



## CCHP Senior Program (HMO) 東華耆英(HMO)計劃

### Provider/Pharmacy Directory 醫生名錄,醫療服務手冊及藥房手冊

This directory was updated on 10/2019. For more recent information or other questions, please contact Chinese Community Health Plan, at 1-888-775-7888 or, for TTY users, 1-877-681- 8898, seven days a week, 8:00 a.m. to 8:00 p.m., or visit [www.cchphealthplan.com/medicare](http://www.cchphealthplan.com/medicare)

Changes to our provider and pharmacy network may occur during the benefit year. An updated Provider/ Pharmacy Directory is located on our website at [www.cchphealthplan.com/medicare](http://www.cchphealthplan.com/medicare). You may also call Member Services for updated information.

本名錄是2019年10月修定本。如欲了解最新詳情或有疑問，請致電1-888-775-7888 與華人保健計劃聯絡（聽力殘障人士請電TTY1-877-681-8898），每週7天，上午8時至晚上8時，或瀏覽網址 [www.CCHPHealthPlan.com/medicare](http://www.CCHPHealthPlan.com/medicare)。

我們的醫生名錄及藥房網絡可能會在保障年度中產生變化。更新的醫生名錄,醫療服務手冊及藥房手冊可由我們的網站索取：[www.CCHPHealthPlan.com/medicare](http://www.CCHPHealthPlan.com/medicare)。您也可致電會員服務部獲取更新信息。

## Table of Contents

|                                                                                                                                |     |
|--------------------------------------------------------------------------------------------------------------------------------|-----|
| Section 1 – Introduction- Network Providers 簡介- 網絡內醫療服務提供者 .....                                                               | 4   |
| What is the service area for CCHP Senior Program (HMO)? 東華耆英(HMO)計劃的服務範圍在那一區 .                                                 | 6   |
| How do you find CCHP Senior Program (HMO) providers in your area? 如何搜尋東華耆英(HMO)計劃的醫療服務提供者 .....                                | 6   |
| Section 2 – List of Network Providers 網絡內醫療服務提供者名單 .....                                                                       | 8   |
| CCHP/Jade San Francisco County PCPs 三藩市縣主治醫生 .....                                                                             | 8   |
| CCHP/Jade San Francisco County Specialists 三藩市縣專科醫生 .....                                                                      | 17  |
| San Francisco County Outpatient Mental Health Providers 三藩市縣精神健康門診醫生 .....                                                     | 87  |
| CCHP/Jade San Mateo County PCPs 聖馬刁縣主治醫生 .....                                                                                 | 99  |
| CCHP/Jade San Mateo County Specialists 聖馬刁縣專科醫生 .....                                                                          | 105 |
| San Francisco County Outpatient Mental Health Providers 三藩市縣精神健康門診醫生 .....                                                     | 160 |
| San Francisco County Hospitals 三藩市縣醫院 .....                                                                                    | 165 |
| San Francisco County Skilled Nursing Facilities 三藩市縣特技專業 .....                                                                 | 166 |
| San Mateo County Hospitals 聖馬刁縣醫院 .....                                                                                        | 167 |
| San Mateo County Skilled Nursing Facilities 聖馬刁縣特技專業 .....                                                                     | 168 |
| Section 3- Introduction- Network Pharmacies 簡介-網絡藥房名單 .....                                                                    | 171 |
| Section 4 – List of Network Pharmacies 網絡藥房名單 .....                                                                            | 173 |
| San Francisco Retail Pharmacies 三藩市縣的門市藥房 .....                                                                                | 173 |
| San Mateo Retail Pharmacies 聖馬刁縣的門市藥房 .....                                                                                    | 176 |
| Mail Order Pharmacies 郵購藥房 .....                                                                                               | 178 |
| Specialty Pharmacies 特殊藥物藥房 .....                                                                                              | 178 |
| Long-Term Care Pharmacies 長期護理藥房 .....                                                                                         | 178 |
| Home Infusion Pharmacies 家中注射藥物藥房 .....                                                                                        | 179 |
| Indian Health Service / Tribal / Urban Indian Health Program (I/T/U) Pharmacies 印第安人健康服務部落 / 印第安人城市健康衛生計劃 (I / T / U) 藥房 ..... | 180 |

# **CCHP Senior Program (HMO)**

## **2020 Provider Directory**

This directory is current as of 10/2019.

