVIDER |  Site Languages(s) Spoken: Spanish, Tagalog, Portuguese |  Phone: 619-662-4100 |
| Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER | Cultural Competency: No |  After Hours Phone: 619-662-4100 |
|  Website: www.ihpsocal.org | American Sign Language (ASL): N | License Number: PA17162 |
| SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER |  Accessibility: CONTACT PROVIDER | Accepting New Patients: YES |
| Provider ID: 206292 | Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER |  Site English Spoken: Yes |
|  4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 |  Website: www.ihpsocal.org |  Site Languages(s) Spoken: Spanish, Tagalog, Portuguese |
|  Phone: 619-662-4100 | SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER | Cultural Competency: No |
|  After Hours Phone: 619-662-4100 | Provider ID: 206292 | American Sign Language (ASL): N |
| License Number: G81461 |  4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 |  Accessibility: CONTACT PROVIDER |
| Accepting New Patients: YES |  Phone: 619-662-4100 | Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER |
|  Site English Spoken: Yes |  After Hours Phone: |  Website: www.ihpsocal.org |
|  Site Languages(s) Spoken: Spanish, Tagalog, Portuguese | | |
| Cultural Competency: No | | |


D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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

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

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 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: 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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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: A78373

Accepting New Patients: YES

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL): Fax: (619) 205-6305

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

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







D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics



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




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

Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 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:

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

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA

91977-4035
 Phone: 619-515-2555
 After Hours Phone: 619-515-2555
License Number: A108228
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: 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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

 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:
GROSSMONT SPRING VALLEY

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics


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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics






- American Sign Language (ASL): Site English Spoken: Yes
N
Cultural Competency: No
 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: 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: NP10943
Accepting New Patients: YES
- 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
American Sign Language (ASL):
N
Cultural Competency: No
 Site English Spoken: Yes
American Sign Language (ASL):
N
Cultural Competency: No
 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
- 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

SPRING VALLEY






- GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**
Provider ID: 206361
 8788 JAMACHA RD

D. Blue Shield Promise Medi-Cal List of Network Providers




D1. Federally Qualified Health Clinics

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
91977-4035
 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: 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
 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: 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


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

D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

Cultural Competency: N

 *Hours: M-F
8:00AM-5:00PM*

American Sign Language (ASL): License Number: 080000483

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: 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


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):

 *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*


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







 135 GRAPEVINE RD

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics







 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

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339







 134 GRAPEVINE RD
VISTA, CA 92083-4004
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000
License Number: DC32054
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: 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: 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

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

Provider ID: 400339

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

 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: 760-414-3892

 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: 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


D. Blue Shield Promise Medi-Cal List of Network Providers


D1. Federally Qualified Health Clinics

nityclinic.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.vistacommu
nityclinic.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.vistacommu
nityclinic.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.vistacommu
nityclinic.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.vistacommu
nityclinic.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.vistacommu
nityclinic.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):

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

| | | |
|---|--|--|
| <p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: VISTA COMMUNITY CLINIC</p> <p> Website: www.vistacommunityclinic.org</p> | <p>American Sign Language (ASL): Spanish</p> <p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: VISTA COMMUNITY CLINIC</p> <p> Website: www.vistacommunityclinic.org</p> | <p>Spanish</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: VISTA COMMUNITY CLINIC</p> <p> Website: www.vistacommunityclinic.org</p> |
| <p>VISTA COMMUNITY CLINIC</p> <p>Provider ID: 206338</p> <p> 1000 VALE TERRACE DR VISTA, CA 92084-5218</p> <p> Phone: 760-631-5000</p> <p> After Hours Phone: 760-631-5000</p> <p>License Number: A62780</p> <p>Accepting New Patients: YES</p> <p><input type="checkbox"/> Site English Spoken: Yes</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Spanish</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: VISTA COMMUNITY CLINIC</p> <p> Website: www.vistacommunityclinic.org</p> | <p>VISTA COMMUNITY CLINIC</p> <p>Provider ID: 206338</p> <p> 1000 VALE TERRACE DR VISTA, CA 92084-5218</p> <p> Phone: 760-631-5000</p> <p> After Hours Phone: 760-631-5000</p> <p>License Number: C143703</p> <p>Accepting New Patients: YES</p> <p><input type="checkbox"/> Site English Spoken: Yes</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Spanish</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: VISTA COMMUNITY CLINIC</p> <p> Website: www.vistacommunityclinic.org</p> | <p>VISTA COMMUNITY CLINIC</p> <p>Provider ID: 206338</p> <p> 1000 VALE TERRACE DR VISTA, CA 92084-5218</p> <p> Phone: 760-631-5000</p> <p> After Hours Phone: 760-631-5000</p> <p>License Number: C171929</p> <p>Accepting New Patients: YES</p> <p><input type="checkbox"/> Site English Spoken: Yes</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Spanish</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: VISTA COMMUNITY CLINIC</p> <p> Website: www.vistacommunityclinic.org</p> |
| <p>VISTA COMMUNITY CLINIC</p> <p>Provider ID: 206338</p> <p> 1000 VALE TERRACE DR VISTA, CA 92084-5218</p> <p> Phone: 760-631-5000</p> <p> After Hours Phone: 760-631-5000</p> <p>License Number: A80635</p> <p>Accepting New Patients: YES</p> <p><input type="checkbox"/> Site English Spoken: Yes</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Spanish</p> <p>Cultural Competency: No</p> | <p>VISTA COMMUNITY CLINIC</p> <p>Provider ID: 206338</p> <p> 1000 VALE TERRACE DR VISTA, CA 92084-5218</p> <p> Phone: 760-631-5000</p> <p> After Hours Phone: 760-631-5000</p> <p>License Number: C162072</p> <p>Accepting New Patients: YES</p> <p><input type="checkbox"/> Site English Spoken: Yes</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Spanish</p> | <p>VISTA COMMUNITY CLINIC</p> <p>Provider ID: 206338</p> <p> 1000 VALE TERRACE DR VISTA, CA 92084-5218</p> <p> Phone: 760-631-5000</p> <p> After Hours Phone: 760-631-5000</p> <p>License Number: C52564</p> <p>Accepting New Patients: YES</p> |

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics








 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

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

D. Blue Shield Promise Medi-Cal List of Network Providers

D1. Federally Qualified Health Clinics

VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: 844-308-5003

After Hours Phone:
844-308-5003

License Number: NP11448

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

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

D2. Primary Care Directory

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

g
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

g
Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

D2. Primary Care Directory

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

D2. Primary Care Directory

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: 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

D2. Primary Care Directory

☎ 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

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


D2. Primary Care Directory


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

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


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

D2. Primary Care Directory

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.org

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.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):  Website: www.mtnhealth.org

 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.org

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

Website: www.mtnhealth.org

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

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

D2. Primary Care Directory


 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

D2. Primary Care Directory

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

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

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

D2. Primary Care Directory

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


 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


TANAKA, MARY

Provider ID: 465387

Provider Gender: Female

NPI: 1295962686


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Thai

D2. Primary Care Directory


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):

 *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

 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


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*

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

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 *Phone: (760) 736-6767*

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736-6767*

 *Website: N/A*

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

D2. Primary Care Directory

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

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

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

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

D2. Primary Care Directory

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-medical-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
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 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

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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515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG



D2. Primary Care Directory

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
 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

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
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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


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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 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

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- 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: RN371480
NPI: 1841200482
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 678 3RD AVE

D2. Primary Care Directory

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
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



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

D2. Primary Care Directory

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
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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

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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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@FHCS.D.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

D2. Primary Care Directory

 *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
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
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

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

D2. Primary Care Directory

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

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

 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

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

 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

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
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

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
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

CHIROPRACTOR

D2. Primary Care Directory

PLANTE, CHARLES

Provider ID: 427322


Provider Gender: Male

License Number: DC31963


NPI: 1760464960


 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

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

 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

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

 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

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


 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

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

 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

ENDOCRINOLOGY

METABOLISM DIABETES

CARRILLO, MARITZA


D2. Primary Care Directory

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

 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

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
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

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
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

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
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

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
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100



 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

D2. Primary Care Directory

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
 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

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
 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

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

D2. Primary Care Directory

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

 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

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

 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

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

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

DY, DIANE

Provider ID: 206355

Provider Gender: Female

License Number: A153344

NPI: 1467807560

Provider English Spoken: Y

D2. Primary Care Directory

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

DY, DIANE

Provider ID: 206355

Provider Gender: Female


License Number: A153344

NPI: 1467807560

 *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

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

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

 After Hours Phone: (619)
662-4100

 Website: [www.syhealth.org](http://www.syhealth.org/clinics/chula-vista-medic-al-plaza)
/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



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

 678 3RD AVE
CHULA VISTA, CA 91910

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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

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

 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

D2. Primary Care Directory

Min/Max Age: 0\150

American Sign Language (ASL):
N

 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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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


JIMENEZ, KRYSTAL

Provider ID: 427322

Provider Gender: Female

License Number: A159831

NPI: 1922531250

 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

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

 678 3RD AVE
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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

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- 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

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

D2. Primary Care Directory

 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

 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

D2. Primary Care Directory

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

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



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

 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

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

D2. Primary Care Directory




 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, 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, 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

D2. Primary Care Directory

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

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-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

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

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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

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-medical-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


D2. Primary Care Directory

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

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-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

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-medical-plaza

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

D2. Primary Care Directory



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

D2. Primary Care Directory

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

D2. Primary Care Directory

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

D2. Primary Care Directory

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


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-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


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-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

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

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


D2. Primary Care Directory


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

 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

 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

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

D2. Primary Care Directory

 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

D2. Primary Care Directory


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

D2. Primary Care Directory

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-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
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-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
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-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


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-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

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

D2. Primary Care Directory

/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](http://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](http://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

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: [www.syhealth.org
/clinics/chula- vista- medic
al- plaza](http://www.syhealth.org/clinics/chula- vista- medic
al- plaza)

Medi-Cal Open Panel: 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](http://www.syhealth.org/clinics/chula- vista- medic
al- plaza)

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

D2. Primary Care Directory

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-medical-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-medical-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-medical-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-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

HAMMETT, ERIN


Provider ID: 427322

Provider Gender: Female

License Number: 20A14025

D2. Primary Care Directory

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

D2. Primary Care Directory

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

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-medical-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-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

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-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

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@FHCSD.ORG

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

D2. Primary Care Directory

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

 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


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

 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

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):

D2. Primary Care Directory

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

 *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*

 *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

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

D2. Primary Care Directory

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
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


DE MIK, TRAVIS

Provider ID: 206355

Provider Gender: Male


License Number: A108228


NPI: 1629277322


 Provider English Spoken: Y

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


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

 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

 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

D2. Primary Care Directory

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

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
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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

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,
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SCRIPPS MERCY HOSPITAL
CHULA VISTA

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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

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
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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

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206355

Provider Gender: Female

License Number: C174771

NPI: 1053392035


Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

D2. Primary Care Directory

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


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

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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


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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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Email:

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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

LOEFFLER, ALLISON

Provider ID: 206355

Provider Gender: Female

License Number: A116680

NPI: 1700073962



 Provider English Spoken: Y

D2. Primary Care Directory

 *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-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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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,

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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*

D2. Primary Care Directory

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
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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

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

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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

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)
515-2500

Website: www.fhcsd.org
Email:

D2. Primary Care Directory

MARTHAO@FHCSO.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
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
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 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

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

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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

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
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 Phone: (619) 662-4100



 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
/clinics/chula- vista- medic

D2. Primary Care Directory

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-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

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
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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


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

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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
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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

D2. Primary Care Directory

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER

Provider ID: 427322

Provider Gender: Female

License Number: 20A8204

NPI: 1053407593

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Board Certified Specialty: No

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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

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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

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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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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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):

D2. Primary Care Directory

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

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 **Phone:** (619) 515-2500

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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

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-medical-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-medical-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)

D2. Primary Care Directory

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

D2. Primary Care Directory

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)


D2. Primary Care Directory

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


D2. Primary Care Directory

 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

D2. Primary Care Directory

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

D2. Primary Care Directory

 *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):

 *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):

 *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):

 *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

D2. Primary Care Directory


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*

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

D2. Primary Care Directory

PEDIATRICS

MCMAHON, 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

D2. Primary Care Directory

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-medical-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-medical-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@FHCS.D.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

D2. Primary Care Directory

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-medical-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-medical-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

D2. Primary Care Directory

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):
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

D2. Primary Care Directory

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-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

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-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


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

 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


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

 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



PHYSICIANS ASSISTANT **QUICK, ELISABETH**

Provider ID: 206355

Provider Gender: Female

License Number: PA21591

NPI: 1790055010

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


D2. Primary Care Directory


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

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


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- 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*

PODIATRIST

MANCHEL, BRUCE

Provider ID: 427322

Provider Gender: Male

License Number: DPM2930

D2. Primary Care Directory


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

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

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

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

 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

D2. Primary Care Directory


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

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-medic-al-plaza

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

 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

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

 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

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

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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

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

D2. Primary Care Directory

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
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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

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

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

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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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

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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

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

D2. Primary Care Directory

 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
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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):

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
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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

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

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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

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,

D2. Primary Care Directory

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

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

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

D2. Primary Care Directory

 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

BELEN, NEZER

Provider ID: 418340
Provider Gender: Male
License Number: NP95009292
NPI: 1386120723

 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



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
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

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

D2. Primary Care Directory

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

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
📍 525 E MAIN ST
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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

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
📍 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

CERTIFIED NURSE PRACTITIONER


HARPEL, SHERYL
Provider ID: 569910
Provider Gender: Female
License Number: NP95009329
NPI: 1780177147
☐ Provider English Spoken: Y


D2. Primary Care Directory

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

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100


 After Hours Phone: (619)
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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

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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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

D2. Primary Care Directory


 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

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
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


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
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

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


 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



ODA, THAGHAR

Provider ID: 418340

Provider Gender: Female

D2. Primary Care Directory


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
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


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
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


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
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


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
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

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

D2. Primary Care Directory



 *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: NP15444
NPI: 1780603597

 *Provider English Spoken: Y*
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Cultural Competency: N

Board Certified Specialty: No

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D2. Primary Care Directory

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


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

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Min/Max Age: 0\150

American Sign Language (ASL):
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 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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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

D2. Primary Care Directory


 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: 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


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Cultural Competency: N

Board Certified Specialty: No

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License Number: DC33150


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Cultural Competency: N

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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

D2. Primary Care Directory

 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

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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

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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 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

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

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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 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

D2. Primary Care Directory

 *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
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

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

 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

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

 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

D2. Primary Care Directory

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

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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

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

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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

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

D2. Primary Care Directory

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

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

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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

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

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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

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: jaquelin@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
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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

D2. Primary Care Directory

 *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*

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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


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

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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
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 *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

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: 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

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*



D2. Primary Care Directory

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

D2. Primary Care Directory

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

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

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

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

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:

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

D2. Primary Care Directory

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: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

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: jaquelininc@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

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


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

D2. Primary Care Directory

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
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-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
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-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

D2. Primary Care Directory

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): Provider ID: 185267

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:

iselaocha@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:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

AWDISHO, ALAN

D2. Primary Care Directory

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

D2. Primary Care Directory

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

D2. Primary Care Directory

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

D2. Primary Care Directory

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

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

D2. Primary Care Directory

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:

iselaocha@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

D2. Primary Care Directory

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

D2. Primary Care Directory

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

D2. Primary Care Directory


 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)

D2. Primary Care Directory

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

D2. Primary Care Directory

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

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

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

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

D2. Primary Care Directory

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:

iselaocha@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

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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

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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

D2. Primary Care Directory

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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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

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Min/Max Age: 0\150

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N

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PROVIDER

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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
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GROSSMONT HOSPITAL

Board Certified Specialty: No

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 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
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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

D2. Primary Care Directory

PROVIDER

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

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

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Provider Language(s)
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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



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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N



Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

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Provider Gender: Male

License Number: A108228

NPI: 1629277322

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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

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



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Email: janellek@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

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

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Grossmont Hospital

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


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

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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


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

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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


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

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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

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

D2. Primary Care Directory

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

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

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

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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

LOEFFLER, ALLISON

Provider ID: 418340

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

D2. Primary Care Directory


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



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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

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

 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

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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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

MENDEZ, DIEGO


Provider ID: 569910

Provider Gender: Male


License Number: A47906

NPI: 1437181922

D2. Primary Care Directory

 *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
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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 8:00AM-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:
iselaocha@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:
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Board Certified Specialty: No
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*Email:
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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

D2. Primary Care Directory

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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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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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

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

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

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

STABEN, REBECCA

Provider ID: 418340

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp

D2. Primary Care Directory

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

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

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

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


D2. Primary Care Directory


AND HEALTHCARE CTR,
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 8:00AM-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

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 8:00AM-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

 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

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

D2. Primary Care Directory

 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

 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

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

 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






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



 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

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

D2. Primary Care Directory




 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



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
 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

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
 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



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

D2. Primary Care Directory

 Website: www.syhealth.org
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
 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

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
g
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
g
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
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

D2. Primary Care Directory

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):

N

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):

N

Accessibility: CONTACT
PROVIDER

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

PEDIATRICS

FIGUEROA RODRIGUEZ, BRENDA

Provider ID: 478971

Provider Gender: Female

License Number: A114674

NPI: 1134205214

Provider English Spoken: Y

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:

iselaocchoa@borregohealth.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

FIGUEROA RODRIGUEZ, BRENDA

Provider ID: 478971

Provider Gender: Female

D2. Primary Care Directory

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):
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


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

D2. Primary Care Directory

 *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):

 *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):

 *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*

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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):

 *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

D2. Primary Care Directory

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

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: jaquelininc@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):

D2. Primary Care Directory



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

D2. Primary Care Directory

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

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

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

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

D2. Primary Care Directory

 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


 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

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
 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





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






D2. Primary Care Directory

 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
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

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

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 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

D2. Primary Care Directory



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



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
 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

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
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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

D2. Primary Care Directory

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 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 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