This directory provides a list of CCHP Senior Program (HMO)'s current network providers.

This directory is for San Francisco and San Mateo County.

To access CCHP Senior Program (HMO)'s online provider directory, you can visit [www.cchphealthplan.com/medicare](http://www.cchphealthplan.com/medicare). For any questions about the information contained in this directory, please call our Member Services Department at 1-888-775-7888, seven days a week, 8:00 a.m. to 8:00 p.m. TTY users should call 1-888-681-8898.

# 東華耆英 (HMO) 計劃

## 2020 醫生名錄

此名錄從 2019年10月開始生效。

本名錄列出東華耆英 (HMO) 計劃網絡內的醫療服務提供者。

此名錄適用於三藩市和聖馬刁縣，包括城市：San Francisco（三藩市），San Mateo（聖馬刁市）。

查詢東華耆英 (HMO) 計劃網絡內醫療服務提供者的最新資訊，請瀏覽[www.cchphealthplan.com/medicare](http://www.cchphealthplan.com/medicare)或聯絡我們的會員服務中心，請於每週7天，上午8時至晚上8時致電1-888-775-7888。聽力殘障人士TTY請致電1-877-681-8898。

## Section 1: Introduction – Network Providers

This section provides a list of CCHP Senior Program (HMO)'s network providers. To get detailed information about your health care coverage, please see your Evidence of Coverage (EOC).

You will have to choose one of our network providers listed in this directory to be your **Primary Care Provider** (PCP). Generally, you must get your health care services from your PCP. A PCP is a health care professional that you select to coordinate your health care. Your PCP is responsible for providing or authorizing covered services while you are a Plan member. Your PCP will also coordinate the rest of the covered services that you get as a member of our Plan.

The network providers listed in this directory have agreed to provide you with your healthcare and vision services. You may go to any of our network providers listed in this directory; however, some services may require a referral. If you have been going to one network provider, you are not required to continue to go to that provider. In some cases, you may get covered services from non-network providers. Other providers are available in our network.

If you receive non-emergency care from non-contracted medical providers without prior authorization, CCHP may not pay for those services unless the services are urgent and our Plan providers are not available, or the services are out-of-area dialysis services. However, if you do receive services from non-contracting providers, you should not pay the bill, but you should first submit a copy of the bill to CCHP Member Services Department for processing and determination of liability.

Emergency services are provided worldwide. If you need emergency services, please visit the nearest emergency room. If you receive emergency treatment at an out-of-network provider, please contact Member Services. Post-stabilization care must be obtained at an in-network provider, unless previously approved by the Plan. If you receive emergency care at an out-of-network hospital and need inpatient care after your emergency condition is stabilized, you must return to an in-network hospital in order for your care to continue to be covered OR you must have your inpatient care at the out-of-network hospital authorized by the Plan.

You must use plan providers except in emergency or urgent care situations or for out-of-area renal dialysis. If you obtain routine care from out-of-network providers, neither Medicare nor CCHP Senior Program (HMO) will be responsible for the costs.

## Section 1: 簡介 – 網絡內醫療服務提供者

本名錄列出東華耆英 (HMO) 計劃網絡內的醫療服務提供者。有關您的醫療保健詳細資料，請參閱您的保障說明書。

您需要在本名錄中選擇您的主治醫生 (PCP)。本名錄全篇都將使用「PCP」這一術語。一般情況下，您必須從您的 PCP 處獲得醫療服務，您的 PCP 是一位健康保健專業人士；作為本計劃的會員，您的主治醫生有責任為您提供，授權及協調醫療服務。

列在本名錄內的“網絡醫生”已經同意為您提供醫療保障。您可以到網絡內任何的醫生就診，但是，某些服務需要轉介信。您不需要一直使用同一個網絡醫生。我們有其他網絡內的醫生可供選擇。在某些情況下，您可能需要使用網絡外的醫療服務。

除了急診和本計劃內的醫生不能協助您或服務範圍外的洗腎服務，如果您沒有得到事先授權而從網絡外的醫生獲得非緊急的護理，華人保健計劃不會支付這些費用。但如果您從網絡外得到的醫療服務，您不應該支付這些費用，您應該第一時間將帳單的影印本呈交給會員服務中心進行處理和確定賠償的責任。

我們提供全球急診保障。如您需要急診服務，請到最近的急症室就診。如您使用網絡外的緊急護理，請聯絡會員服務中心。除非事先得到本計劃的批准，急診穩定後的護理服務必須由網絡內的醫生提供。如果因急症入住網絡外的醫院，在緊急情況穩定後，您必須返回網絡內的醫院留醫或除非得到本計劃事先批准才可以在網絡外的醫院留醫。

除非急症、緊急護理情況、或在區域外進行腎透析，您必須使用網絡提供者。如您接受非網絡提供者的常規護理，Medicare聯邦保健及CCHP東華耆英 (HMO) 計劃將不負責該費用。

### **What is the service area for CCHP Senior Program (HMO)?**

The counties in our service area are listed below:

- San Francisco County
- San Mateo County

### **How do you find CCHP Senior Program (HMO) providers that serve your area?**

Network providers are organized by county. Within each county, the providers are categorized as Primary Care Physicians; Specialists; Mental Health Providers; Skilled Nursing Facilities; or Hospitals, and are sorted alphabetically. In addition, Specialists are sorted by the type of specialty.

If you have questions about CCHP Senior Program (HMO) or require assistance in selecting a PCP, please call our Member Service Department at 1-888-775-7888, seven days a week, 8:00 am to 8:00 pm. TTY users should call 1-877-681-8898. Or, visit [www.cchphealthplan.com/medicare](http://www.cchphealthplan.com/medicare).

## **東華耆英（HMO）計劃的服務範圍在那一區？**

以下是位於我們服務範圍內的縣份名稱：

- 三藩市縣
- 聖馬刁縣

## **如何搜尋東華耆英（HMO）計劃的醫療服務提供者？**

在每一個縣，醫生被歸類為主治醫生 (PCP)、專科醫生、精神科醫生、特技專業護理院、醫院，它們按字母順序排列。同時，專科醫生按專業種類排列。最後，本計劃提供每一位醫療服務提供者的教育和語言背景以協助會員。

如您對東華耆英 (HMO) 計劃有任何疑問或需要協助選擇PCP，聯絡我們的會員服務中心，請於每週7天，上午8 時至晚上8 時致電1-888-775-7888。聽力殘障人TTY/TDD 應致電 1- 877-681-8898。或瀏覽 [www.cchphealthplan.com/medicare](http://www.cchphealthplan.com/medicare)。

**Section 2 – List of Network Providers/ 網絡內醫療服務提供者名單**  
**CCHP/Jade San Francisco County PCPs - 三藩市縣主治醫生**

|                             |                                                                                |                                         |                 |
|-----------------------------|--------------------------------------------------------------------------------|-----------------------------------------|-----------------|
| <b>Chan, Ka Kam, MD 陳嘉淦</b> |                                                                                | NPI #: 1356453815 CA License #: A50447  |                 |
| Primary Care Provider 主診醫生  | Yes 是                                                                          | New Patients 接受新病人                      | No 不是           |
| Address 地址                  | 1199 Bush Street Suite 400<br>San Francisco, CA 94109                          |                                         |                 |
| Phone 電話                    | (415) 921-8210                                                                 |                                         |                 |
| Email 電子郵件                  |                                                                                |                                         |                 |
| Medical Group(s):           | CCHP                                                                           |                                         |                 |
| Specialty 專科                | Internal Medicine 內科                                                           |                                         | Board Certified |
| Other Languages Spoken 語言   | Cantonese 粵語                                                                   |                                         |                 |
| Education 醫科學院              | Hong Kong University, China                                                    |                                         |                 |
| Hospital Affiliations 醫院聯網  |                                                                                |                                         |                 |
| <b>Chen, Frank, MD</b>      |                                                                                | NPI #: 1104010586 CA License #: A120912 |                 |
| Primary Care Provider 主診醫生  | Yes 是                                                                          | New Patients 接受新病人                      | Yes 是           |
| Address 地址                  | 1800 31st Avenue<br>San Francisco, CA 94122                                    |                                         |                 |
| Phone 電話                    | (415) 677-2388                                                                 |                                         |                 |
| Email 電子郵件                  |                                                                                |                                         |                 |
| Medical Group(s):           | CCHP, Jade Health Care                                                         |                                         |                 |
| Specialty 專科                | Family Medicine 家庭科                                                            |                                         | Board Certified |
| Other Languages Spoken 語言   | Mandarin 國語, Taiwanese 台語, Cantonese 粵語                                        |                                         |                 |
| Education 醫科學院              | St. Georges University                                                         |                                         |                 |
| Hospital Affiliations 醫院聯網  | Chinese Hospital, Chinese Hospital                                             |                                         |                 |
| <b>Chu, Paul, MD 朱鐵發</b>    |                                                                                | NPI #: 1215965355 CA License #: A44212  |                 |
| Primary Care Provider 主診醫生  | Yes 是                                                                          | New Patients 接受新病人                      | Yes 是           |
| Address 地址                  | 728 Pacific Avenue Suite 405<br>San Francisco, CA 94133                        |                                         |                 |
| Phone 電話                    | (415) 788-3370                                                                 |                                         |                 |
| Email 電子郵件                  |                                                                                |                                         |                 |
| Medical Group(s):           | CCHP, Jade Health Care                                                         |                                         |                 |
| Specialty 專科                | General Practice 一般家庭科                                                         |                                         | Board Eligible  |
| Other Languages Spoken 語言   | Cantonese 粵語, Mandarin 國語, Taishanese 台山語                                      |                                         |                 |
| Education 醫科學院              | Zhongshan Medical College, China                                               |                                         |                 |
| Hospital Affiliations 醫院聯網  | St. Francis Memorial Hospital, Chinese Hospital, St. Francis Memorial Hospital |                                         |                 |