D2. Primary Care Directory

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

D2. Primary Care Directory

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

D2. Primary Care Directory

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

D2. Primary Care Directory

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

D2. Primary Care Directory

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

D2. Primary Care Directory

 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


D2. Primary Care Directory


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

D2. Primary Care Directory



 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







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

D2. Primary Care Directory

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

D2. Primary Care Directory

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): Board Certified Specialty: No
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): Board Certified Specialty: No
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): Board Certified Specialty: No
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): Board Certified Specialty: No
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): Board Certified Specialty: No
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

D2. Primary Care Directory

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

D2. Primary Care Directory

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

D2. Primary Care Directory

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): Board Certified Specialty: No

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): Cultural Competency: N

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

D2. Primary Care Directory

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: 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

 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: 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: 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

RAO, USHA

Provider ID: 588941

Provider Gender: Female

License Number: A148750

NPI: 1184019911

 Provider English Spoken: Y
 Provider Language(s)


D2. Primary Care Directory


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

D2. Primary Care Directory

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: 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

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: 206270

Provider Gender: Male

License Number: G61829







NPI: 1356376164

D2. Primary Care Directory

 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







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

D2. Primary Care Directory

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

D2. Primary Care Directory

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

D2. Primary Care Directory

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

D2. Primary Care Directory

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: 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

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

D2. Primary Care Directory

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


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: 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):

D2. Primary Care Directory

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

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


D2. Primary Care Directory

 *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

 *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

D2. Primary Care Directory




 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




D2. Primary Care Directory


 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:
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

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:
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


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:
iselaocha@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:
iselaocha@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


D2. Primary Care Directory

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: 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


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*

D2. Primary Care Directory

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

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







D2. Primary Care Directory

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:
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

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

D2. Primary Care Directory

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

FALLBROOK

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

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):

 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):

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

D2. Primary Care Directory

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



D2. Primary Care Directory

 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

 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

 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

D2. Primary Care Directory


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.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

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.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

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
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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 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.vistacommunityclinic.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
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
FALLBROOK, CA 92028

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723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ZAMPELLO, LISA

Provider ID: 624122

D2. Primary Care Directory

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.vistacommunityclinic.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
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
FALLBROOK, CA 92028

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723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
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
FALLBROOK, CA 92028

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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

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.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)




D2. Primary Care Directory

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: 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: 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

D2. Primary Care Directory

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

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

D2. Primary Care Directory

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

D2. Primary Care Directory

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

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
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

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
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
After Hours Phone: (619) 429-3733
Website: www.ihpsocal.org
Medi-Cal Open Panel: Y
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American Sign Language (ASL): N
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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

D2. Primary Care Directory


 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

D2. Primary Care Directory

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

 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

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:

iselaocha@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
200

LA MESA, CA 91942

D2. Primary Care Directory

 Phone: (616) 464-6434
 After Hours Phone: (616) 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

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:

iselaocha@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:


iselaocha@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:

iselaocha@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:


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


D2. Primary Care Directory


 *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: 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
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: 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*

D2. Primary Care Directory

PROVIDER
Hours: M-TU 7:30AM-6:00PM
W-F 7:30AM-6:30PM
SA 8:30AM-5:00PM

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

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

D2. Primary Care Directory

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

D2. Primary Care Directory

 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

D2. Primary Care Directory

 *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,


D2. Primary Care Directory

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

D2. Primary Care Directory


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

 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

 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

 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

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):

D2. Primary Care Directory

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): Cultural Competency: N

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

D2. Primary Care Directory

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

D2. Primary Care Directory

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

D2. Primary Care Directory


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

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

D2. Primary Care Directory

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





D2. Primary Care Directory

 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

D2. Primary Care Directory

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


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,

D2. Primary Care Directory

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

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After Hours Phone: (619)
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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

D2. Primary Care Directory

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

D2. Primary Care Directory

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
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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):

 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):

 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
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 Phone: (619) 515-2550

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Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

D2. Primary Care Directory

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

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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

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Medi-Cal Open Panel: Y

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

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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

D2. Primary Care Directory

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

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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

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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

D2. Primary Care Directory


 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

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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)
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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

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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


D2. Primary Care Directory


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.operationsa
mahan.org](http://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: 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

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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 8:00AM-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.operationsa
mahan.org](http://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: 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

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 Website: [www.operationsa
mahan.org](http://www.operationsamahan.org)


Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

D2. Primary Care Directory


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.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

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

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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-5:00PM

CERTIFIED NURSE PRACTITIONER

LIM, IMELDA

D2. Primary Care Directory

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

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 Website: [www.operationsa
mahan.org](http://www.operationsa
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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

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PROVIDER

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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](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-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

 1000 EUCLID AVE
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 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

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](http://www.lamaestra.or
g)

Email:


D2. Primary Care Directory

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
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

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


D2. Primary Care Directory


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


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

 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


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/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

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/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

D2. Primary Care Directory

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.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

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.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

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/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

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/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

D2. Primary Care Directory

 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


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


D2. Primary Care Directory

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

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

D2. Primary Care Directory

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

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/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

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/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

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

D2. Primary Care Directory

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


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
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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


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

D2. Primary Care Directory

*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

D2. Primary Care Directory


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

D2. Primary Care Directory

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/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


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/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

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

STONES, RACHEL

Provider ID: 185270

Provider Gender: Female





License Number: A167184

NPI: 1720583040

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

D2. Primary Care Directory

 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):
Cultural Competency: N
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

D2. Primary Care Directory

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

D2. Primary Care Directory

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/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

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/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


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/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

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/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

FQHC

SAN YSIDRO HEALTH SOUTH BAY,

D2. Primary Care Directory

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

D2. Primary Care Directory

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: 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):

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

D2. Primary Care Directory


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


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*

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

D2. Primary Care Directory

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/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1790914422
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/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

BAILONY, AHMAD

Provider ID: 146949
Provider Gender: Male

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

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,

D2. Primary Care Directory

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

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-clinic-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-clinic-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

D2. Primary Care Directory

 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)

D2. Primary Care Directory

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/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



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/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

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

D2. Primary Care Directory

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





D2. Primary Care Directory

 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
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.vistacommu-nityclinic.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.vistacommu-nityclinic.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.vistacommu-nityclinic.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.vistacommu-nityclinic.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


D2. Primary Care Directory

 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

 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
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PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 402436


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Min/Max Age: 0\999

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NPI: 1922421288


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Cultural Competency: N

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 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

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

 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

D2. Primary Care Directory

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

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*

 *After Hours Phone: (760) 631-5000*


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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-F 8:00AM-5:00PM

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

 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


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

 517 N HORNE ST
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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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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



HALGEDAHL, YI

Provider ID: 402436

Provider Gender: Female

D2. Primary Care Directory


License Number: NP95006826
NPI: 1619246907


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Board Certified Specialty: No

 517 N HORNE ST
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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

CERTIFIED NURSE

PRACTITIONER



HALGEDAHL, YI

Provider ID: 402434

Provider Gender: Female

License Number: NP95006826


NPI: 1619246907


 Provider English Spoken: Y
 Provider Language(s)
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CERTIFIED NURSE

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 Accessibility: CONTACT
PROVIDER

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

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

Medi-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



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

D2. Primary Care Directory



 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

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
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PRACTITIONER


HALGEDAHL, YI

Provider ID: 206341
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907

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Cultural Competency: N
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American Sign Language (ASL): N



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SA 9:00AM-4:00PM




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PRACTITIONER



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Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

DONNELL, MARTI

D2. Primary Care Directory

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
PROVIDER

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

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

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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

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

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FAMILY PRACTICE

DONNELL, MARTI

Provider ID: 206341

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Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL


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 4700 N RIVER RD

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 Accessibility: CONTACT
PROVIDER

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

SA 9:00AM-4:00PM

FAMILY PRACTICE

DONNELL, MARTI



Provider ID: 206341

Provider Gender: Female

License Number: C50708






NPI: 1235151366


D2. Primary Care Directory

 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
PROVIDER
Hours: M-F 8:00AM-5:00PM
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
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 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
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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

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

 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





FATLAND, SARAH

Provider ID: 206341
Provider Gender: Female

License Number: 20A18374
NPI: 1831354026
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
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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

FATLAND, SARAH

Provider ID: 206341
Provider Gender: Female
License Number: 20A18374
NPI: 1831354026
 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

D2. Primary Care Directory

PROVIDER
Hours: M-F 8:00AM-5:00PM
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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FAMILY PRACTICE

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Cultural Competency: N

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American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

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

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

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631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PANICKER, CIBU

Provider ID: 206341

Provider Gender: Male

License Number: A149340


NPI: 1235492760


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No

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 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

D2. Primary Care Directory

American Sign Language (ASL):  4700 N RIVER RD
OCEANSIDE, CA 92057

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PANICKER, CIBU

Provider ID: 206341

Provider Gender: Male

License Number: A149340


NPI: 1235492760

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No

 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):  4700 N RIVER RD
OCEANSIDE, CA 92057

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PANICKER, CIBU

Provider ID: 206341

Provider Gender: Male


License Number: A149340


NPI: 1235492760


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No

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 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PANICKER, CIBU

Provider ID: 206341

Provider Gender: Male

License Number: A149340


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Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No

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American Sign Language (ASL):  517 N HORNE ST
OCEANSIDE, CA 92054

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PANICKER, CIBU

Provider ID: 206341

Provider Gender: Male

License Number: A149340


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 Provider English Spoken: Y
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Hospital Affiliation: TRI CITY
MEDICAL CTR

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American Sign Language (ASL):  4700 N RIVER RD
OCEANSIDE, CA 92057

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PONSFORD, DIANA

Provider ID: 402436

Provider Gender: Female

License Number: 20A17371


NPI: 1407204969


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No

 517 N HORNE ST
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 Website: www.vistacommunityclinic.org


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Medi-Cal Open Panel: Y

D2. Primary Care Directory

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

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 Provider English Spoken: Y
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Hospital Affiliation: TRI CITY
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FAMILY PRACTICE

PONSFORD, DIANA

Provider ID: 402436

Provider Gender: Female

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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

D2. Primary Care Directory

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

 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

 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

 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

 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

D2. Primary Care Directory


 *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: 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: 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: 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: 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: 1851300123

D2. Primary Care Directory

 *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 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

 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

 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

 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 PIER VIEW WAY,

Provider ID: 402434


NPI: 1629357355

 *Provider English Spoken: Y*

D2. Primary Care Directory

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

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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 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

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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

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

D2. Primary Care Directory

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

 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.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.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

 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

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631-5000

 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.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

 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

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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

 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

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 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.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

D2. Primary Care Directory

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


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

D2. Primary Care Directory

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


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

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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-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

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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-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

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 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

D2. Primary Care Directory

 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

D2. Primary Care Directory

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

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

D2. Primary Care Directory

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):

D2. Primary Care Directory



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

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*






D2. Primary Care Directory

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

D2. Primary Care Directory

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

D2. Primary Care Directory

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):

D2. Primary Care Directory


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



D2. Primary Care Directory

 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

D2. Primary Care Directory

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

D2. Primary Care Directory

 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

D2. Primary Care Directory

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
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**

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**

D2. Primary Care Directory


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

D2. Primary Care Directory

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

 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

D2. Primary Care Directory

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](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

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](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

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](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

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

D2. Primary Care Directory

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

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

D2. Primary Care Directory

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

D2. Primary Care Directory

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: 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: 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

D2. Primary Care Directory

 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: 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







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)

D2. Primary Care Directory

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

D2. Primary Care Directory

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

D2. Primary Care Directory

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

D2. Primary Care Directory

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](http://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, GRETEL 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](http://www.operationsa
mahan.org)

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): **NEVAREZ, IRENE**

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](http://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](http://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)

D2. Primary Care Directory

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
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

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)

D2. Primary Care Directory

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: 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: 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


D2. Primary Care Directory

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

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

CERTIFIED NURSE

PRACTITIONER

ORPILLA, IMELDA

Provider ID: 417101

Provider Gender: Female

D2. Primary Care Directory

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](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

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

 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

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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235

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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

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

D2. Primary Care Directory

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

 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

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

D2. Primary Care Directory

.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: 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

D2. Primary Care Directory

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: 482070

Provider Gender: Female

License Number: NP16433

NPI: 1902810377

 Provider English Spoken: Y N

 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


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

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

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


D2. Primary Care Directory

 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

 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

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

D2. Primary Care Directory

American Sign Language (ASL): Provider Gender: Female
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


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

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279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
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 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

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

D2. Primary Care Directory

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

 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

D2. Primary Care Directory

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: 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

D2. Primary Care Directory

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

D2. Primary Care Directory

 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


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

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



D2. Primary Care Directory

 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

D2. Primary Care Directory


 Provider English Spoken: Y N


 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 N


 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):

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


VELASQUEZ, FERNANDO

Provider ID: 356145

Provider Gender: Male

License Number: NP95011254

NPI: 1386195535


 Provider English Spoken: Y N


 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 N


 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 N


 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

D2. Primary Care Directory

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

D2. Primary Care Directory

 *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

D2. Primary Care Directory

American Sign Language (ASL): Cultural Competency: N

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): Cultural Competency: N

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

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



D2. Primary Care Directory

 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

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: 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

D2. Primary Care Directory

 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








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 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



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 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

 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

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: 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

D2. Primary Care Directory

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

D2. Primary Care Directory






 Phone: (619) 234-2158
 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

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
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.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 **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

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 **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

D2. Primary Care Directory

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

D2. Primary Care Directory


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)
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: 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](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

CHIROPRACTOR

SU, VENNES

Provider ID: 417101

Provider Gender: Female

License Number: DC34907

NPI: 1053919928


D2. Primary Care Directory


 *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

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.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

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.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

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):
N

 *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*

 *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

DERMATOLOGY

CARTER, NATASHA

D2. Primary Care Directory

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

D2. Primary Care Directory







 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




D2. Primary Care Directory




 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

D2. Primary Care Directory

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



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

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

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

D2. Primary Care Directory


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.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.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)

D2. Primary Care Directory

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: 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

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

D2. Primary Care Directory

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

D2. Primary Care Directory

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

D2. Primary Care Directory

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


D2. Primary Care Directory

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- healt
h- 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

 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

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.syhe*
alth.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.syhe*
alth.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

D2. Primary Care Directory

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
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

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

 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

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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 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

D2. Primary Care Directory

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
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


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

 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

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

D2. Primary Care Directory

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

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

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

D2. Primary Care Directory

 *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*

 *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

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*

D2. Primary Care Directory

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- healt 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*
 *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




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




D2. Primary Care Directory

 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: 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






 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

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
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

GUTIERREZ, TANIA

D2. Primary Care Directory

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):
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: 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


D2. Primary Care Directory


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: 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

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-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

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-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

D2. Primary Care Directory

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

D2. Primary Care Directory

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

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

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

D2. Primary Care Directory

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

D2. Primary Care Directory

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*

D2. Primary Care Directory

 *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

 *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

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*

D2. Primary Care Directory

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: 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: 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

D2. Primary Care Directory


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: 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
 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

D2. Primary Care Directory

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

D2. Primary Care Directory

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

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

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](http://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

D2. Primary Care Directory

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](http://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


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

D2. Primary Care Directory

 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

D2. Primary Care Directory

 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

D2. Primary Care Directory

Min/Max Age: 0\150

American Sign Language (ASL): Provider Gender: Male

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): Board Certified Specialty: No

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)

D2. Primary Care Directory

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

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
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

D2. Primary Care Directory

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: 233597


Provider Gender: Female

D2. Primary Care Directory

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


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

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

D2. Primary Care Directory

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

D2. Primary Care Directory

 *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

D2. Primary Care Directory

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

D2. Primary Care Directory

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: 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

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

D2. Primary Care Directory

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

D2. Primary Care Directory

 *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*


D2. Primary Care Directory


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

D2. Primary Care Directory

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

D2. Primary Care Directory

 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


DIAMOND NEIGHBORHOODS

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

D2. Primary Care Directory

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: 418142


NPI: 1336525906

 Provider English Spoken: Y

D2. Primary Care Directory


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): 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): 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): 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): 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): 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): American Sign Language (ASL):

N

D2. Primary Care Directory

 *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

D2. Primary Care Directory

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-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

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-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

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.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

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.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

FQHC

D2. Primary Care Directory


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: 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)

D2. Primary Care Directory

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: 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

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

D2. Primary Care Directory


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: 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

D2. Primary Care Directory

 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: 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: 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

D2. Primary Care Directory


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.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


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.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

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

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,


D2. Primary Care Directory

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

D2. Primary Care Directory

 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

D2. Primary Care Directory

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
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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

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

D2. Primary Care Directory

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.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

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.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

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

D2. Primary Care Directory

American Sign Language (ASL): NPI: 1548281322

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): NPI: 1982044483

N

 Accessibility: CONTACT PROVIDER


HEPATOLOGY


GISH, ROBERT

Provider ID: 185268

Provider Gender: Male

License Number: G45632

 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: 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: 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
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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

ALASSIL, SALLY

Provider ID: 419529

Provider Gender: Female

License Number: A122238

NPI: 1982044483

 Provider English Spoken: Y

D2. Primary Care Directory


 *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: 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


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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 *Phone: (619) 662-4100*

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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*

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

D2. Primary Care Directory

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

 4094 4TH AVE
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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

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

 4094 4TH AVE
SAN DIEGO, CA 92103

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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

D2. Primary Care Directory

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

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE

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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-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-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

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-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

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

D2. Primary Care Directory

 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

 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

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

D2. Primary Care Directory


 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


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

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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


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

 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

FARASAT, SADAF

Provider ID: 206360

D2. Primary Care Directory

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

 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

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

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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

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

D2. Primary Care Directory

.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
 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

D2. Primary Care Directory


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
 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

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
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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

D2. Primary Care Directory

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

D2. Primary Care Directory

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
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

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

D2. Primary Care Directory

 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
 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

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)

D2. Primary Care Directory

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
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




D2. Primary Care Directory

 *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*

D2. Primary Care Directory



 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

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
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

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
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


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
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

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
 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