# CCHP/Jade San Francisco County PCPs - 三藩市縣主治醫生

| Eng, Anderson, DO                    |                                                        | NPI #:1831528363 CA License #: 20A13400  |                 |
|--------------------------------------|--------------------------------------------------------|------------------------------------------|-----------------|
| Primary Care Provider 主診醫生           | Yes 是                                                  | New Patients 接受新病人                       | Yes 是           |
| Address 地址                           | 1800 31st Avenue<br>San Francisco, CA 94122            |                                          |                 |
| Phone 電話                             | (415) 677-2388                                         |                                          |                 |
| Email 電子郵件                           |                                                        |                                          |                 |
| Medical Group(s):                    | CCHP, Jade Health Care                                 |                                          |                 |
| Specialty 專科                         | Internal Medicine 內科                                   |                                          | Board Eligible  |
| Other Languages Spoken 語言            | Cantonese 粵語, Mandarin 國語                              |                                          |                 |
| Education 醫科學院                       | Nova Southeastern University School of Medicine        |                                          |                 |
| Hospital Affiliations 醫院聯網           | Chinese Hospital                                       |                                          |                 |
| Excelsior Health Services 外米慎區華康醫務中心 |                                                        | NPI #:1164458402 CA License #: 550000121 |                 |
| Primary Care Provider 主診醫生           | Yes 是                                                  | New Patients 接受新病人                       | Yes 是           |
| Address 地址                           | 888 Paris Street, Suite 202<br>San Francisco, CA 94112 |                                          |                 |
| Phone 電話                             | (415) 677-2488                                         |                                          |                 |
| Email 電子郵件                           |                                                        |                                          |                 |
| Medical Group(s):                    | CCHP, Jade Health Care                                 |                                          |                 |
| Specialty 專科                         | Primary Care Clinic 醫療護理診所                             |                                          |                 |
| Other Languages Spoken 語言            | Cantonese 粵語, Mandarin 國語                              |                                          |                 |
| Education 醫科學院                       |                                                        |                                          |                 |
| Hospital Affiliations 醫院聯網           |                                                        |                                          |                 |
| Gee, Harry, MD                       |                                                        | NPI #:1740364405 CA License #: G45021    |                 |
| Primary Care Provider 主診醫生           | Yes 是                                                  | New Patients 接受新病人                       | Yes 是           |
| Address 地址                           | 1580 Valencia Street #201<br>San Francisco, CA 94110   |                                          |                 |
| Phone 電話                             | (415) 550-0811                                         |                                          |                 |
| Email 電子郵件                           | Baywest.lm@gmail.com                                   |                                          |                 |
| Medical Group(s):                    | CCHP, Jade Health Care                                 |                                          |                 |
| Specialty 專科                         | Family Medicine 家庭科                                    |                                          | Board Certified |
| Other Languages Spoken 語言            | Spanish Español                                        |                                          |                 |
| Education 醫科學院                       | University of California, San Francisco                |                                          |                 |
| Hospital Affiliations 醫院聯網           |                                                        |                                          |                 |