D2. Primary Care Directory

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

 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

D2. Primary Care Directory

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

D2. Primary Care Directory

- 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**
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**
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*

D2. Primary Care Directory

 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


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 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

D2. Primary Care Directory

 *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


D2. Primary Care Directory

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*

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*

D2. Primary Care Directory

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



D2. Primary Care Directory

 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




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
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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


D2. Primary Care Directory

 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

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
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OBSTETRICS / GYNECOLOGY

BLAKE, GARY
Provider ID: 206046
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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

D2. Primary Care Directory

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

SAN DIEGO, CA 92104

Phone: (619) 515-2424

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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

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,

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BIRCH HOSP FOR WOMEN

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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

BUECHNER, CHARLENE

Provider ID: 402851

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

3705 MISSION BLVD

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

D2. Primary Care Directory

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 402851

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL


CHULA VISTA, SHARP MARY


BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

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Email: sabay@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
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

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

 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

 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

D2. Primary Care Directory

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
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS

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

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

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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

D2. Primary Care Directory

 *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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515-2420*

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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

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

D2. Primary Care Directory

American Sign Language (ASL): License Number: A113001
N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:00PM
TH 9:30AM-6:00PM

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):

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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

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: 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

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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

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)
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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

D2. Primary Care Directory

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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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: 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

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

CERVANTES, SANDRA

Provider ID: 416831

Provider Gender: Female

License Number: A118095

NPI: 1073701041

Provider English Spoken: Y

Provider Language(s)

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Cultural Competency: N

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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

D2. Primary Care Directory

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


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GROSSMONT HOSPITAL

Board Certified Specialty: No

 3705 MISSION BLVD
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Email: sabay@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

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OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA


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Provider Gender: Female

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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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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

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 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

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: 206360

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Min/Max Age: 0\150

American Sign Language (ASL):

D2. Primary Care Directory

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

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MERCY HOSPITAL, SHARP

CORONADO HOSP AND


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GROSSMONT HOSPITAL

Board Certified Specialty: No

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Medi-Cal Open Panel: Y

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OBSTETRICS / GYNECOLOGY


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MERCY HOSPITAL, SHARP

CORONADO HOSP AND


HEALTHCARE CTR,


GROSSMONT HOSPITAL

Board Certified Specialty: No

 4725 MARKET ST

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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**

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

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 206363

Provider Gender: Female

License Number: A163464

NPI: 1326531401

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No

 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):

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 **Accessibility: CONTACT PROVIDER**

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 416831

Provider Gender: Female

License Number: A163464

NPI: 1326531401

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No

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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**

D2. Primary Care Directory

PROVIDER
Hours: M-TH 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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 *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

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PROVIDER*

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 206360

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OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 206363

Provider Gender: Female

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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*

 *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

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*

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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


D2. Primary Care Directory

 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

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

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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

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
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

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
American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER


OBSTETRICS / GYNECOLOGY


DE MIK, TRAVIS

Provider ID: 402851
Provider Gender: Male
License Number: A108228
NPI: 1629277322

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 3705 MISSION BLVD
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Email: sabay@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

D2. Primary Care Directory

Provider ID: 402851

Provider Gender: Male


License Number: A108228


NPI: 1629277322

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

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Email: sabay@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: 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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 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

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

 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

DE MIK, TRAVIS

Provider ID: 206360

Provider Gender: Male


License Number: A108228


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OBSTETRICS / GYNECOLOGY

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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: 206363

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

D2. Primary Care Directory

MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
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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: 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
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Board Certified Specialty: No

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OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

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OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

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OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

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Cultural Competency: N
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Grossmont Hospital

Board Certified Specialty: No


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Medi-Cal Open Panel: Y
Min/Max Age: 0\150

American Sign Language (ASL):

D2. Primary Care Directory

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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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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 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):

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 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

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Medi-Cal Open Panel: Y

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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

D2. Primary Care Directory

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
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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

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

 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

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
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

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,
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Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

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Email: sabay@fhcsd.org

Medi-Cal Open Panel: Y

D2. Primary Care Directory

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


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

Board Certified Specialty: No

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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


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

 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

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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Medi-Cal Open Panel: Y

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American Sign Language (ASL):

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Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

FOLCH TORRES-AGUIAR, BEATRIZ

Provider ID: 206362

Provider Gender: Female

License Number: A148014

NPI: 1457794752



 Provider English Spoken: Y






D2. Primary Care Directory

 *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*
 *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







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
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



HANLEY, LAUREN



Provider ID: 206363
Provider Gender: Female
License Number: C174771
NPI: 1053392035
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
 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



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):
N
 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-5:00PM


OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206360
Provider Gender: Female
License Number: C174771
NPI: 1053392035
 *Provider English Spoken: Y*
 *Provider Language(s)*



D2. Primary Care Directory





Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No


 1809 NATIONAL AVE
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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

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN



Provider ID: 206360
Provider Gender: Female
License Number: C174771
NPI: 1053392035
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No

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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


HANLEY, LAUREN


Provider ID: 206363
Provider Gender: Female
License Number: C174771
NPI: 1053392035
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No

 4725 MARKET ST
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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

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN





Provider ID: 402851
Provider Gender: Female
License Number: C174771
NPI: 1053392035
 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No


 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

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
 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424

D2. Primary Care Directory


 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


HANLEY, LAUREN

Provider ID: 402851

Provider Gender: Female

License Number: C174771

NPI: 1053392035

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No

 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


LIPSCHITZ, LISA

Provider ID: 402851

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP
CORONADO HOSP AND


HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,


GROSSMONT HOSPITAL

Board Certified Specialty: No

 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-5:00PM
TH 9:30AM-6:00PM

OBSTETRICS / GYNECOLOGY


LIPSCHITZ, LISA

Provider ID: 416831

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP


CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS


MERCY HOSPITAL,


GROSSMONT HOSPITAL


Board Certified Specialty: No

 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

LIPSCHITZ, LISA

Provider ID: 206362

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP


CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,





GROSSMONT HOSPITAL

Board Certified Specialty: No

 3544 30TH ST





SAN DIEGO, CA 92104

D2. Primary Care Directory

 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

LIPSCHITZ, LISA

Provider ID: 416831
Provider Gender: Female
License Number: A72005
NPI: 1649208711
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
 3514 30TH ST
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 Phone: (619) 515-2424
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Medi-Cal Open Panel: Y
Min/Max Age: 0\18
American Sign Language (ASL): N
 Accessibility: CONTACT

PROVIDER

OBSTETRICS / GYNECOLOGY




LIPSCHITZ, LISA

Provider ID: 402851
Provider Gender: Female
License Number: A72005
NPI: 1649208711
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
 3705 MISSION BLVD
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 Phone: (619) 515-2444
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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
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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 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

LIPSCHITZ, LISA

Provider ID: 206360
Provider Gender: Female
License Number: A72005
NPI: 1649208711
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
 1809 NATIONAL AVE


D2. Primary Care Directory

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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-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY






LIPSCHITZ, LISA


Provider ID: 206360
Provider Gender: Female
License Number: A72005
NPI: 1649208711
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
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OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206362
Provider Gender: Female
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Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
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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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OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA



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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
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

LOEFFLER, ALLISON

Provider ID: 206363
Provider Gender: Female
License Number: A116680
NPI: 1700073962
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No

D2. Primary Care Directory

 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




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
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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

OBSTETRICS / GYNECOLOGY




LOEFFLER, ALLISON


Provider ID: 206360
Provider Gender: Female
License Number: A116680
NPI: 1700073962

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 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

LOEFFLER, ALLISON

Provider ID: 206360
Provider Gender: Female
License Number: A116680




NPI: 1700073962

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 1809 NATIONAL AVE
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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

LOEFFLER, ALLISON

Provider ID: 206363
Provider Gender: Female
License Number: A116680
NPI: 1700073962

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,


D2. Primary Care Directory

SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

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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

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

OBSTETRICS / GYNECOLOGY


LOEFFLER, ALLISON

Provider ID: 402851

Provider Gender: Female

License Number: A116680

NPI: 1700073962

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 3705 MISSION BLVD
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515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


LOEFFLER, ALLISON

Provider ID: 402851

Provider Gender: Female

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 Provider Language(s)
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Cultural Competency: N


Hospital Affiliation:

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CHULA VISTA

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 416831

Provider Gender: Female

License Number: A116680

NPI: 1700073962

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 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):

 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

D2. Primary Care Directory

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):

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 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


LOEFFLER, ALLISON

Provider ID: 416831

Provider Gender: Female

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NPI: 1700073962

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Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

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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

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OBSTETRICS / GYNECOLOGY


MELENDEZ BERRIOS, IARA DEL


Provider ID: 206362

Provider Gender: Female

License Number: A114181

NPI: 1740514249

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 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
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GROSSMONT 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

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

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

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Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Y

D2. Primary Care Directory

Min/Max Age: 0\18

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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Min/Max Age: 0\150

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 Accessibility: CONTACT
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OBSTETRICS / GYNECOLOGY


MELENDEZ BERRIOS, IARA DEL

Provider ID: 402851

Provider Gender: Female

License Number: A114181

NPI: 1740514249

 Provider English Spoken: Y

 Provider Language(s)
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Cultural Competency: N


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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

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Email: nancyl@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 8:30AM-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,


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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

D2. Primary Care Directory

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

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Email: dalvarado@fhcsd.org

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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


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

 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

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

D2. Primary Care Directory

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

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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
SAN DIEGO, CA 92109

Phone: (616) 515-2444

After Hours Phone: (616)
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

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

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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

D2. Primary Care Directory

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: 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

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Medi-Cal Open Panel: Y

Min/Max Age: 0\18

American Sign Language (ASL):

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OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 206362

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)
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Cultural Competency: N

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MERCY HOSPITAL, SHARP

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PROVIDER

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

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 206360

Provider Gender: Male

License Number: A154298

NPI: 1710316450

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Provider Language(s)
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Cultural Competency: N

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MERCY HOSPITAL, SHARP

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Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

D2. Primary Care Directory

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


RODRIGUEZ JEREZ, ROBERTO

Provider ID: 206360

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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

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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

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

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 206363

Provider Gender: Male

License Number: A154298

NPI: 1710316450

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

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MERCY HOSPITAL, SHARP

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American Sign Language (ASL):

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 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

 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

D2. Primary Care Directory

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

 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

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

 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

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: 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

 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

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

D2. Primary Care Directory

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

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: 402851
Provider Gender: Female
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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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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

D2. Primary Care Directory

 *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)
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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-5:30PM
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: 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

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American Sign Language (ASL): N
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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
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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
Hours: M-TH 8:00AM-5:00PM





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
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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


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


D2. Primary Care Directory

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](http://www.syhealth.org/clinics/king-chavez-health-center)
/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

 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [www.syhealth.org](http://www.syhealth.org/clinics/king-chavez-health-center)
/clinics/king- chavez- healt
h- center
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

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](http://www.syhealth.org/clinics/king-chavez-health-center)
/clinics/king- chavez- healt
h- center
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

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,

D2. Primary Care Directory

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: 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

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

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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

D2. Primary Care Directory

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

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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

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: 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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Min/Max Age: 0\150

American Sign Language (ASL):
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Accessibility: CONTACT

PROVIDER

Hours: M-TH 8:30AM-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

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OBSTETRICS / GYNECOLOGY

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Provider Gender: Female

License Number: 20A11535


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D2. Primary Care Directory

 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
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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: 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

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
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 **ZIEG, ALAN**

Provider ID: 402851
Provider Gender: Male
License Number: G78814
NPI: 1699790634
 Provider English Spoken: Y
Cultural Competency: N

D2. Primary Care Directory

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: 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)
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

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:


D2. Primary Care Directory


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: 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):

 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

D2. Primary Care Directory

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

D2. Primary Care Directory

 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


D2. Primary Care Directory

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

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)

D2. Primary Care Directory

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

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


D2. Primary Care Directory

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

D2. Primary Care Directory


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

D2. Primary Care Directory

 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
 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

D2. Primary Care Directory

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.org

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.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

D2. Primary Care Directory

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.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

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

D2. Primary Care Directory

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): **DIXON, SARAH**

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

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

D2. Primary Care Directory

 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

D2. Primary Care Directory

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

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

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


D2. Primary Care Directory


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,

D2. Primary Care Directory

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






D2. Primary Care Directory

 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)

D2. Primary Care Directory

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


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


D2. Primary Care Directory


 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

D2. Primary Care Directory

American Sign Language (ASL): *Provider Gender: Female*
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

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

D2. Primary Care Directory

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

 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

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

D2. Primary Care Directory

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, 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:

D2. Primary Care Directory

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

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


RODRIGUEZ, ALDO


Provider ID: 451167

Provider Gender: Male

License Number: A134995

NPI: 1508209651

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Portuguese,
Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

 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

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

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

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

D2. Primary Care Directory

 *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


D2. Primary Care Directory

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): License Number: A45942

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

D2. Primary Care Directory

 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: 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: 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

D2. Primary Care Directory

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: 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

D2. Primary Care Directory

Board Certified Specialty: No N

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):

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

D2. Primary Care Directory

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

D2. Primary Care Directory

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

D2. Primary Care Directory

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: 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

ZAHEER, AARON

Provider ID: 233532

Provider Gender: Male

License Number: A61238

NPI: 1902882301

D2. Primary Care Directory

 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








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


D2. Primary Care Directory

 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

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

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

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

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

D2. Primary Care Directory

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

D2. Primary Care Directory

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

D2. Primary Care Directory

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)

D2. Primary Care Directory

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, KRYSTA

Provider ID: 206363
Provider Gender: Female
License Number: PA58505
NPI: 1104203454

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No

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)

D2. Primary Care Directory

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: 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: 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: 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

D2. Primary Care Directory

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

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: 417987

D2. Primary Care Directory

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

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

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)

D2. Primary Care Directory

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*

D2. Primary Care Directory


 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


D2. Primary Care Directory


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

D2. Primary Care Directory


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

D2. Primary Care Directory

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: 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: 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: 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

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

D2. Primary Care Directory

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.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

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.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

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

D2. Primary Care Directory

 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

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


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

D2. Primary Care Directory


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


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

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

D2. Primary Care Directory

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: 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

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



D2. Primary Care Directory

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: 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

D2. Primary Care Directory

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

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

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

 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

 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):

D2. Primary Care Directory


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
 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: 482070
Provider Gender: Male
License Number: G70886
NPI: 1952386765
 *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-9:00PM

W-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

 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

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**

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
 *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*

N

 *Accessibility: CONTACT PROVIDER*

PREVENTATIVE MEDICINE **GENERAL**

ROMERO, CAMILA

Provider ID: 206046
Provider Gender: Female

D2. Primary Care Directory

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


 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

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

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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

 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

 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

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

Board Certified Specialty: No


D2. Primary Care Directory






 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

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
 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

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

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

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
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


CUMMINGS, GEORGE

Provider ID: 417937
Provider Gender: Male

D2. Primary Care Directory

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

 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

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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): Cultural Competency: N

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

 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

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

D2. Primary Care Directory

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

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

 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

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

 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

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
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

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
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

D2. Primary Care Directory

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

 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

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

 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

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

 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 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

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 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

 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

D2. Primary Care Directory

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

 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


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

D2. Primary Care Directory

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

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
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

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






D2. Primary Care Directory

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: 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):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

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):
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
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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

SAN MARCOS

CERTIFIED NURSE



PRACTITIONER

BINETTE, DONYA

Provider ID: 206426
Provider Gender: Female

D2. Primary Care Directory



License Number: NP95001653
NPI: 1427325166

 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

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 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

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 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

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 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

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 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

BINETTE, DONYA


Provider ID: 206426

Provider Gender: Female

License Number: NP95001653

D2. Primary Care Directory

NPI: 1427325166


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

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

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 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

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 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

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 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

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 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

CERTIFIED NURSE

PRACTITIONER

DOAN, CHINH


Provider ID: 206426

Provider Gender: Female

License Number: NP18874

D2. Primary Care Directory

NPI: 1083845069


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Vietnamese

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


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 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


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

 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

D2. Primary Care Directory

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

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Provider Language(s)
Spoken: Arabic

Cultural Competency: N

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Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL):  150 VALPRED A RD
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

FODDA, RAMI

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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

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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

FREEMAN, WANDA

Provider ID: 206426

D2. Primary Care Directory

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
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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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PROVIDER

CERTIFIED NURSE
PRACTITIONER

FREEMAN, WANDA
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NPI: 1659504264
 Provider English Spoken: Y
Cultural Competency: N
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PRACTITIONER
FREEMAN, WANDA



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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
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
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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

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

D2. Primary Care Directory

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):
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PROVIDER

CERTIFIED NURSE

PRACTITIONER


HENLEY, MEARA

Provider ID: 206426

Provider Gender: Female

License Number: NP95002545




NPI: 1538319645

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No

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CERTIFIED NURSE

PRACTITIONER


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Provider ID: 206426

Provider Gender: Female

License Number: NP95002545



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 Provider Language(s)
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Provider Gender: Female

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 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

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

D2. Primary Care Directory

Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

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

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

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

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

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

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

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

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

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):

D2. Primary Care Directory

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER


KOUSARI, JHALEH

Provider ID: 206426

Provider Gender: Female

License Number: NP20893

NPI: 1811262405

 *Provider English Spoken: Y*

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

Cultural Competency: N


Hospital Affiliation: SCRIPPS


GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

 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

MACIAS, ALISSA

Provider ID: 206426

Provider Gender: Female


License Number: NP21368


NPI: 1952658445

 *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

MACIAS, ALISSA

Provider ID: 206426

Provider Gender: Female


License Number: NP21368


NPI: 1952658445

 *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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 *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

MACIAS, ALISSA

Provider ID: 206426

Provider Gender: Female


License Number: NP21368


NPI: 1952658445

 *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):

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 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

MACIAS, ALISSA

Provider ID: 206426

Provider Gender: Female


License Number: NP21368


NPI: 1952658445

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 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

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

D2. Primary Care Directory

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

 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

MACIAS, ALISSA

Provider ID: 206426

Provider Gender: Female


License Number: NP21368


NPI: 1952658445

 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 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