# CCHP/Jade San Francisco County PCPs - 三藩市縣主治醫生

| Hasanuddin, Harrison, DO   |                                                                  | NPI #:1790165785 CA License #: 20A16309 |                                                       |
|----------------------------|------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------|
| Primary Care Provider 主診醫生 | Yes 是                                                            | New Patients 接受新病人                      | Yes 是                                                 |
| Address 地址                 | 845 Jackson Street B1<br>San Francisco, CA 94133                 |                                         |                                                       |
| Phone 電話                   | (415) 677-2370                                                   |                                         |                                                       |
| Email 電子郵件                 |                                                                  |                                         |                                                       |
| Medical Group(s):          | CCHP, Jade Health Care                                           |                                         |                                                       |
| Specialty 專科               | Family Medicine 家庭科                                              |                                         | Board Certified                                       |
| Other Languages Spoken 語言  | Mandarin 國語, Cantonese 粵語                                        |                                         |                                                       |
| Education 醫科學院             | Arizona College of Osteopathic Medicine at Midwestern University |                                         |                                                       |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                                                 |                                         |                                                       |
| Ho, Gustin, MD 何明聖         |                                                                  | NPI #:1437189966 CA License #: A49169   |                                                       |
| Primary Care Provider 主診醫生 | Yes 是                                                            | New Patients 接受新病人                      | Yes 是                                                 |
| Address 地址                 | 929 Clay Street Suite 401<br>San Francisco, CA 94108             |                                         | 1838 Noriega Street Unit A<br>San Francisco, CA 94122 |
| Phone 電話                   | (415) 982-4100                                                   |                                         | (415) 982-4100                                        |
| Email 電子郵件                 | ghomd@comcast.net                                                |                                         | ghomd@comcast.net                                     |
| Medical Group(s):          | CCHP, Jade Health Care                                           |                                         |                                                       |
| Specialty 專科               | Internal Medicine 內科<br>Cardiovascular Disease 心臟科               |                                         | Board Certified                                       |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                                        |                                         |                                                       |
| Education 醫科學院             | Georgetown University                                            |                                         |                                                       |
| Hospital Affiliations 醫院聯網 | Chinese Hospital, St. Mary's Medical Center                      |                                         |                                                       |
| Huang, Scott, DO 黃昱儒       |                                                                  | NPI #:1225186257 CA License #: 20A9056  |                                                       |
| Primary Care Provider 主診醫生 | Yes 是                                                            | New Patients 接受新病人                      | Yes 是                                                 |
| Address 地址                 | 888 Paris Street Suite 202<br>San Francisco, CA 94112            |                                         | 845 Jackson Street<br>San Francisco, CA 94133         |
| Phone 電話                   | (415) 677-2488                                                   |                                         | (415) 677-2475                                        |
| Email 電子郵件                 |                                                                  |                                         |                                                       |
| Medical Group(s):          | CCHP, Jade Health Care                                           |                                         |                                                       |
| Specialty 專科               | Family Medicine 家庭科                                              |                                         | Board Eligible                                        |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                                        |                                         |                                                       |
| Education 醫科學院             | Western University of Health Sciences                            |                                         |                                                       |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                                                 |                                         |                                                       |

# CCHP/Jade San Francisco County PCPs - 三藩市縣主治醫生

|                            |                                                                            |                                                  |                 |
|----------------------------|----------------------------------------------------------------------------|--------------------------------------------------|-----------------|
| <b>Ko, Edward, MD 高景行</b>  |                                                                            | NPI #:1841364841 CA License #: A61149            |                 |
| Primary Care Provider 主診醫生 | Yes 是                                                                      | New Patients 接受新病人                               | Yes 是           |
| Address 地址                 | 818 Jackson Street #101*<br>San Francisco, CA 94133                        |                                                  |                 |
| Phone 電話                   | (415) 956-9823                                                             |                                                  |                 |
| Email 電子郵件                 | edwardkomd@yahoo.com                                                       |                                                  |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                     |                                                  |                 |
| Specialty 專科               | Internal Medicine 內科                                                       |                                                  | Board Certified |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語, Shanghainese 上海話                                |                                                  |                 |
| Education 醫科學院             | Harvard University                                                         |                                                  |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital, St. Mary's Medical Center, St. Francis Memorial Hospital |                                                  |                 |
| <b>Law, Lisa, MD 羅麗莎</b>   |                                                                            | NPI #:1518030543 CA License #: A61395            |                 |
| Primary Care Provider 主診醫生 | Yes 是                                                                      | New Patients 接受新病人                               | No 不是           |
| Address 地址                 | 728 Pacific Avenue Suite 302<br>San Francisco, CA 94133                    |                                                  |                 |
| Phone 電話                   | (415) 986-0606                                                             |                                                  |                 |
| Email 電子郵件                 | lisalawmd@gmail.com                                                        |                                                  |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                     |                                                  |                 |
| Specialty 專科               | Internal Medicine 內科                                                       |                                                  | Board Eligible  |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                                                  |                                                  |                 |
| Education 醫科學院             | Northwestern University                                                    |                                                  |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                                                           |                                                  |                 |
| <b>Liu, Siwei, NP</b>      |                                                                            | NPI #:1154727998 CA License #: NP95001680        |                 |
| Primary Care Provider 主診醫生 | Yes 是                                                                      | New Patients 接受新病人                               | Yes 是           |
| Address 地址                 | 845 Jackson Street B1<br>San Francisco, CA 94133                           | 888 Paris Street #202<br>San Francisco, CA 94112 |                 |
| Phone 電話                   | (415) 677-2370                                                             | (415) 677-2488                                   |                 |
| Email 電子郵件                 |                                                                            |                                                  |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                     |                                                  |                 |
| Specialty 專科               | Nurse Practitioner 執業護理師                                                   |                                                  | Board Eligible  |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                                                  |                                                  |                 |
| Education 醫科學院             | Sun Yat-Sen University                                                     |                                                  |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                                                           |                                                  |                 |

# CCHP/Jade San Francisco County PCPs - 三藩市縣主治醫生

| Ma, Wai-Man, MD 馬惠民        |                                                         | NPI #: 1407960446 CA License #: C40579           |                 |
|----------------------------|---------------------------------------------------------|--------------------------------------------------|-----------------|
| Primary Care Provider 主診醫生 | Yes 是                                                   | New Patients 接受新病人                               | Yes 是           |
| Address 地址                 | 728 Pacific Avenue Suite 611<br>San Francisco, CA 94133 |                                                  |                 |
| Phone 電話                   | (415) 397-3888                                          |                                                  |                 |
| Email 電子郵件                 | drma611@aol.com                                         |                                                  |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                  |                                                  |                 |
| Specialty 專科               | Family Medicine 家庭科                                     |                                                  | Board Eligible  |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                               |                                                  |                 |
| Education 醫科學院             | University of Texas, San Antonio                        |                                                  |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                                        |                                                  |                 |
| Maung, Aung Kyaw, MD       |                                                         | NPI #: 1518288877 CA License #: A124525          |                 |
| Primary Care Provider 主診醫生 | Yes 是                                                   | New Patients 接受新病人                               | Yes 是           |
| Address 地址                 | 888 Paris Street Suite 202<br>San Francisco, CA 94112   |                                                  |                 |
| Phone 電話                   | (415) 677-2488                                          |                                                  |                 |
| Email 電子郵件                 |                                                         |                                                  |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                  |                                                  |                 |
| Specialty 專科               | Internal Medicine 內科<br>Nephrology 腎科                   |                                                  | Board Certified |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                               |                                                  |                 |
| Education 醫科學院             | University of Medicine Mandalay                         |                                                  |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                                        |                                                  |                 |
| Mo, Yim Ping, NP           |                                                         | NPI #: 1841653458 CA License #: 95003081         |                 |
| Primary Care Provider 主診醫生 | Yes 是                                                   | New Patients 接受新病人                               | Yes 是           |
| Address 地址                 | 888 Paris Street Suite 202<br>San Francisco, CA 94112   | 845 Jackson Street B1<br>San Francisco, CA 94133 |                 |
| Phone 電話                   | (415) 677-2488                                          | (415) 677-2370                                   |                 |
| Email 電子郵件                 | yimpingm@chasf.org                                      |                                                  |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                  |                                                  |                 |
| Specialty 專科               | Nurse Practitioner 執業護理師                                |                                                  | Board Certified |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語, Hakka                        |                                                  |                 |
| Education 醫科學院             | Walden University                                       |                                                  |                 |
| Hospital Affiliations 醫院聯網 |                                                         |                                                  |                 |