 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

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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Medi-Cal Open Panel: Y

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 Accessibility: CONTACT
PROVIDER

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

SA 8:00AM-5:00PM

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

 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

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

D2. Primary Care Directory

SA 8:00AM-5:00PM

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

 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):

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 Accessibility: CONTACT
PROVIDER

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

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CERTIFIED REGISTERED

NURSE MIDWIFE

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Cultural Competency: N


Hospital Affiliation: PALOMAR


MEDICAL CENTER

Board Certified Specialty: No

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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

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

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

 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 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

D2. Primary Care Directory

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 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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PROVIDER

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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

FAMILY PRACTICE

MATIAS, JULIE

Provider ID: 206426



D2. Primary Care Directory


Provider Gender: Female
License Number: 20A15159
NPI: 1083094510

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

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

 150 VALPRED A 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

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

 150 VALPRED A RD
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FAMILY PRACTICE



MATIAS, JULIE


Provider ID: 206426
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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



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

 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):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MATIAS, JULIE

Provider ID: 206426
Provider Gender: Female
License Number: 20A15159
NPI: 1083094510

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


D2. Primary Care Directory

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*

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*

 *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

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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*

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: 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


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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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PROVIDER*

*Hours: M-F 8:00AM-5:00PM
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FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 206426


Provider Gender: Male

License Number: C54157

NPI: 1275630618


 *Provider English Spoken: Y*


D2. Primary Care Directory

 *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):
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 *Accessibility: CONTACT
PROVIDER*

*Hours: M-F 8:00AM-5:00PM
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FAMILY PRACTICE


NATH, DEVARSHI


Provider ID: 206426

Provider Gender: Male

License Number: C54157

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 *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*

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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

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*Hours: M-F 8:00AM-5:00PM
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FAMILY PRACTICE


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Provider ID: 206426

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 *Provider Language(s)
Spoken: Bengali*

Cultural Competency: N

Board Certified Specialty: No

 150 VALPRED A RD
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 *Phone: (760) 736-6767*

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Min/Max Age: 0\150

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PROVIDER*

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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
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


D2. Primary Care Directory

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
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American Sign Language (ASL):
N
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PROVIDER

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 614511
Provider Gender: Male
License Number: C54157
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 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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PROVIDER




FAMILY PRACTICE





NATH, DEVARSHI

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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 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


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 A RD
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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

D2. Primary Care Directory



 *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*

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 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):
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 *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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FAMILY PRACTICE

SAFI, ROOZCHEHR

Provider ID: 206426
Provider Gender: Female
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 *Provider English Spoken: Y*
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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*

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 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*

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 A RD
SAN MARCOS, CA 92069



D2. Primary Care Directory

 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


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 VALPREDA RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
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 Website: www.ihpsocal.org
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Min/Max Age: 0\150
American Sign Language (ASL):
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 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

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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):
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 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

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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

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 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


FQHC

TRUECARE,

Provider ID: 614511
NPI: 1598484255

 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

D2. Primary Care Directory

Hours: M-F 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)
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 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

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

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FQHC


TRUECARE,

Provider ID: 614511

NPI: 1598484255

 Provider English Spoken: Y
Cultural Competency: N

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PROVIDER

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

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

FQHC


TRUECARE,

Provider ID: 614511

NPI: 1811617939

 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

FQHC


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Provider ID: 614511

NPI: 1811617939

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Cultural Competency: N

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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

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


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

 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

D2. Primary Care Directory

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

FQHC


TRUECARE,

Provider ID: 206426

NPI: 1811617939

 Provider English Spoken: Y
Cultural Competency: N

 150 VALPRED A RD
SAN MARCOS, CA 92069

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

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

D2. Primary Care Directory

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

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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

 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):
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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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

GENERAL PRACTICE

WITCZAK, IZABELA

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NPI: 1184735201

 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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PROVIDER

GENERAL PRACTICE

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ENCINITAS

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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

GENERAL PRACTICE

D2. Primary Care Directory


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

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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

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 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):
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

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 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

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Spoken: Spanish

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

INTERNAL MEDICINE

PONIACHIK, SAMUEL


Provider ID: 206426

Provider Gender: Male

D2. Primary Care Directory

License Number: G74757

NPI: 1467485078


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 150 VALPRED A RD
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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

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PROVIDER

INTERNAL MEDICINE

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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 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


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 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):

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 Accessibility: CONTACT
PROVIDER

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

SA 8:00AM-5:00PM

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 Provider Language(s)
Spoken: Farsi, 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):

D2. Primary Care Directory


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
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*
 *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


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 VALPREDA RD*
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Medi-Cal Open Panel: Y
Min/Max Age: 0\150
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OBSTETRICS / GYNECOLOGY


MOSTOFIAN, EIMANEH

Provider ID: 206426
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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*
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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




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

D2. Primary Care Directory

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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736-6767

 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

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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 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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 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


POUNTNEY, MARLENE

Provider ID: 206426

Provider Gender: Female

License Number: A93248

NPI: 1174703680

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 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR, PALOMAR


MEDICAL CENTER

Board Certified Specialty: No

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OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

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MEDICAL CTR, PALOMAR


MEDICAL CENTER

Board Certified Specialty: No

 150 VALPRED A RD

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OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

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Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR, PALOMAR


MEDICAL CENTER

Board Certified Specialty: No

 150 VALPRED A RD

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 Phone: (760) 736-6767

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 Website: www.ihpsocal.org

Medi-Cal Open Panel: Y

D2. Primary Care Directory

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 **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

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Medi-Cal Open Panel: Y

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American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
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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
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Min/Max Age: 0\150

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 Accessibility: CONTACT
PROVIDER

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

D2. Primary Care Directory

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



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


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

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
 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Y
Min/Max Age: 0\150

D2. Primary Care Directory

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 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): 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

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): 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

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Min/Max Age: 0\150

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 Accessibility: CONTACT PROVIDER

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NPI: 1215135306

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 Provider Language(s)
Spoken: Hindi, Spanish


Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

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SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL): Cultural Competency: N
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

MATIAS, JULIE

Provider ID: 661065

Provider Gender: Female

NPI: 1083094510

 Provider English Spoken: Y





 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No



 150 VALPRED A RD
SAN MARCOS, CA 92069






D2. Primary Care Directory

 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
 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

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
 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

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
 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

POSADAS, EMERITO


Provider ID: 206426

D2. Primary Care Directory

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

 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


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

 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


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

 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


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

D2. Primary Care Directory

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

 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

 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

 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

 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

D2. Primary Care Directory

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

 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

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)
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):

D2. Primary Care Directory

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

BERNARDO, RACHELLE

Provider ID: 614511

Provider Gender: Female

License Number: PA17718

NPI: 1821237678

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

 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) 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) 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):

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 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

BERNARDO, RACHELLE

Provider ID: 614511

Provider Gender: Female

License Number: PA17718

NPI: 1821237678

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

 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

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

D2. Primary Care Directory

American Sign Language (ASL): *Medi-Cal Open Panel: Y*
N

 *Accessibility: CONTACT PROVIDER*

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
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Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

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

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American Sign Language (ASL):
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PHYSICIANS ASSISTANT

BLAKESPEAR, JEREMY

Provider ID: 206426

Provider Gender: Male


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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*

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):
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:

D2. Primary Care Directory

GROSSMONT HOSPITAL
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

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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Website: www.ihpsocal.org
Medi-Cal Open Panel: Y
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
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Min/Max Age: 0\150
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N
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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
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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

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
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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

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

D2. Primary Care Directory

 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

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
 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

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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 Website: www.ihpsocal.org
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PHYSICIANS ASSISTANT

KOSEL, MATTHEW

Provider ID: 206426

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License Number: PA17101


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PHYSICIANS ASSISTANT

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License Number: PA17101


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KOSEL, MATTHEW

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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

PHYSICIANS ASSISTANT

KOSEL, MATTHEW

Provider ID: 206426

Provider Gender: Male

D2. Primary Care Directory

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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736-6767
 Website: www.ihpsocal.org
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):
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
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736-6767
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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
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 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
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PROVIDER



PHYSICIANS ASSISTANT

SPENCE, JAMIE

Provider ID: 206426
Provider Gender: Female
License Number: PA21723
NPI: 1518133032
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
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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

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

D2. Primary Care Directory

 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

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
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 Phone: (760) 736-6767
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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

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
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
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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



PHYSICIANS ASSISTANT

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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
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 Accessibility: CONTACT
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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
NPI: 1295147387
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi
Cultural Competency: N

D2. Primary Care Directory

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

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
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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

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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

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

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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

D2. Primary Care Directory

 *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*

 *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


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

D2. Primary Care Directory

 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
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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

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
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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

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

D2. Primary Care Directory

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

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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

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

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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

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
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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


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

D2. Primary Care Directory

 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

D2. Primary Care Directory

 *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*

D2. Primary Care Directory

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

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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

D2. Primary Care Directory

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

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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

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

D2. Primary Care Directory

 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


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

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


D2. Primary Care Directory

- 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


D2. Primary Care Directory


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

 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

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


D2. Primary Care Directory

/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

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

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



- center
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

CORONADO, MYRNA


Provider ID: 206292

D2. Primary Care Directory

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: 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/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


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/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


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

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

D2. Primary Care Directory

| | | |
|--|---|--|
| <p>PROVIDER</p> <p>FAMILY PRACTICE</p> <p>DALUGDUGAN, ESTHER</p> <p>Provider ID: 206292</p> <p>Provider Gender: Female</p> <p>License Number: A112511</p> <p>NPI: 1962662718</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Tagalog</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SHARP CHULA VISTA MED CTR</p> <p>Board Certified Specialty: No</p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p> Website: www.syhealth.org/clinics/san-ysidro-health-center</p> <p>Medi-Cal Open Panel: Y</p> <p>Min/Max Age: 0\150</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> | <p>MERCY HOSPITAL CHULA VISTA, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL</p> <p>Board Certified Specialty: No</p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p> Website: www.syhealth.org/clinics/san-ysidro-health-center</p> <p>Medi-Cal Open Panel: Y</p> <p>Min/Max Age: 0\150</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Hours: M-F 8:00AM-5:30PM SA 8:30AM-2:00PM</p> | <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p> Website: www.syhealth.org/clinics/san-ysidro-health-center</p> <p>Medi-Cal Open Panel: Y</p> <p>Min/Max Age: 0\150</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Hours: M-F 8:00AM-5:30PM SA 8:30AM-2:00PM</p> |
| <p>FAMILY PRACTICE</p> <p>ESTRADA, JOHANNA</p> <p>Provider ID: 206292</p> <p>Provider Gender: Female</p> <p>License Number: A127188</p> <p>NPI: 1255698155</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL</p> <p>Board Certified Specialty: No</p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p> Website: www.syhealth.org/clinics/san-ysidro-health-center</p> <p>Medi-Cal Open Panel: Y</p> <p>Min/Max Age: 0\150</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> | <p>FAMILY PRACTICE</p> <p>HEINRICI, ALEKA</p> <p>Provider ID: 206292</p> <p>Provider Gender: Female</p> <p>License Number: A125329</p> <p>NPI: 1780979120</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL</p> <p>Board Certified Specialty: No</p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p> Website: www.syhealth.org/clinics/san-ysidro-health-center</p> <p>Medi-Cal Open Panel: Y</p> <p>Min/Max Age: 0\150</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> | <p>FAMILY PRACTICE</p> <p>ESTRADA, JOHANNA</p> <p>Provider ID: 206292</p> <p>Provider Gender: Female</p> <p>License Number: A127188</p> <p>NPI: 1255698155</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL</p> <p>Board Certified Specialty: No</p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p> Website: www.syhealth.org/clinics/san-ysidro-health-center</p> <p>Medi-Cal Open Panel: Y</p> <p>Min/Max Age: 0\150</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> |

D2. Primary Care Directory

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

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>

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>

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>

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>

D2. Primary Care Directory

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

 4004 BEYER 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

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


D2. Primary Care Directory

 *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*
 *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

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)*






D2. Primary Care Directory

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

D2. Primary Care Directory

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

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

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

D2. Primary Care Directory

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

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

D2. Primary Care Directory

 *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

D2. Primary Care Directory

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
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

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: 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

D2. Primary Care Directory

 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

 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

D2. Primary Care Directory

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)
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

D2. Primary Care Directory

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

 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

D2. Primary Care Directory

 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


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

 4004 BEYER 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

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
 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

STALEY, MICHAELA

Provider ID: 206292

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
 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):

D2. Primary Care Directory

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

 *4004 BEYER 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

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 SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*

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

 *Website: www.syhealth.org*

D2. Primary Care Directory

/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
 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

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
 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






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
 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

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
 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

VAN HOLLEBEKE, RACHEL

Provider ID: 206292
Provider Gender: Female
License Number: A177337
NPI: 1497217756

D2. Primary Care Directory

 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

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


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

D2. Primary Care Directory

 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

D2. Primary Care Directory

Min/Max Age: 0\150

American Sign Language (ASL): Provider Gender: Male

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

D2. Primary Care Directory

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

 4004 BEYER 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

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

 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

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

 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

D2. Primary Care Directory

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
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

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

 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

CHEN, TSUH YIN

Provider ID: 206292

Provider Gender: Female

License Number: C55563

NPI: 1093803520

Provider English Spoken: Y
 Provider Language(s)
Spoken: Portuguese,

D2. Primary Care Directory

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
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

DE LA ROSA, JOSE

Provider ID: 206292

Provider Gender: Male

License Number: A49267

NPI: 1689646572

Provider English Spoken: Y

Cultural Competency: N

D2. Primary Care Directory

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

D2. Primary Care Directory

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
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: 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

D2. Primary Care Directory

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:

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:


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

D2. Primary Care Directory

 *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

 *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

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

D2. Primary Care Directory

 4004 BEYER 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

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
 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
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

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

D2. Primary Care Directory

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

 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

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




D2. Primary Care Directory




 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
 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

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
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

D2. Primary Care Directory

enter
Medi-Cal Open Panel: Y
Min/Max Age: 0\150
American Sign Language (ASL): 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
American Sign Language (ASL): 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
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/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

D2. Primary Care Directory

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/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

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


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

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
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

- center

Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CARR, MIANDA

Provider ID: 227411

Provider Gender: Female

License Number: A104660


NPI: 1083815823


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: ST
JOSEPHS MEDICAL CENTER,
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/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

CARR, MIANDA





Provider ID: 227411


Provider Gender: Female

D2. Primary Care Directory

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
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

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
 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

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

 4004 BEYER 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

D2. Primary Care Directory

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: 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

4004 BEYER BLVD
SAN YSIDRO, CA 92173

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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

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

D2. Primary Care Directory

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

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

☎ 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

DINH, MY

Provider ID: 227411

Provider Gender: Female

License Number: 20A9907

NPI: 1316146996

☑ 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

OBSTETRICS / GYNECOLOGY

DINH, MY

Provider ID: 227411

Provider Gender: Female

License Number: 20A9907

NPI: 1316146996

☑ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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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

PROVIDER

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

☎ 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

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

D2. Primary Care Directory

MEMORIAL HOSPITAL,
SCRIPPS MERCY 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/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
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

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
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

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: 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


D2. Primary Care Directory



 *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
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

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
 *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

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
 *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

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


D2. Primary Care Directory


 *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 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

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*


D2. Primary Care Directory

- 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

D2. Primary Care Directory

 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
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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

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):

D2. Primary Care Directory

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: 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

D2. Primary Care Directory

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

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/clinics/maternal-child-health-center

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/clinics/maternal-child-health-center

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/clinics/maternal-child-health-center

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/clinics/maternal-child-health-center


Medi-Cal Open Panel: Y

Min/Max Age: 0\150

American Sign Language (ASL):

D2. Primary Care Directory

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

D2. Primary Care Directory

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-center

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-center

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

D2. Primary Care Directory

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-c

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


D2. Primary Care Directory


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: 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

 4004 BEYER 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-7:30PM
SA 8:30AM-2:00PM

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
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




D2. Primary Care Directory

s/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: 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
 4004 BEYER 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-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
 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






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
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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

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
 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

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)






D2. Primary Care Directory

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

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

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
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

 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

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
 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

GI, HUNG

Provider ID: 206292
Provider Gender: Male
License Number: PA16994
NPI: 1023207404
 Provider English Spoken: Y
 Provider Language(s)



D2. Primary Care Directory

Spoken: Chinese, French, 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

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
 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

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: <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

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: <https://www.syhealth.org/locations>



[alth.org/locations](http://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


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


D2. Primary Care Directory


 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

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/clinics/maternal-child-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/clinics/maternal-child-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


 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


 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


D2. Primary Care Directory


 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

 4004 BEYER 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

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):
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):
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):
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

D2. Primary Care Directory

 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








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
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

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
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


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
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

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

D2. Primary Care Directory

HEALTHCARE CTR

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

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

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

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

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

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

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: [https://www.syhealth.org/locations](http://www.syhealth.org/locations)

Medi-Cal Open Panel: 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

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

REGISTERED PHYSICAL


THERAPIST



TORRES, JOANN

Provider ID: 206292


D2. Primary Care Directory

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
 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

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

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

D2. Primary Care Directory

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

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)

D2. Primary Care Directory

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

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

BACHARACH, REBECCA

Provider ID: 206361

Provider Gender: Female

License Number: 20A15459

NPI: 1225442643

Provider English Spoken: Y

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

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

D2. Primary Care Directory

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):
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

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):
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

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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 8:30AM-5:30PM

TU 8:30AM-7:00PM

D2. Primary Care Directory

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

 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): NPI: 1619397031

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

 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


D2. Primary Care Directory

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

D2. Primary Care Directory

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

D2. Primary Care Directory

 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): Board Certified Specialty: No

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


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

D2. Primary Care Directory

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

 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


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

 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

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
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

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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 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

D2. Primary Care Directory

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
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

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

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

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):

D2. Primary Care Directory

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

 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


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

 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

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

 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

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

 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):

D2. Primary Care Directory

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

 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

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

 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

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

 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

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*

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

WINESBURG, JENNIFER

Provider ID: 206361

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y


Provider Language(s) Spoken: Spanish


D2. Primary Care Directory

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


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


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

 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 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

 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 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
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

PEDIATRICS

JI, AMANDA


Provider ID: 206361

Provider Gender: Female

License Number: A169342

NPI: 1750745493

 Provider English Spoken: Y

 Provider Language(s)

D2. Primary Care Directory

Spoken: Spanish
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

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
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

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
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

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
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

FAMILY PRACTICE

AYON MARTINEZ, CARLOS

Provider ID: 519918
Provider Gender: Male

D2. Primary Care Directory

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

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

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

D2. Primary Care Directory

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):

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

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):

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):

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):

D2. Primary Care Directory



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: 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






D2. Primary Care Directory

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: 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: 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

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

D2. Primary Care Directory

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

D2. Primary Care Directory


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): Provider Gender: Male

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

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

D2. Primary Care Directory

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):






D2. Primary Care Directory

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*

D2. Primary Care Directory

 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

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.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


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

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760) 631-5000

 Website: www.vistacommunityclinic.org

D2. Primary Care Directory

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

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 9:00AM-2:00PM

F 8:00AM-5:00PM

SA 8:00AM-4:00PM

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 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)

D3. Specialist Provider Directory

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


D3. Specialist Provider Directory

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, 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

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

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

 6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

 Phone: (800) 926-8273

D3. Specialist Provider Directory

 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


D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

 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


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: 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

D3. Specialist Provider Directory

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


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

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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory


 *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: 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**

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

D3. Specialist Provider Directory

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


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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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):

D3. Specialist Provider Directory

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

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CHULA VISTA

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

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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

D3. Specialist Provider Directory


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: 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

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

JOHNSON, KENNETH

Provider ID: 262288


Board Certified Specialty: No

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory


 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):

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 *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):

D3. Specialist Provider Directory

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*

D3. Specialist Provider Directory

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: 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

VIDEEN, JOHN









Provider ID: 65646

Board Certified Specialty: No

752 MEDICAL CENTER CT
STE 302







CHULA VISTA, CA 91911

D3. Specialist Provider Directory

 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






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

D3. Specialist Provider Directory

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: 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

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

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

D3. Specialist Provider Directory

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: 244753


Board Certified Specialty: No


D3. Specialist Provider Directory

 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

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

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: 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

D3. Specialist Provider Directory

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



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








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: 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

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: 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*

D3. Specialist Provider Directory

PROVIDER
Hours: M-F
9:00AM-6:00PM
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: 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: 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory


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

D3. Specialist Provider Directory

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

☑ 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

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

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

D3. Specialist Provider Directory

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): After Hours Phone: (619) 662-4100

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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 AVESTE A
CHULA VISTA, CA 91911
 *Phone: (619) 205-4585*
Fax: (619) 271-3183
 *After Hours Phone: (619) 205-4585*
Provider Gender: Female
NPI: 1063170603
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Medi-Cal Open Panel: 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)*

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

American Sign Language (ASL):  Phone: (619) 623-3000
N  Fax: (619) 623-3001

 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

 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

D3. Specialist Provider Directory

8:00AM-4:00PM
Website: N/A

RHEUMATOLOGY

REDDY, DANA

Provider ID: 244971

Board Certified Specialty: No

333 H ST STE 5000

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)

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory


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

 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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: 303814

D3. Specialist Provider Directory

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: 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

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: 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

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

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)

D3. Specialist Provider Directory

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: 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

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory


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)

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory


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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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*

Medi-Cal Open Panel: 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

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

D3. Specialist Provider Directory


 *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: 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*

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

D3. Specialist Provider Directory

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: 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

HOSPICE AND PALLIATIVE MEDICINE

RUBENZI, 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

RUBENZI, 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,

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory


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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

 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

DELCORE, 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

D3. Specialist Provider Directory

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

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

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

D3. Specialist Provider Directory

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):  Website: N/A

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

D3. Specialist Provider Directory


CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory




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):

D3. Specialist Provider Directory

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: 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

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

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

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

ESCONDIDO

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

DAIRO, BRANDON

Provider ID: 300090
Board Certified Specialty: No

D3. Specialist Provider Directory

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

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 Accessibility: CONTACT PROVIDER
 Hours: M-F
9:00AM-5:00PM
 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: 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: 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

D3. Specialist Provider Directory

☎ 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):

D3. Specialist Provider Directory

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*

D3. Specialist Provider Directory

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

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 MEMORIAL


HOSPITAL, SCRIPPS MERCY
HOSPITAL


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


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




D3. Specialist Provider Directory

 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






D3. Specialist Provider Directory




 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: 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

D3. Specialist Provider Directory

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: 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: 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

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

D3. Specialist Provider Directory

 Website: N/A


OBSTETRICS / GYNECOLOGY

SHORT, ABIADE

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

D3. Specialist Provider Directory

 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):
N

 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):
N

 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):
N

 Accessibility: CONTACT PROVIDER

D3. Specialist Provider Directory


 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

D3. Specialist Provider Directory


 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory





 *Provider English Spoken: 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 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


D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

📞 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

D3. Specialist Provider Directory


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

D3. Specialist Provider Directory

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 PKWYSTE 200
ESCONDIDO, CA 92029
Phone: (760) 743-4789
Fax: (760) 743-4779
After Hours Phone: (760) 743-4789
Provider Gender: Male
NPI: 1962409938
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: 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 PKWYSTE 220
ESCONDIDO, CA 92029
Phone: (760) 743-0546
Fax: (760) 317-9769
After Hours Phone: (760) 743-0546
Provider Gender: Female
NPI: 1689689176
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: POMONA VALLEY HOSP MED CTR
Medi-Cal Open Panel: 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

D3. Specialist Provider Directory

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



D3. Specialist Provider Directory

 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: 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 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 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

D3. Specialist Provider Directory


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):

D3. Specialist Provider Directory

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH
8:00AM-4:00PM*

 *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*


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*


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: 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*

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





HEMET

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory


 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory


Medi-Cal Open Panel: 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):

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

D3. Specialist Provider Directory

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

Medi-Cal Open Panel: 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








D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

CTR


Medi-Cal Open Panel: 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory


 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





D3. Specialist Provider Directory




 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1346355161
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, UCSD MEDICAL
CTR

Medi-Cal Open Panel: 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

CTR
Medi-Cal Open Panel: 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

D3. Specialist Provider Directory

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: 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: 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: 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 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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

 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: 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

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


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





D3. Specialist Provider Directory

 *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: 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




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

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*

D3. Specialist Provider Directory

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: 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

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

D3. Specialist Provider Directory

 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: 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: 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: 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

D3. Specialist Provider Directory

 9300 CAMPUS 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): Provider Gender: Female

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

D3. Specialist Provider Directory

 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



D3. Specialist Provider Directory

 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: 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

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: 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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


D3. Specialist Provider Directory

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

D3. Specialist Provider Directory


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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 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: 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


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

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: 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





D3. Specialist Provider Directory




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

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 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: 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



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


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

D3. Specialist Provider Directory

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

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):

N

Accessibility: CONTACT
PROVIDER

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

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

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 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

 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory


Medi-Cal Open Panel: 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

D3. Specialist Provider Directory

 *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

D3. Specialist Provider Directory

 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: 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

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


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


D3. Specialist Provider Directory

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: 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

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


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: 300023

D3. Specialist Provider Directory

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

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

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: 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

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

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

D3. Specialist Provider Directory

 *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: 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








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

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

D3. Specialist Provider Directory


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

RUBENSIK, 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 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


D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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: 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

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

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

D3. Specialist Provider Directory

American Sign Language (ASL): Provider English Spoken: Y
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





D3. Specialist Provider Directory

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






D3. Specialist Provider Directory




 9300 CAMPUS 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

D3. Specialist Provider Directory


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




D3. Specialist Provider Directory


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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 *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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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: 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):

D3. Specialist Provider Directory

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

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: 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


BONDRE, IOANA

Provider ID: 284310

D3. Specialist Provider Directory

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

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


D3. Specialist Provider Directory

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

OBSTETRICS / GYNECOLOGY

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









D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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: 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

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

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

D3. Specialist Provider Directory

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: 284296

Board Certified Specialty: No

 9333 GENESEE AVESTE
340
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295263861


 Provider English Spoken: Y
Cultural Competency: N



Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: 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: 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

D3. Specialist Provider Directory

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: 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

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


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):

D3. Specialist Provider Directory

N

 *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

 *After Hours Phone: (858)*

657-6879

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

D3. Specialist Provider Directory


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: 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

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


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

D3. Specialist Provider Directory

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: 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

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

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: 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)

D3. Specialist Provider Directory

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: 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 **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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

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: 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: 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)

D3. Specialist Provider Directory

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: 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: 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: 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

D3. Specialist Provider Directory

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: 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: 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: 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

D3. Specialist Provider Directory

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: 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: 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

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

D3. Specialist Provider Directory

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: 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

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

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

D3. Specialist Provider Directory

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: 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


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

D3. Specialist Provider Directory

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: 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: 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: 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

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

D3. Specialist Provider Directory

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

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: 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: 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

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

D3. Specialist Provider Directory

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: 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

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

D3. Specialist Provider Directory

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: 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

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: 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


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

D3. Specialist Provider Directory

 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: 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 **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 **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

D3. Specialist Provider Directory


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: 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

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

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

VAHABZADEH-HAGH,

D3. Specialist Provider Directory

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: 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

N

Accessibility: CONTACT
PROVIDER

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

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

N

N

Accessibility: CONTACT
PROVIDER

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

D3. Specialist Provider Directory

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


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

N

 Accessibility: CONTACT
PROVIDER

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

 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

N

 Accessibility: CONTACT
PROVIDER

 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

D3. Specialist Provider Directory

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: 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: 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
 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

D3. Specialist Provider Directory

Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): Provider ID: 294828

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

D3. Specialist Provider Directory

*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*

D3. Specialist Provider Directory

 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






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


D3. Specialist Provider Directory

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


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

D3. Specialist Provider Directory

 *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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory


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: 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


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

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):

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 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

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: 298429

D3. Specialist Provider Directory

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

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

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

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

D3. Specialist Provider Directory

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: 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

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

MCADAMS, JOSEPH

Provider ID: 280612

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

D3. Specialist Provider Directory

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: 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

♿ 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

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

D3. Specialist Provider Directory

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

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: 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

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

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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

 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: 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







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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 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)

D3. Specialist Provider Directory

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: 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


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

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

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

D3. Specialist Provider Directory

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

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

D3. Specialist Provider Directory

MEDICAL CTR, UCSD LA JOLLA Fax: (888) 539-8781


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: 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

REED, KRISTIE

Provider ID: 302867

Board Certified Specialty: No

 3344 N TORREY PINES CT
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 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

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):




D3. Specialist Provider Directory

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*

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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: 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

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

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



D3. Specialist Provider Directory

 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 **ITCHIE, 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory


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: 288939

Board Certified Specialty: No

D3. Specialist Provider Directory

 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

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

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 *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: 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

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*




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

D3. Specialist Provider Directory



 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

D3. Specialist Provider Directory

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): Fax: (858) 657-5058

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

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

☎ 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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


D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

*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

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

D3. Specialist Provider Directory

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: 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 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 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

D3. Specialist Provider Directory

 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: 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


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


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: 291383

Board Certified Specialty: No

 9434 MEDICAL CENTER DR

D3. Specialist Provider Directory

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

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: 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
Medi-Cal Open Panel: 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

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

D3. Specialist Provider Directory

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

LA MESA

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): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:30AM-5:00PM
 Website: N/A

CARDIOVASCULAR DISEASE

SHEREV, DIMITRI

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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):
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):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A


HEMATOLOGY / ONCOLOGY

MEDIC, IGOR

Provider ID: 295654

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: 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):

D3. Specialist Provider Directory

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*

D3. Specialist Provider Directory

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: 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

REIMERS, REBECCA

Provider ID: 294654
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

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
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

D3. Specialist Provider Directory

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: 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

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,

D3. Specialist Provider Directory


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


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: 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: 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



D3. Specialist Provider Directory

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: 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: 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

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

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):

D3. Specialist Provider Directory

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*


OTOLARYNGOLOGY

MOSHAGHI, 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

D3. Specialist Provider Directory

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):

N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

D3. Specialist Provider Directory

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

Board Certified Specialty: No

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

D3. Specialist Provider Directory

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

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

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


D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

American Sign Language (ASL): Fax: (619) 460-2774

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

 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

D3. Specialist Provider Directory

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:

D3. Specialist Provider Directory

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)

D3. Specialist Provider Directory

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
LAKEVILLE, 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):
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
LAKEVILLE, 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):
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
LAKEVILLE, 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):
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
LAKEVILLE, 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
LAKEVILLE, 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

D3. Specialist Provider Directory

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


D3. Specialist Provider Directory

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

D3. Specialist Provider Directory





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




D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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


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

 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

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory


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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory





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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory


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

D3. Specialist Provider Directory

American Sign Language (ASL):  25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
 Phone: (951) 696-6124
 Fax: (951) 696-6293
 After Hours Phone: (951)
696-6124

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

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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

 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: UCSF

MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL):



D3. Specialist Provider Directory

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






D3. Specialist Provider Directory


 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

D3. Specialist Provider Directory


 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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):

D3. Specialist Provider Directory

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*

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*

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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: 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
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

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


D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

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

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

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: 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: 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

D3. Specialist Provider Directory

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):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
9:00AM-5:00PM

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

ASLIAN, AZITA

D3. Specialist Provider Directory

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

OBSTETRICS / GYNECOLOGY

CARSON, LATISA

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

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

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

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

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


D3. Specialist Provider Directory

 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


D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

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: 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


D3. Specialist Provider Directory


Min/Max Age: 0\999

American Sign Language (ASL):  4700 N RIVER RD

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: 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):  4700 N RIVER RD

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):  3220 MISSION AVE STE 1

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):  605 CROUCH ST STE C

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):  3220 MISSION AVE STE 1

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

D3. Specialist Provider Directory

 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: 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

HARRIS, PAMELA

Provider ID: 302289

Board Certified Specialty: No

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

D3. Specialist Provider Directory

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: 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: 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: 304494

Board Certified Specialty: No

D3. Specialist Provider Directory

 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: 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


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

D3. Specialist Provider Directory

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: 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: 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

D3. Specialist Provider Directory

 *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)*


D3. Specialist Provider Directory

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: 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

D3. Specialist Provider Directory

 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

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

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: 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: 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 NURSE

D3. Specialist Provider Directory

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: 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 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

D3. Specialist Provider Directory

American Sign Language (ASL):  After Hours Phone: (760) 631-5000

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

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

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


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

D3. Specialist Provider Directory

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: 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

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)*

D3. Specialist Provider Directory

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

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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):

♿ 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


D3. Specialist Provider Directory




 *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




D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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: 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

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

D3. Specialist Provider Directory

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

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

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: 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

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


TRAN, JESSICA

Provider ID: 303732

Board Certified Specialty: No

D3. Specialist Provider Directory

 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: 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


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


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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory







 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

D3. Specialist Provider Directory

 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


D3. Specialist Provider Directory

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):  3231 WARING CT STE K
OCEANSIDE, CA 92056

 *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

 *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

D3. Specialist Provider Directory

American Sign Language (ASL):  Phone: (760) 757-7546
N  Fax: (760) 547-2311

 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

 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)

D3. Specialist Provider Directory

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: 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 **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: 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory


 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

D3. Specialist Provider Directory


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): Provider ID: 296767

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory


 *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: 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

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

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)*

D3. Specialist Provider Directory

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):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:30AM-4:30PM
🌐 Website: N/A

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

D3. Specialist Provider Directory

☎ 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,

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory


 *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




D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

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


D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

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: 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

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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

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


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


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

CARDIOLOGY

SHEREV, DIMITRI

Provider ID: 301306

Board Certified Specialty: No

 6402 EL CAJON BLVD STE
100

D3. Specialist Provider Directory

SAN DIEGO, CA 92115
☎ Phone: (619) 582-4490
☎ Fax: (519) 582-4737
🕒 After Hours Phone: (619) 582-4490
Provider Gender: Male
NPI: 1154323996
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Bulgarian, Russian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, ALVARADO COMMUNITY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC, SHARP CHULA VISTA MED CTR, SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital
Medi-Cal Open Panel: 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

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, 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

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

D3. Specialist Provider Directory

Medi-Cal Open Panel: 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: 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

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: 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

D3. Specialist Provider Directory

 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: 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

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: 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: 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

D3. Specialist Provider Directory

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: 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: 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory


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):
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

D3. Specialist Provider Directory


Medi-Cal Open Panel: 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

 After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1184309684

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N


Medi-Cal Open Panel: 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

D3. Specialist Provider Directory

 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): NPI: 1811543622

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

D3. Specialist Provider Directory

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: 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

D3. Specialist Provider Directory

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


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


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

D3. Specialist Provider Directory

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: 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

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

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

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

HAROUGH, 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):

D3. Specialist Provider Directory

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


D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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): Provider Gender: Female

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): Provider Gender: Female

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




D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

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: (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

F 8:00AM-5:00PM

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

D3. Specialist Provider Directory

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: 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: 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

D3. Specialist Provider Directory

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
After Hours Phone: (800)
926-8273

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

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

D3. Specialist Provider Directory

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: 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: 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

D3. Specialist Provider Directory

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):
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

D3. Specialist Provider Directory

 *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

PAI, SARAH


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: 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*

D3. Specialist Provider Directory

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

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

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


D3. Specialist Provider Directory

Min/Max Age: 18\150

American Sign Language (ASL):  After Hours Phone: (619) 280-2058

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

 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

 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

D3. Specialist Provider Directory

 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

 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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

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): Provider Gender: Female

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): Provider Gender: Female

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): Provider Gender: Female

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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory


Medi-Cal Open Panel: 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

D3. Specialist Provider Directory

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: 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

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

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

 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
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):