# CCHP/Jade San Francisco County PCPs - 三藩市縣主治醫生

| Ngai, Yi Lin, NP           |                                                                                                                                                                                                               | NPI #:1811312408 CA License #: 23468      |                |
|----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|----------------|
| Primary Care Provider 主診醫生 | Yes 是                                                                                                                                                                                                         | New Patients 接受新病人                        | Yes 是          |
| Address 地址                 | 845 Jackson Street B1 1800 31st Avenue<br>San Francisco, CA 94133 San Francisco, CA 94122<br>Phone 電話 (415) 677-2370 (415) 677-2388<br>Email 電子郵件                                                             |                                           |                |
| Medical Group(s):          | CCHP, Jade Health Care                                                                                                                                                                                        |                                           |                |
| Specialty 專科               | Nurse Practitioner 執業護理師                                                                                                                                                                                      |                                           | Board Eligible |
| Other Languages Spoken 語言  | Cantonese 粵語                                                                                                                                                                                                  |                                           |                |
| Education 醫科學院             | University of California San Francisco                                                                                                                                                                        |                                           |                |
| Hospital Affiliations 醫院聯網 |                                                                                                                                                                                                               |                                           |                |
| Qin, Kelly, NP-C           |                                                                                                                                                                                                               | NPI #:1831630813 CA License #: NP95006261 |                |
| Primary Care Provider 主診醫生 | Yes 是                                                                                                                                                                                                         | New Patients 接受新病人                        | Yes 是          |
| Address 地址                 | 845 Jackson Street*<br>San Francisco, CA 94133<br>Phone 電話 (415) 982-2400<br>Email 電子郵件                                                                                                                       |                                           |                |
| Medical Group(s):          | CCHP, Jade Health Care                                                                                                                                                                                        |                                           |                |
| Specialty 專科               | Nurse Practitioner 執業護理師                                                                                                                                                                                      |                                           | Board Eligible |
| Other Languages Spoken 語言  | English, Cantonese 粵語, Mandarin 國語                                                                                                                                                                            |                                           |                |
| Education 醫科學院             | Holy Names University                                                                                                                                                                                         |                                           |                |
| Hospital Affiliations 醫院聯網 |                                                                                                                                                                                                               |                                           |                |
| Shen, Rong, MD 沈嶸          |                                                                                                                                                                                                               | NPI #:1215016175 CA License #: A81146     |                |
| Primary Care Provider 主診醫生 | Yes 是                                                                                                                                                                                                         | New Patients 接受新病人                        | Yes 是          |
| Address 地址                 | 728 Pacific Avenue Suite 606 1838 Noriega Street Unit A<br>San Francisco, CA 94133 San Francisco, CA 94122<br>Phone 電話 (415) 596-3211 (415) 596-3211<br>Email 電子郵件 rongshenfax@gmail.com rongshenmd@gmail.com |                                           |                |
| Medical Group(s):          | CCHP, Jade Health Care                                                                                                                                                                                        |                                           |                |
| Specialty 專科               | Family Medicine 家庭科                                                                                                                                                                                           |                                           | Board Eligible |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                                                                                                                                                                                     |                                           |                |
| Education 醫科學院             | University of Texas, Galveston                                                                                                                                                                                |                                           |                |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                                                                                                                                                                                              |                                           |                |