D3. Specialist Provider Directory

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: 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

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,*

D3. Specialist Provider Directory


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: 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

GREAR MANN, MELISSA


Provider ID: 210053

Board Certified Specialty: No


D3. Specialist Provider Directory


 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


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

D3. Specialist Provider Directory

 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: 295791
Board Certified Specialty: No
 5354 UNIVERSITY AVE STE
3

D3. Specialist Provider Directory

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

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

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

D3. Specialist Provider Directory

 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
1939

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

D3. Specialist Provider Directory

MERCY HOSPITAL CHULA
VISTA


Medi-Cal Open Panel: Y


Min/Max Age: 0\999

American Sign Language (ASL): Provider ID: 285011

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

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

D3. Specialist Provider Directory

Medi-Cal Open Panel: 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

D3. Specialist Provider Directory

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)

D3. Specialist Provider Directory

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

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

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):

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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):

D3. Specialist Provider Directory

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*

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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, SCHAFER

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

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):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM
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

GUERIN, CHRIS

Provider ID: 284646

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

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


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, KRISTAL

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)

D3. Specialist Provider Directory


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: 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


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*

D3. Specialist Provider Directory

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):

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
Fax: (619) 662-4158

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1316479892

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: CHULA

VISTA COMM HOSP

Medi-Cal Open Panel: 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: 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

D3. Specialist Provider Directory

 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: 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

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

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

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


D3. Specialist Provider Directory


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: 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


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

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

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):

D3. Specialist Provider Directory

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

RISSE, 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

RISSE, 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

D3. Specialist Provider Directory


 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

D3. Specialist Provider Directory

Cultural Competency: N
Medi-Cal Open Panel: 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: 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








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

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*

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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


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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

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): Fax: (858) 966-8550

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

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 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 N
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):

 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)

D3. Specialist Provider Directory

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

RUBENZI, TAMARA


Provider ID: 276671
Board Certified Specialty: No
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

☎ 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,

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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: 293269

 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

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

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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory


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

 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


D3. Specialist Provider Directory




 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: 143775863
 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):
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

D3. Specialist Provider Directory

 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

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: 300010

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: 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

D3. Specialist Provider Directory

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: 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

D3. Specialist Provider Directory

 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):

 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):

 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):

 Accessibility: CONTACT
PROVIDER

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

 Website: N/A

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294647

D3. Specialist Provider Directory

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

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

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):
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

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

D3. Specialist Provider Directory

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

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
8:00AM-5:00PM
 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

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, 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: 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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: 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: 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: 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):

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

D3. Specialist Provider Directory


 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):
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):
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


D3. Specialist Provider Directory

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

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

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

D3. Specialist Provider Directory

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,


D3. Specialist Provider Directory


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

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):

 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
HEALTHCARE RANCHO
SPRINGS HOSPITAL, SCRIPPS
MERCY HOSPITAL, UCSD
MEDICAL CTR, UCSD MEDICAL
CTR, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS
Medi-Cal Open Panel: Y


D3. Specialist Provider Directory

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: 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 N

HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY
HOSPITAL


Medi-Cal Open Panel: Y

Min/Max Age: 0\19

American Sign Language (ASL): 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: 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


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):

 Accessibility: CONTACT
PROVIDER

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

 Website: N/A

NEONATAL / PERINATAL MEDICINE

VOLLER, STEPHANNIE

D3. Specialist Provider Directory


DIEGO

Medi-Cal Open Panel: 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

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

D3. Specialist Provider Directory

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


D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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: 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

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

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

D3. Specialist Provider Directory

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):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

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
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: 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

D3. Specialist Provider Directory

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

 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

D3. Specialist Provider Directory

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: 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

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

D3. Specialist Provider Directory

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

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 **QAYOUMI, WALI**

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

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

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

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)

D3. Specialist Provider Directory

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






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





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





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

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: 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




D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

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): NPI: 1013944636

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

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

D3. Specialist Provider Directory

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: 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

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

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

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

D3. Specialist Provider Directory

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






D3. Specialist Provider Directory

 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: 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

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


D3. Specialist Provider Directory


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


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

 200 W 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

MELLENDEZ, 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):

D3. Specialist Provider Directory

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: 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

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

D3. Specialist Provider Directory


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
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

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

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

D3. Specialist Provider Directory


 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

D3. Specialist Provider Directory

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: 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

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

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: 206548

Board Certified Specialty: No

8929 UNIVERSITY CENTER
LN STE 200

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

D3. Specialist Provider Directory

📞 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: 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

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


D3. Specialist Provider Directory

Medi-Cal Open Panel: 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: 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

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

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






D3. Specialist Provider Directory


 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




D3. Specialist Provider Directory

 *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

D3. Specialist Provider Directory

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

KLINE, 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

D3. Specialist Provider Directory

 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: 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

PHAN, RYAN

D3. Specialist Provider Directory

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: 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

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

D3. Specialist Provider Directory

 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: 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

D3. Specialist Provider Directory

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: 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

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

D3. Specialist Provider Directory

 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: 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): NPI: 1639697451

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

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

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: 301684

Board Certified Specialty: No

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

American Sign Language (ASL): NPI: 1881652972

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

 Provider 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: 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

D3. Specialist Provider Directory

8:00AM-5:00PM
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

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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: 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

D3. Specialist Provider Directory

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

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

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

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

HARRIS, JEFFREY

Provider ID: 299576

Board Certified Specialty: No

D3. Specialist Provider Directory

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

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: 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: 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):

D3. Specialist Provider Directory

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: 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

D3. Specialist Provider Directory

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

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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: 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

D3. Specialist Provider Directory

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

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: 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: 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):

D3. Specialist Provider Directory

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

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


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

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


D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

 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):
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

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: 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


D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 3030 CHILDRENS WAY FL 1 HOSP MED CTR, ALVARADO
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


Medi-Cal Open Panel: 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

D3. Specialist Provider Directory

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: 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

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

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


D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

American Sign Language (ASL): American Sign Language (ASL): Fax: (858) 966-7903

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

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

 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

D3. Specialist Provider Directory

American Sign Language (ASL): Fax: (858) 966-7903

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

 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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory


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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

-  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

D3. Specialist Provider Directory

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): 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

DORWART, ELIZABETH
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

D3. Specialist Provider Directory

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: 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

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

D3. Specialist Provider Directory

PROVIDER
⌚ Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
🌐 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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

 SA 1:00PM-10:00PM
 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


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

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

D3. Specialist Provider Directory








 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory


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

 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

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


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):
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,

D3. Specialist Provider Directory

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

 Website: N/A


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):

 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):

 Accessibility: CONTACT PROVIDER

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

 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):


 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM

D3. Specialist Provider Directory

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 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


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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

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

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

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

D3. Specialist Provider Directory

 Hours: SU 1:00PM-10:00PM Fax: (619) 283-1614

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: 205811

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE
150


SAN DIEGO, CA 92105

 Phone: (619) 280-2905

 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

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

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory





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, 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




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

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





D3. Specialist Provider Directory

 *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*

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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



D3. Specialist Provider Directory

 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):

D3. Specialist Provider Directory

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):

N

 *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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory


CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: 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

D3. Specialist Provider Directory

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: 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

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

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)

D3. Specialist Provider Directory

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

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
🕒 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

D3. Specialist Provider Directory

 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: 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


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

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

D3. Specialist Provider Directory


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: 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


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

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory


CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: 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

D3. Specialist Provider Directory

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

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

D3. Specialist Provider Directory

☎ 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

D3. Specialist Provider Directory

American Sign Language (ASL): Fax: (858) 966-6728

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

 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

 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

D3. Specialist Provider Directory

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: 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

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

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): Provider ID: 287520

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

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

D3. Specialist Provider Directory

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*

D3. Specialist Provider Directory

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: 301589
Board Certified Specialty: No

D3. Specialist Provider Directory

 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: 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: 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


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

GUTH, CARA

Provider ID: 299111

Board Certified Specialty: No

 9333 GENESEE AVE STE
350

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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


D3. Specialist Provider Directory

Min/Max Age: 0\999

American Sign Language (ASL): Board Certified Specialty: No

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,

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

D3. Specialist Provider Directory

Medi-Cal Open Panel: 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: 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



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

PERREAULT, 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

D3. Specialist Provider Directory

 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

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

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

D3. Specialist Provider Directory

 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: 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

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

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory


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

D3. Specialist Provider Directory

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

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

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

D3. Specialist Provider Directory

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


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

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

D3. Specialist Provider Directory

 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: 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

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

FORZANI, CHRISTINA

Provider ID: 290780

Board Certified Specialty: No

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 961-1497

D3. Specialist Provider Directory

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: 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

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

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: 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

D3. Specialist Provider Directory

 Accessibility: CONTACT PROVIDER
 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

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

D3. Specialist Provider Directory

CTR


Medi-Cal Open Panel: 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-CHESSER, 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

D3. Specialist Provider Directory








 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

D3. Specialist Provider Directory

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: 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





SHELLINGER, KRISTON

Provider ID: 213750
Board Certified Specialty: No
📍 9333 GENESEE AVE STE

D3. Specialist Provider Directory


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: 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


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: 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

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

D3. Specialist Provider Directory

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

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: 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

D3. Specialist Provider Directory

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: 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

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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: 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

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

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)




D3. Specialist Provider Directory

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: 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




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

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

D3. Specialist Provider Directory


 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


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: 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 **CARSWELL, AIMEE**


Provider ID: 303055

Board Certified Specialty: No

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (858) 554-1212

Fax: (858) 795-1195

 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1619156635

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:
EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: 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


D3. Specialist Provider Directory


 Hours: M-F
8:00AM-5:00PM
 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 **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: 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
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: 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):

D3. Specialist Provider Directory

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

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

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


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

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


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

D3. Specialist Provider Directory


 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

D3. Specialist Provider Directory

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

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

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

D3. Specialist Provider Directory








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: 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

KONDILI, DHIMITER
Provider ID: 283145
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







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

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

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

D3. Specialist Provider Directory


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: 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


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


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


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

SCHULTZ, HEATHER

D3. Specialist Provider Directory

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

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

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

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

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

N

Accessibility: CONTACT
PROVIDER

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

Website: N/A

D3. Specialist Provider Directory

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

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

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: 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


D3. Specialist Provider Directory




 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 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: 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

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

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

D3. Specialist Provider Directory

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: 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

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: 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

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):
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):
N

D3. Specialist Provider Directory

 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): 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
Min/Max Age: 0\999

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: 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

RADIOLOGY DIAGNOSTIC


YORK, VINCENT

Provider ID: 283517

Board Certified Specialty: No

D3. Specialist Provider Directory

 200 W 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

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

D3. Specialist Provider Directory


 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








D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

 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: 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

 Accessibility: CONTACT
PROVIDER

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

 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


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

 Accessibility: CONTACT
PROVIDER

 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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: 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

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

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: 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

D3. Specialist Provider Directory

American Sign Language (ASL): Fax: (888) 539-8781

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7:00AM-7:00PM NPI: 1164979837


 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

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

SCHIEDERMAYER, BENJAMIN

Provider ID: 288937

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

 Provider English Spoken: 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

D3. Specialist Provider Directory

 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: 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

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

D3. Specialist Provider Directory

 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

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: 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


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

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

MEMORIAL HOSPITAL, SHARP  Website: N/A


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


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

D3. Specialist Provider Directory


Medi-Cal Open Panel: 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: 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: 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: 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

D3. Specialist Provider Directory

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): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO

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

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

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

D3. Specialist Provider Directory




 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 Board Certified Specialty: No
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




 200 W 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: 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

D3. Specialist Provider Directory


Medi-Cal Open Panel: 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

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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,

D3. Specialist Provider Directory

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)

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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): Board Certified Specialty: No

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

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

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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: 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

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

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

D3. Specialist Provider Directory


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: 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

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


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


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

D3. Specialist Provider Directory

American Sign Language (ASL): After Hours Phone: (800) 926-8273

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

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

D3. Specialist Provider Directory

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: 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

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

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

D3. Specialist Provider Directory

Min/Max Age: 0\19

American Sign Language (ASL): NPI: 1982964276

N

 Accessibility: CONTACT PROVIDER

 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 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

 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



D3. Specialist Provider Directory

 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: 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

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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: 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: 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

D3. Specialist Provider Directory

 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 VALPREDIA 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

D3. Specialist Provider Directory


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

D3. Specialist Provider Directory

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 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1801522859

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: 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

D3. Specialist Provider Directory



 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

D3. Specialist Provider Directory

Cultural Competency: N
Medi-Cal Open Panel: 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 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: 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 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: 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 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: 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: 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

D3. Specialist Provider Directory


 Provider English Spoken: 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: 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

MOJICA, MARIO




Provider ID: 302487
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: 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

D3. Specialist Provider Directory

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



D3. Specialist Provider Directory

 Provider English Spoken: Y N
 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):

 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 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: 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

D3. Specialist Provider Directory

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



D3. Specialist Provider Directory

 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 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767


Fax: (760) 736-6797
 After Hours Phone: (760)
736-6767

Provider Gender: Female
NPI: 1215469283

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: 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 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 736-6797

 After Hours Phone: (760)
736-6767

Provider Gender: Female
NPI: 1215469283

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: 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 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 566-1501
 After Hours Phone: (760)
736-6767

Provider Gender: Male
NPI: 1720093198

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N



Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: 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

D3. Specialist Provider Directory

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 VALPREDA 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 VALPREDA RD

D3. Specialist Provider Directory

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)

D3. Specialist Provider Directory

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 VALPRED A RD
SAN MARCOS, CA 92069
☎ Phone: (760) 736-6767
Fax: (760) 736-8740
🕒 After Hours Phone: (760)
736-6767
Provider Gender: Male
NPI: 1619271517
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: 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 VALPRED A RD
SAN MARCOS, CA 92069
☎ Phone: (760) 736-6767
Fax: (760) 736-8740
🕒 After Hours Phone: (760)
736-6767
Provider Gender: Female
NPI: 1073518965
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: 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 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: 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 VALPRED A RD
SAN MARCOS, CA 92069
☎ Phone: (760) 736-6767
Fax: (760) 736-8740
🕒 After Hours Phone: (760)
736-6767
Provider Gender: Female
NPI: 1477785137
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Y

D3. Specialist Provider Directory

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 VALPRED A 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 VALPRED A RD
SAN MARCOS, CA 92069


 Phone: (760) 736-6767


Fax: (760) 566-1501

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1447428271

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi

Cultural Competency: N


Medi-Cal Open Panel: 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 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1710110416

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

☎ 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):

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




D3. Specialist Provider Directory

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




Provider ID: 295225
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

D3. Specialist Provider Directory

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)

D3. Specialist Provider Directory

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: 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

D3. Specialist Provider Directory

SA 8:00AM-2:00PM
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

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory


 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): NPI: 1174656755

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

 Provider 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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):

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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):

D3. Specialist Provider Directory

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: 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

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

D3. Specialist Provider Directory

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: 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

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: 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

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

D3. Specialist Provider Directory


Cultural Competency: N


Medi-Cal Open Panel: Y

Min/Max Age: 0\999

American Sign Language (ASL): Provider ID: 302286

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: 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: 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: 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

D3. Specialist Provider Directory

 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: 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: 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: 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


HERNANDEZ, JESSICA

Provider ID: 302296

Board Certified Specialty: No

D3. Specialist Provider Directory

 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

D3. Specialist Provider Directory

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: 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

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

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

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

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

D3. Specialist Provider Directory


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

D3. Specialist Provider Directory

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: 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

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

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


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)

D3. Specialist Provider Directory




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*

HOSPICE AND PALLIATIVE MEDICINE

RUBENSIK, 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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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

D3. Specialist Provider Directory

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 A P H

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 A P H

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 A P H

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: 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 A P H

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

D3. Specialist Provider Directory


 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

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: 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

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: 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

D3. Specialist Provider Directory

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: 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

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

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

D3. Specialist Provider Directory



 *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: 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

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*

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

D3. Specialist Provider Directory

American Sign Language (ASL):  After Hours Phone: (760) 631-5000

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):  Provider ID: 291281

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

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-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


D3. Specialist Provider Directory

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: 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


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


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

D3. Specialist Provider Directory




 *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

D3. Specialist Provider Directory

MEDICAL CTR, UCSD LA JOLLA Board Certified Specialty: No PROVIDER
JOHN SALLY THORNTON 36485 INLAND VALLEY DR Hours: M-F
Medi-Cal Open Panel: Y WILDOMAR, CA 92595 8:00AM-5:00PM
Min/Max Age: 0\999 Phone: (951) 677-1111 Website: N/A
American Sign Language (ASL): Fax: (951) 677-9757
N After Hours Phone: (951)
677-1111
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
Accessibility: CONTACT
PROVIDER
Website: N/A

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

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

D4. Hospital Directory - General Acute Care Hospital

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

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.paradisevallhospital.net

American Sign Language (ASL):
N

Accessibility: CONTACT

D4. Hospital Directory - General Acute Care Hospital

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/locations/hospitals__scripps-green-hospital

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

SCRIPPS MEMORIAL HOSPITAL

Provider ID: 170045

9888 GENESEE AVE
LA JOLLA, CA 92037

Phone: (800) 727-4777

After Hours Phone: (800)
727-4777

Accepting New Patients: 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/locations/hospitals__scripps-memorial-hospital-la-jolla

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Birthing Friendly: Y

SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Provider ID: 170305

354 SANTA FE DR
ENCINITAS, CA 92024

Phone: (760) 753-6501

After Hours Phone: (760)
753-6501

Accepting New Patients: 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/locations/hospitals__scripps-memorial-hospital-encinitas

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

D4. Hospital Directory - General Acute Care Hospital

 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

D4. Hospital Directory - General Acute Care Hospital

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

Birth 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

Birth 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.rest.aspx>

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Birth Friendly: Y

D4. Hospital Directory - General Acute Care Hospital


D5. Long term Support Services (LTSS)

I. Long Term Care (LTC) and Skilled Nursing Facility (SNF)


CARLSBAD

N

 Accessibility: CONTACT PROVIDER

 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

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

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

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

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):


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

COTTONWOOD CANYON HEALTHCARE CENTER

Provider ID: 171983

 1391 E MADISON AVE
EL CAJON, CA 92021

 Phone: (619) 444-1107

D5. Long term Support Services (LTSS)

I. Long Term Care (LTC) and Skilled Nursing Facility (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. Long term Support Services (LTSS)


I. Long Term Care (LTC) and Skilled Nursing Facility (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: (614) 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: <http://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: www.VICTORIAPOSTACUTE.com*

Credentials and/or certifications:

 *Site English Spoken: Y*
Cultural Competency: N


American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

VILLA LAS PALMAS HEALTHCARE CTR

Provider ID: 172020

 622 S ANZA ST
EL CAJON, CA 92020

 *Phone: (619) 442-0544*

 *After Hours Phone: (619) 442-0544*

Accepting New Patients: N

NPI: 1023048295

 *Website: <http://villalaspalmascares.com>*





























Credentials and/or certifications:

 *Site English Spoken: Y*
Cultural Competency: N

American Sign Language (ASL):

D5. Long term Support Services (LTSS)

I. Long Term Care (LTC) and Skilled Nursing Facility (SNF)

| | | |
|---|--|---|
| <p>N</p> <p> Accessibility: CONTACT PROVIDER</p> | <p>Credentials and/or certifications:</p> <p><input type="checkbox"/> Site English Spoken: Y</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> | <p>ESCONDIDO, CA 92025</p> <p> Phone: (760) 741-6109</p> <p> After Hours Phone: (760) 741-6109</p> <p>Accepting New Patients: N</p> <p>NPI: 1386681286</p> <p> Website: http://lifecarecentroprofescondido.com</p> <p>Credentials and/or certifications:</p> <p><input type="checkbox"/> Site English Spoken: Y</p> <p>Cultural Competency: N</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> |
| <p>ENCINITAS</p> | | |
| <p>AVIARA HEALTHCARE CENTER</p> <p>Provider ID: 171995</p> <p> 944 REGAL RD ENCINITAS, CA 92024</p> <p> Phone: (760) 944-0331</p> <p> After Hours Phone: (760) 944-0331</p> <p>Accepting New Patients: N</p> <p>NPI: 1518146620</p> <p> Website: http://aviarahealthcare.com</p> <p>Credentials and/or certifications:</p> <p><input type="checkbox"/> Site English Spoken: Y</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Tagalog, Spanish</p> <p>Cultural Competency: N</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> | <p>ESCONDIDO</p> | |
| <p>ENCINITAS NURSING AND REHAB CTR</p> <p>Provider ID: 171977</p> <p> 900 SANTA FE DR ENCINITAS, CA 92024</p> <p> Phone: (760) 753-6423</p> <p>Fax: (760) 753-4979</p> <p> After Hours Phone: (760) 753-6423</p> <p>Accepting New Patients: N</p> <p> Hours: M-F 8:00AM-5:00PM</p> <p>NPI: 1265415749</p> <p> Website: www.covenantcare.com</p> | <p>ESCONDIDO CARE CENTER</p> <p>Provider ID: 172027</p> <p> 421 E MISSION AVE ESCONDIDO, CA 92025</p> <p> Phone: (760) 747-0430</p> <p>Fax: (760) 747-0569</p> <p> After Hours Phone: (760) 747-0430</p> <p>Accepting New Patients: N</p> <p> Hours: M-F 8:00AM-4:30PM</p> <p>NPI: 1588660765</p> <p> Website: http://escondidopostacute.com</p> <p>Credentials and/or certifications:</p> <p><input type="checkbox"/> Site English Spoken: Y</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Tagalog, Spanish</p> <p>Cultural Competency: N</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> | <p>PALOMAR HEIGHTS CARE CTR</p> <p>Provider ID: 170055</p> <p> 1260 E OHIO AVE ESCONDIDO, CA 92027</p> <p> Phone: (760) 746-1100</p> <p>Fax: (760) 746-1201</p> <p> After Hours Phone: (760) 746-1100</p> <p>Accepting New Patients: N</p> <p>NPI: 1255337440</p> <p> Website: http://palomarheightsrehab.com</p> <p>Credentials and/or certifications:</p> <p><input type="checkbox"/> Site English Spoken: Y</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog</p> <p>Cultural Competency: N</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> |
| | <p>LIFE CARE CENTER OF ESCONDIDO</p> <p>Provider ID: 172010</p> <p> 1980 FELICITA RD</p> | <p>PALOMAR VISTA HEALTHCARE CTR</p> |

D5. Long term Support Services (LTSS)

I. Long Term Care (LTC) and Skilled Nursing Facility (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. Long term Support Services (LTSS)

I. Long Term Care (LTC) and Skilled Nursing Facility (SNF)


NPI: 1588067482

 Website: <http://thecoveatlajolla.com>

Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER

LA MESA


ARBOR HILLS NURSING CENTER

Provider ID: 172007

 7800 PARKWAY DR
LA MESA, CA 91942

 Phone: (619) 460-2330
 After Hours Phone: (619) 460-2330


Accepting New Patients: 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. Long term Support Services (LTSS)

I. Long Term Care (LTC) and Skilled Nursing Facility (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. Long term Support Services (LTSS)

I. Long Term Care (LTC) and Skilled Nursing Facility (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

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

 Website: www.windsorcare.com

Credentials and/or
certifications:

 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


OCEANSIDE

LA PALOMA HEALTHCARE CTR

Provider ID: 172021


 3232 THUNDER DR
OCEANSIDE, CA 92056

 Phone: (760) 724-2193


 After Hours Phone: (760)
724-2193

Accepting New Patients: N

NPI: 1265462436


 Website: [WWW.LAPALOMA
HEALTHCARE.COM](http://WWW.LAPALOMAHEALTHCARE.COM)
Credentials and/or
certifications:

 Site English Spoken: Y

 Site Language(s) Spoken:
Spanish, Armenian, Korean,
Tagalog

Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

MCNEALY HOUSE

Provider ID: 662925

 4602 ALLENDE AVE
OCEANSIDE, CA 92057

 Phone: (760) 721-1706

Fax: (760) 721-9872

 After Hours Phone: (760)
721-1706

Accepting New Patients: 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

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. Long term Support Services (LTSS)

I. Long Term Care (LTC) and Skilled Nursing Facility (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. Long term Support Services (LTSS)

I. Long Term Care (LTC) and Skilled Nursing Facility (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. Long term Support Services (LTSS)

I. Long Term Care (LTC) and Skilled Nursing Facility (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://missionhills
postacute.com](http://missionhills
postacute.com)

Credentials and/or
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

RADY CHILDRENS

CONVALESCENT HOSPITAL

Provider ID: 172200

8022 BIRMINGHAM DR
SAN DIEGO, CA 92123

Phone: (858) 966-5833

Fax: (858) 966-8558

After Hours Phone: (858)
966-5833

Accepting New Patients: 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.co
m](http://reovista.co
m)

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://universityc
arecenter.com](http://universityc
arecenter.com)

Credentials and/or
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Tagalog, Mandarin,

Russian, Vietnamese, Farsi,
Spanish


Cultural Competency: N

D5. Long term Support Services (LTSS)

I. Long Term Care (LTC) and Skilled Nursing Facility (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/SanfordCourt/
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. Long term Support Services (LTSS)

I. Long Term Care (LTC) and Skilled Nursing Facility (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: [covivingmountmi-
guel.org](http://covivingmountmi-
guel.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.mountmigue-
lcovenantvillage.org](http://www.mountmigue-
lcovenantvillage.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. Long term Support Services (LTSS)


I. Long Term Care (LTC) and Skilled Nursing Facility (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. Long term Support Services (LTSS)

I. Long Term Care (LTC) and Skilled Nursing Facility (SNF)

Cultural Competency: N

American Sign Language (ASL): certifications:


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*

D5. Long term Support Services (LTSS)


II. County In-Home Support Services (IHSS)

SAN DIEGO

AGING & INDEPENDENCE SERVICES

Specialty: Case Management

 5560 OVERLAND AVE
SAN DIEGO, CA 92123

 Phone: (858) 495-5885


License Number: 1710308986

Accessibility: CONTACT

PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: https://www.sandiegocounty.gov/content/sdc/hhsa/programs/ais/inhome_supportive_services.html

D5. Long term Support Services (LTSS)

III. Community-Based Adult Services (CBAS) - Adult Day Services


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://openarmsadhc.com>

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: <https://sites.google.com/site/westernadhec/contact-us>


MAGNOLIA ADULT DAY

HEALTH CARE


Provider ID: 408541

 490 N MAGNOLIA AVE

EL CAJON, CA 92020

 Phone: (619) 444-1522

Fax: (619) 444-1516

 After Hours Phone: (619) 444-1522

Accepting New Patients: 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://magnoliaadhc.com>

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


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

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://magnoliaadhc.com>


LA MESA

GOLDEN LIFE ADHC

Provider ID: 619502

 9158 FLETCHER PKWY

LA MESA, CA 91942


 Phone: (619) 357-7753

Fax: (619) 439-6038

 After Hours Phone: (619) 357-7753

Accepting New Patients: N

NPI: 1093921900

 Accessibility: CONTACT PROVIDER

American Sign Language (ASL):

N

D5. Long term Support Services (LTSS)

III. Community-Based Adult Services (CBAS) - Adult Day Services

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
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

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

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 Languages(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

CASA PACIFICA ADHCC

Provider ID: 417303




D5. Long term Support Services (LTSS)

III. Community-Based Adult Services (CBAS) - Adult Day Services

 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.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

D6. Mental Health Directory

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 Language(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):

D6. Mental Health Directory


- 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

D6. Mental Health Directory

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

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


OJHA, PRITI


D6. Mental Health Directory

 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


D6. Mental Health Directory

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

D6. Mental Health Directory

 *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*





D6. Mental Health Directory

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

 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

D6. Mental Health Directory

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

WEAVER, MARINEL

Provider Gender: Female
License Number: LCS15627
NPI: 1871786558
Provider English Spoken: Y
Cultural Competency: N

MARINEL EAVER

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 Language(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

D6. Mental Health Directory

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
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

D6. Mental Health Directory


American Sign Language (ASL):  After Hours Phone: (760) 690-5900

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

 Website: N/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



D6. Mental Health Directory

 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

D6. Mental Health Directory

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 Language(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


D6. Mental Health Directory

 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

D6. Mental Health Directory

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

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

D6. Mental Health Directory

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 Language(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

D6. Mental Health Directory

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

D6. Mental Health Directory

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

D6. Mental Health Directory

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

D6. Mental Health Directory

 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 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


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

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

D6. Mental Health Directory


 Website: N/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

D6. Mental Health Directory


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

D6. Mental Health Directory

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

D6. Mental Health Directory

 Website: N/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

D6. Mental Health Directory

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

D6. Mental Health Directory

HOANG A NGUYEN

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (619) 497-6673

After Hours Phone: (619)
497-6673

Website: N/A

Accepting New Patients: 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

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

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

D6. Mental Health Directory

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


 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


 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

D6. Mental Health Directory

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

D6. Mental Health Directory

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

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

D6. Mental Health Directory

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

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

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
Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: 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

D6. Mental Health Directory

☐ 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

📍 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

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

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

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

D6. Mental Health Directory

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

 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

 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

D6. Mental Health Directory

 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

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000







 After Hours Phone: (760)
631-5000

D6. Mental Health Directory

 Website: N/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

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


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


D6. Mental Health Directory

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
 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

 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


D6. Mental Health Directory

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

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

 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

 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

 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)

D6. Mental Health Directory

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

 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

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


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
 517 N HORNE ST

D6. Mental Health Directory

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

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

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

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

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

D6. Mental Health Directory

📞 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

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

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


D6. Mental Health Directory

 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

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


D6. Mental Health Directory

 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

D6. Mental Health Directory

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

 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

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

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

D6. Mental Health Directory

 Website: N/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 Language(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, DARCIÉ

Provider Gender: Female

License Number: MFC119851

NPI: 1639796071

Provider English Spoken: Y

Cultural Competency: N


DARCIÉ 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 Language(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

D6. Mental Health Directory

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

📍 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

D6. Mental Health Directory

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

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

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

D6. Mental Health Directory

 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

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

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

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

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

D6. Mental Health Directory

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

D6. Mental Health Directory

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

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

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

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

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

FITZGERALD, MICHAEL

Provider Gender: Male

License Number: A73710

NPI: 1336393578

Provider English Spoken: Y

Cultural Competency: N

D6. Mental Health Directory

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

D6. Mental Health Directory

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

D6. Mental Health Directory

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
📍 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

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

JOSHI, YASH


Provider Gender: Male
License Number: A147156
NPI: 1598151433
Provider English Spoken: Y
Cultural Competency: N
YASH B JOSHI

D6. Mental Health Directory

 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

 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

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


D6. Mental Health Directory

 Website: N/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 Language(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 LIDLAW

 10737 CAMINO RUIZ STE
235


SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: N/A

Accepting New Patients: 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

D6. Mental Health Directory

 Website: N/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

D6. Mental Health Directory

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

LONGGARDNER, KATHERINE

Provider Gender: Female

License Number: A137963

NPI: 1801215926

Provider English Spoken: Y

Cultural Competency: N

KATHERINE M LONGGARDNER

📍 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

D6. Mental Health Directory

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

📍 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

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

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

D6. Mental Health Directory

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

D6. Mental Health Directory

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


D6. Mental Health Directory

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

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

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

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

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

D6. Mental Health Directory

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
📍 4290 POLK AVE

D6. Mental Health Directory

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

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
📍 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
📍 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

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


D6. Mental Health Directory

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

D6. Mental Health Directory

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

 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

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

SHELLINGER, KRISTON

Provider Gender: Female

License Number: PSY26313

NPI: 1710234273


Provider English Spoken: Y


Cultural Competency: N

KRISTON B SHELLINGER

 330 LEWIS ST

SAN DIEGO, CA 92103


 Phone: (858) 246-1979

 After Hours Phone: (858)
246-1979

 Website: N/A

D6. Mental Health Directory


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

 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

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

D6. Mental Health Directory

Min/Max Age: 0\999

American Sign Language (ASL):

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 Language(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

D6. Mental Health Directory


 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):


 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):

 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):

 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):

 Accessibility: CONTACT
PROVIDER

TROYER, EMILY

Provider Gender: Female
License Number: A149101
NPI: 1326484437

D6. Mental Health Directory

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

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

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

D6. Mental Health Directory

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 Languages(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

D6. Mental Health Directory

 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

 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


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

SAN MARCOS

ALTAMIRANO, LEON


Provider Gender: Male
License Number: PSY23734
NPI: 1619271517

Provider English Spoken: Y
Spanish

Cultural Competency: N


LEON ALTAMIRANO

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

 Website: N/A

Accepting New Patients: 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 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 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 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

 Website: N/A

D6. Mental Health Directory

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

D6. Mental Health Directory


 Website: N/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

SO LORIO JR, ROBERTO

Provider Gender: Male

License Number: LCS102729


NPI: 1972088185

Provider English Spoken: Y

Cultural Competency: N

ROBERTO SO LORIO 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 Languages(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

D6. Mental Health Directory

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 Language(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

D6. Mental Health Directory

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): Phone: (619) 428-4463

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






D6. Mental Health Directory


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

D6. Mental Health Directory

 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


SANTEE

MEAGHER, RAISHELLE

Provider Gender: Female
License Number: LCS109804
NPI: 1851821904
Provider English Spoken: Y
Cultural Competency: N

RAISHELLE L MEAGHER

 120 TOWN CENTER PKWY
SANTEE, CA 92071


 Phone: (619) 662-4100

Fax: (619) 662-4196

 After Hours Phone: (619)
662-4100

 Website: N/A


Accepting New Patients: 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

D6. Mental Health Directory

 After Hours Phone: (760) 742-9919


 Website: N/A

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

 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

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

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





CHRISTIANSON, WARREN




D6. Mental Health Directory

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

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

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:*

D6. Mental Health Directory

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

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


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


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

D6. Mental Health Directory

 *Accessibility: CONTACT PROVIDER*


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):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH*

9:00AM-8:00PM

F 9:00AM-5:00PM

SA 9:00AM-4:00PM


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*

GUTIERREZ, VERONICA


*Provider Gender: Female
License Number: PSY21413
NPI: 1467674176*

*Provider English Spoken: Y
Spanish*

Cultural Competency: N

VERONICA GUTIERREZ

 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

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

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

D6. Mental Health Directory


 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
 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







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

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

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

D6. Mental Health Directory

 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


 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

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

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

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

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

D6. Mental Health Directory

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






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
 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website: N/A
 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

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

D7. Vision Provider Directory - Eye & Vision Services

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

D7. Vision Provider Directory - Eye & Vision Services

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

D7. Vision Provider Directory - Eye & Vision Services

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

D7. Vision Provider Directory - Eye & Vision Services

 *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, 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*

D7. Vision Provider Directory - Eye & Vision Services

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, 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

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

D7. Vision Provider Directory - Eye & Vision Services

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
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

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

NGUYEN, TRACY, OD

Provider Gender: Female
License Number: 10859
NPI: 1265596621
Provider English Spoken: Y
Vietnamese
Cultural Competency: Y
ESSENTIAL EYECARE
OPTOMETRY

D7. Vision Provider Directory - Eye & Vision Services

 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):

D7. Vision Provider Directory - Eye & Vision Services

- 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
- 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

D7. Vision Provider Directory - Eye & Vision Services

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

D7. Vision Provider Directory - Eye & Vision Services

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*

D7. Vision Provider Directory - Eye & Vision Services

🕒 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


D7. Vision Provider Directory - Eye & Vision Services







 *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

D7. Vision Provider Directory - Eye & Vision Services

🕒 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, 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

D7. Vision Provider Directory - Eye & Vision Services

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, 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

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

D7. Vision Provider Directory - Eye & Vision Services

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


D7. Vision Provider Directory - Eye & Vision Services


 *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

D7. Vision Provider Directory - Eye & Vision Services

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


D7. Vision Provider Directory - Eye & Vision Services

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

D7. Vision Provider Directory - Eye & Vision Services

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):

D7. Vision Provider Directory - Eye & Vision Services






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

D7. Vision Provider Directory - Eye & Vision Services

☎ 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

D7. Vision Provider Directory - Eye & Vision Services

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):

D7. Vision Provider Directory - Eye & Vision Services

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

D7. Vision Provider Directory - Eye & Vision Services

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

D7. Vision Provider Directory - Eye & Vision Services

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, 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 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, 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

D7. Vision Provider Directory - Eye & Vision Services

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

D7. Vision Provider Directory - Eye & Vision Services

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):

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



D7. Vision Provider Directory - Eye & Vision Services



 *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

D7. Vision Provider Directory - Eye & Vision Services

 After Hours Phone: (760) 728-5728

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): 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, 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

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

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

D7. Vision Provider Directory - Eye & Vision Services

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, 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

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

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

D7. Vision Provider Directory - Eye & Vision Services

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

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
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

HO, AMIEE, OD

Provider Gender: Female
License Number: 14527
NPI: 1396009478
Provider English Spoken: Y
Cultural Competency: Y
UCSD SHILEY EYE CENTER
📄 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
☎ Phone: (858) 534-6290
Fax: (858) 732-0921
🕒 After Hours Phone: (858) 534-6290
Accepting New Patients: 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

HOO, PAMELA, OD

Provider Gender: Female
License Number: 11033

D7. Vision Provider Directory - Eye & Vision Services

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

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

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

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

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

D7. Vision Provider Directory - Eye & Vision Services

🕒 Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

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

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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

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

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)

D7. Vision Provider Directory - Eye & Vision Services

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

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

D7. Vision Provider Directory - Eye & Vision Services

☎ 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

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

MOOR, TRACY, OD

Provider Gender: Female

License Number: 35085

NPI: 1184283277

Provider English Spoken: Y

Cultural Competency: Y

UCSD SHILEY EYE CENTER

D7. Vision Provider Directory - Eye & Vision Services

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

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

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

D7. Vision Provider Directory - Eye & Vision Services

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

UCSD SHILEY EYE CENTER
📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

📞 Phone: (858) 534-6290
Fax: (858) 732-0921

D7. Vision Provider Directory - Eye & Vision Services

☎ 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

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

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

D7. Vision Provider Directory - Eye & Vision Services

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): EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

♿ 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

📍 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

D7. Vision Provider Directory - Eye & Vision Services

 *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

D7. Vision Provider Directory - Eye & Vision Services

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

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

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

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

D7. Vision Provider Directory - Eye & Vision Services

PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 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

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

D7. Vision Provider Directory - Eye & Vision Services

 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

D7. Vision Provider Directory - Eye & Vision Services

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



D7. Vision Provider Directory - Eye & Vision Services



 **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

D7. Vision Provider Directory - Eye & Vision Services

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, 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

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): 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

LEVY, PHILLIP, OD

Provider Gender: Male
License Number: 4884
NPI: 1528189115
Provider English Spoken: Y
Cultural Competency: Y
PHILLIP A LEVY OD
📍 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

D7. Vision Provider Directory - Eye & Vision Services

- 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
- MCGRRAW, 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
- 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
- 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
- MERALI, MURTAZA, OD**
 Provider Gender: Female
- 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**
- 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**

D7. Vision Provider Directory - Eye & Vision Services

☐ 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

D7. Vision Provider Directory - Eye & Vision Services

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): Cultural Competency: Y

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): Spanish

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

PETERS, JAMIE, OD

Provider Gender: Female

License Number: 10724

NPI: 1073691077

Provider English Spoken: Y

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):

D7. Vision Provider Directory - Eye & Vision Services

- 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*
- 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): 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): 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

D7. Vision Provider Directory - Eye & Vision Services

 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

D7. Vision Provider Directory - Eye & Vision Services

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

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

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


D7. Vision Provider Directory - Eye & Vision Services

 Site Languages(s) Spoken: Spanish
Provider English Spoken: Y
Russian

American Sign Language (ASL): Cultural Competency: Y
N
ALVARADO EYE ASSOCIATES
MED CLINIC INC

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U


 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

 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

D7. Vision Provider Directory - Eye & Vision Services

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

D7. Vision Provider Directory - Eye & Vision Services

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

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

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

German, French, Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

☎ Phone: (619) 472-1010

Fax: (619) 479-5233

🕒 After Hours Phone: (619)
472-1010

Accepting New Patients: Y

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within

D7. Vision Provider Directory - Eye & Vision Services

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):
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

Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
📞 Phone: (619) 472-1010
Fax: (619) 479-5233

🕒 After Hours Phone: (619)
472-1010

Accepting New Patients: 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

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

D7. Vision Provider Directory - Eye & Vision Services

- 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): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
- 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
 Cultural Competency: Y
- LUSTRO EYEWORKS OPTOMETRY**
 1481 E PLAZA BLVD NATIONAL CITY, CA 91950
 Phone: (619) 477-2159
 Fax: (619) 267-8221
 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): 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
- 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

D7. Vision Provider Directory - Eye & Vision Services

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

D7. Vision Provider Directory - Eye & Vision Services

American Sign Language (ASL): AUCITY EYE GROUP

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

 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

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

AUCITY 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

MENDOZA, RAYMUNDO, OD

Provider Gender: Male

License Number: 8150

NPI: 1306837760



Provider English Spoken: Y


Spanish

Cultural Competency: Y

NATIONAL CITY EYECARE


D7. Vision Provider Directory - Eye & Vision Services

 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

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

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

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

D7. Vision Provider Directory - Eye & Vision Services

🕒 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 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

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):
N

♿ Accessibility: CONTACT

D7. Vision Provider Directory - Eye & Vision Services

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 Language(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

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

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 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

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

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

D7. Vision Provider Directory - Eye & Vision Services

📞 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

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

D7. Vision Provider Directory - Eye & Vision Services

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

D7. Vision Provider Directory - Eye & Vision Services

📍 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

D7. Vision Provider Directory - Eye & Vision Services

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):
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
NPI: 1588656151

Provider English Spoken: Y

German, Spanish

Cultural Competency: Y
VAN HOOSE OPTOMETRIC
CORPORATION

7246 CLAIREMONT MESA
BLVD
SAN DIEGO, CA 92111

Phone: (858) 292-7193
Fax: (858) 292-8247

After Hours Phone: (858)
292-7193

Accepting New Patients: 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

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

D7. Vision Provider Directory - Eye & Vision Services

-  *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
 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
 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

D7. Vision Provider Directory - Eye & Vision Services

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
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

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

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):

D7. Vision Provider Directory - Eye & Vision Services

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

D7. Vision Provider Directory - Eye & Vision Services


 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): HEALTHY I CARE OPTOMETRY

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

D7. Vision Provider Directory - Eye & Vision Services

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

D7. Vision Provider Directory - Eye & Vision Services

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, 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

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):

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

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

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

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Arabic

D7. Vision Provider Directory - Eye & Vision Services

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

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

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

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

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 Languages(s) Spoken:

Spanish, Vietnamese


American Sign Language (ASL):

N

D7. Vision Provider Directory - Eye & Vision Services

 *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

 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*

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*

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*

D7. Vision Provider Directory - Eye & Vision Services

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

D7. Vision Provider Directory - Eye & Vision Services

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: 1952453300
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, JANICE, OD

Provider Gender: Female


License Number: 13037

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

LAU, KUEN CHINE, OD

Provider Gender: Male

License Number: 11166


NPI: 1821001645

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

 1555 PALM AVE STE A2
SAN DIEGO, CA 92154

 *Phone: (619) 297-2020*

Fax: (888) 210-5799

 *After Hours Phone: (619)*
297-2020

Accepting New Patients: Y

D7. Vision Provider Directory - Eye & Vision Services

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

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

D7. Vision Provider Directory - Eye & Vision Services

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

D7. Vision Provider Directory - Eye & Vision Services

☎ 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

📍 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

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

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

HILLCREST EYE

CENTER-UCSD

D7. Vision Provider Directory - Eye & Vision Services

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

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

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

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

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

D7. Vision Provider Directory - Eye & Vision Services

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, 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, 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, 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

D7. Vision Provider Directory - Eye & Vision Services

 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

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

D7. Vision Provider Directory - Eye & Vision Services

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

D7. Vision Provider Directory - Eye & Vision Services


 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

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

D7. Vision Provider Directory - Eye & Vision Services

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-F
10:00AM-7:00PM
SA 10:00AM-7:00PM*

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):
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*

SOLIS, KEVIN, OD

Provider Gender: Male

License Number: 10420


NPI: 1538362116

Provider English Spoken: Y


Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

 1555 PALM AVE STE A2
SAN DIEGO, CA 92154

 *Phone: (619) 297-2020*

Fax: (888) 210-5799

 *After Hours Phone: (619)
297-2020*


Accepting New Patients: 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*

TA, TRANG, OD

Provider Gender: Female

License Number: 12100


NPI: 1518381045

*Provider English Spoken: Y
Vietnamese*

Cultural Competency: Y

JASMINE P NGUYEN OD INC

 4029 43RD ST STE 300
SAN DIEGO, CA 92105


 *Phone: (619) 284-3937*

Fax: (619) 284-3938

 *After Hours Phone: (619)
284-3937*

Accepting New Patients: 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*

TAM, MAY, OD

Provider Gender: Female


License Number: 11960


NPI: 1548255896

*Provider English Spoken: Y
Spanish*

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

 5638 MISSION CENTER RD
STE 103
SAN DIEGO, CA 92108


 *Phone: (619) 295-2900*

Fax: (888) 210-5799

 *After Hours Phone: (619)
295-2900*

Accepting New Patients: 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*

TAM, MAY, OD

Provider Gender: Female

License Number: 11960

NPI: 1548255896

Provider English Spoken: Y

D7. Vision Provider Directory - Eye & Vision Services

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):

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

📍 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*

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

D7. Vision Provider Directory - Eye & Vision Services

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

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

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

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

D7. Vision Provider Directory - Eye & Vision Services

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

D7. Vision Provider Directory - Eye & Vision Services

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

D7. Vision Provider Directory - Eye & Vision Services

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

D7. Vision Provider Directory - Eye & Vision Services

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

D7. Vision Provider Directory - Eye & Vision Services

 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

 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):

D7. Vision Provider Directory - Eye & Vision Services

- 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, 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*
- 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*
- TRAN, THAO, OD**
Provider Gender: Female

D7. Vision Provider Directory - Eye & Vision Services

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*

D8. Other Services Providers


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

D9. Blue Shield Promise Urgent Care Facilities

CHULA VISTA

AFC URGENT CARE OF BONITA*

NPI: 1316225147

760 OTAY LAKES RD
CHULA VISTA, CA 91910

(619) 821-2300

(619) 821-2300

Site Language(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

(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

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

(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: 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

SAN DIEGO

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

AFC URGENT CARE OF SAN DIEGO*

NPI: 1558788620

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

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: 1952995466

8590 RIO SAN DIEGO DR
STE 111
SAN DIEGO, CA 92108

(619) 736-4600

AFC URGENT CARE OF SAN DIEGO*

NPI: 1952995466

8260 MIRA MESA BLVD
STE A
SAN DIEGO, CA 92126

(858) 900-3550

AFC URGENT CARE OF SAN DIEGO*

NPI: 1952995466

5671 BALBOA AVE
SAN DIEGO, CA 92111








(858) 800-2880

D9. Blue Shield Promise Urgent Care Facilities

 (858) 800-2880
 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
 (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
 (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
 (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
 (858) 966-8133
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: N





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NPI: 1669617197
 386 E H ST STE 202
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 N/A
Accepting New Patients: N



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 *Accessibility:* CONTACT PROVIDER
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Accepting New Patients: N






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NPI: 1669617197
 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-8133
 (858) 966-8133
 *Accessibility:* CONTACT






D9. Blue Shield Promise Urgent Care Facilities

 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
 (858) 966-8133
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: N






**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
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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






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 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-8133
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 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: N






**RADY CHILDRENS
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 386 E H ST STE 202
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 (858) 966-8133
 (858) 966-8133
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: N

**RADY CHILDRENS
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 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-8133
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 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: N






**RADY CHILDRENS
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 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-8133
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 *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
 (858) 966-8133
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: N


**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

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 386 E H ST STE 202
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 (858) 966-8133
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 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: N





**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***


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 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


D9. Blue Shield Promise Urgent Care Facilities






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
FNDDN***
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
FNDDN***
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
FNDDN***
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
FNDDN***
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
FNDDN***
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
FNDDN***
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
FNDDN***
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
FNDDN***
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
FNDDN***
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**


D9. Blue Shield Promise Urgent Care Facilities

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

 (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

 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

 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


 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

 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

 (760) 755-7600

 (760) 755-7600

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 (760) 755-7600

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Accepting New Patients: N

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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

D9. Blue Shield Promise Urgent Care Facilities


Accepting New Patients: N


**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

 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***


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

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Accepting New Patients: N


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FNDTN***

NPI: 1669617197

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

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 N/A


Accepting New Patients: N


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FNDTN***


NPI: 1669617197

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ESCONDIDO, CA 92029

 (760) 755-7600

 (760) 755-7600

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

 *Accessibility:* CONTACT
PROVIDER

 N/A


Accepting New Patients: N


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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

 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


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D9. Blue Shield Promise Urgent Care Facilities

 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
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 N/A
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RADY CHILDRENS


D9. Blue Shield Promise Urgent Care Facilities


SPECIALISTS SAN DIEGO MED

FNDTN*

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FNDTN*


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

 (619) 713-5375

 (619) 713-5375

 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: N


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

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LA MESA, CA 91942

 (619) 713-5375


 (619) 713-5375

 *Accessibility:* CONTACT

D9. Blue Shield Promise Urgent Care Facilities

 PROVIDER
 N/A
Accepting New Patients: N





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 (619) 713-5375
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PROVIDER
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D9. Blue Shield Promise Urgent Care Facilities

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**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED**


D9. Blue Shield Promise Urgent Care Facilities

FNDTN*

NPI: 1669617197

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

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RADY CHILDRENS


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RADY CHILDRENS


SPECIALISTS SAN DIEGO MED

FNDTN*

NPI: 1669617197

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

 (858) 576-1700

 (858) 576-1700

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: N

RADY CHILDRENS





SPECIALISTS SAN DIEGO MED

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NPI: 1669617197

 5565 GROSSMONT


D9. Blue Shield Promise Urgent Care Facilities

CENTER DR STE 2
LA MESA, CA 91942
 (858) 576-1700
 (858) 576-1700
 *Accessibility:* CONTACT PROVIDER
 N/A
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RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (858) 576-1700
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D9. Blue Shield Promise Urgent Care Facilities


OCEANSIDE

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 (760) 547-1020

 (760) 547-1020

 *Accessibility:* CONTACT
PROVIDER


 N/A


Accepting New Patients: N

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 (760) 547-1020

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 *Accessibility:* CONTACT






D9. Blue Shield Promise Urgent Care Facilities

 PROVIDER
 N/A
Accepting New Patients: N






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D9. Blue Shield Promise Urgent Care Facilities






OCEANSIDE, CA 92056
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SAN DIEGO

RADY CHILDRENS

D9. Blue Shield Promise Urgent Care Facilities


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 (619) 280-2905

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 *Accessibility:* CONTACT
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D9. Blue Shield Promise Urgent Care Facilities

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SAN DIEGO, CA 92105
 (619) 280-2905
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 PROVIDER
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**RADY CHILDRENS
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FNDTN***

NPI: 1669617197
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: N






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D9. Blue Shield Promise Urgent Care Facilities

 SAN DIEGO, CA 92123
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 (858) 966-8800

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RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


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RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

(619) 280-2905

(619) 280-2905

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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
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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

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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
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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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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、1-800-452-4413 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 1-800-452-4413. 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 1-800-452-4413. Вам може допомогти хтось, хто розмовляє Українською. Це безкоштовна послуга.

Navajo D77 ats'77s baa lhly3 47 doodago azee' bee aa lhly3 b7na'7d7[kidgo 47 n1 ata' hodoonih77 h0l=. Ata' halne'4 biniiy4go, koj8' 1-800-452-4413 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 1-800-452-4413 '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 ພວກເຮົາມີນາຍພາສາໂດຍບໍ່ເສຍຄ່າເພື່ອຕອບຄໍາຖາມຕ່າງໆທີ່ທ່ານອາດຈະມີກ່ຽວກັບສະຖະພາບ ຫຼື ແຜນການຢາຂອງພວກເຮົາ. ເພື່ອໃຫ້ໄດ້ຮັບນາຍພາສາ, ພຽງແຕ່ໂທຫາພວກເຮົາທີ່ເບີ 1-800-452-4413. ມີຜູ້ຮູ້ພາສາລາວ ສາມາດຊ່ວຍທ່ານ. ມີແມ່ນບໍລິການໂດຍບໍ່ເສຍຄ່າ.

Armenian Մեզ մոտ հասանելի են անվճար թարգմանչական ծառայություններ՝ մեր առողջապահական կազմակերպության հետ կապված Ձեր ցանկացած հարցին պատասխանելու համար: Թարգմանիչ լինելու համար պարզապես զանգահարեք մեզ 1-800-452-4413 հեռախոսահամարով: 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، کفایت 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 tagasalang-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 քոտ հասանելի են անվճար թարգմանչական ծառայություններ՝ մեր առողջապահական կազմակերպիչի հետ կապված Ձեր ցանկացած հարցի և պատասխանելու համար: Թարգմանիչ և ներկայացուցիչ համար պարզապես զանգահարեք մեզ 1-800-776-4466
հեռախոսախոսակազմակերպիչ: 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، 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 lib्रेng 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 ՈՒՇԱՂԻՈՒԹՅՈՒՆ՝ Եթե խոսում եք հայերեն, Ձեզ տրամադրվելի են անվճար լեզվաբան օգնություն ծառայություններ: Ձանգահարեք 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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