# CCHP/Jade San Francisco County PCPs - 三藩市縣主治醫生

| Sunset Health Services 日落區華康醫務中心 |                                                       | NPI #:1487684452 CA License #: 220000358 |                 |
|----------------------------------|-------------------------------------------------------|------------------------------------------|-----------------|
| Primary Care Provider 主診醫生       | Yes 是                                                 | New Patients 接受新病人                       | Yes 是           |
| Address 地址                       | 1800 31st Avenue<br>San Francisco, CA 94122           |                                          |                 |
| Phone 電話                         | (415) 677-2388                                        |                                          |                 |
| Email 電子郵件                       |                                                       |                                          |                 |
| Medical Group(s):                | CCHP, Jade Health Care                                |                                          |                 |
| Specialty 專科                     | Primary Care Clinic 醫療護理診所                            |                                          |                 |
| Other Languages Spoken 語言        | Cantonese 粵語, Mandarin 國語                             |                                          |                 |
| Education 醫科學院                   |                                                       |                                          |                 |
| Hospital Affiliations 醫院聯網       |                                                       |                                          |                 |
| Support Health Services 健康服務中心   |                                                       | NPI #:1992898837 CA License #: 220000122 |                 |
| Primary Care Provider 主診醫生       | Yes 是                                                 | New Patients 接受新病人                       | Yes 是           |
| Address 地址                       | 845 Jackson Street, B1<br>San Francisco, CA 94133     |                                          |                 |
| Phone 電話                         | (415) 677-2370                                        |                                          |                 |
| Email 電子郵件                       |                                                       |                                          |                 |
| Medical Group(s):                | CCHP, Jade Health Care                                |                                          |                 |
| Specialty 專科                     | Primary Care Clinic 醫療護理診所                            |                                          |                 |
| Other Languages Spoken 語言        | Cantonese 粵語, Mandarin 國語                             |                                          |                 |
| Education 醫科學院                   |                                                       |                                          |                 |
| Hospital Affiliations 醫院聯網       |                                                       |                                          |                 |
| Tang, Sai Ying, NP               |                                                       | NPI #:1164772448 CA License #: NP21809   |                 |
| Primary Care Provider 主診醫生       | Yes 是                                                 | New Patients 接受新病人                       | Yes 是           |
| Address 地址                       | 888 Paris Street Suite 202<br>San Francisco, CA 94112 |                                          |                 |
| Phone 電話                         | (415) 677-2488                                        |                                          |                 |
| Email 電子郵件                       |                                                       |                                          |                 |
| Medical Group(s):                | CCHP, Jade Health Care                                |                                          |                 |
| Specialty 專科                     | Nurse Practitioner 執業護理師                              |                                          | Board Certified |
| Other Languages Spoken 語言        |                                                       |                                          |                 |
| Education 醫科學院                   | John Hopkins University School of Nursing             |                                          |                 |
| Hospital Affiliations 醫院聯網       |                                                       |                                          |                 |

# CCHP/Jade San Francisco County PCPs - 三藩市縣主治醫生

| Tran, Thanh, MD            |                                                                | NPI #: 1134264831 CA License #: A52468                |                |
|----------------------------|----------------------------------------------------------------|-------------------------------------------------------|----------------|
| Primary Care Provider 主診醫生 | Yes 是                                                          | New Patients 接受新病人                                    | Yes 是          |
| Address 地址                 | 439 O'Farrell Street<br>San Francisco, CA 94102                |                                                       |                |
| Phone 電話                   | (415) 441-4882                                                 |                                                       |                |
| Email 電子郵件                 |                                                                |                                                       |                |
| Medical Group(s):          | Jade Health Care                                               |                                                       |                |
| Specialty 專科               | General Practice 一般家庭科<br>Neurology 腦科                         |                                                       | Board Eligible |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語, Cambodian ភាសាខ្មែរ, Vietnamese 越南語 |                                                       |                |
| Education 醫科學院             | University of Saigon, Vietnam                                  |                                                       |                |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                                               |                                                       |                |
| Wu, John, MD 吳鴻恩           |                                                                | NPI #: 1619099272 CA License #: A29670                |                |
| Primary Care Provider 主診醫生 | Yes 是                                                          | New Patients 接受新病人                                    | Yes 是          |
| Address 地址                 | 929 Clay Street Suite 403<br>San Francisco, CA 94108           |                                                       |                |
| Phone 電話                   | (415) 981-0303                                                 |                                                       |                |
| Email 電子郵件                 | wuj981@yahoo.com                                               |                                                       |                |
| Medical Group(s):          | CCHP, Jade Health Care                                         |                                                       |                |
| Specialty 專科               | Internal Medicine 內科                                           |                                                       | Board Eligible |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                                      |                                                       |                |
| Education 醫科學院             | National Defense Medical Center, Taiwan                        |                                                       |                |
| Hospital Affiliations 醫院聯網 | Chinese Hospital, St. Francis Memorial Hospital                |                                                       |                |
| Ye, Maian, DO 葉脈安          |                                                                | NPI #: 1912198110 CA License #: 20A10714              |                |
| Primary Care Provider 主診醫生 | Yes 是                                                          | New Patients 接受新病人                                    | Yes 是          |
| Address 地址                 | 929 Clay Street Suite 302<br>San Francisco, CA 94108           | 1838 Noriega Street Unit A<br>San Francisco, CA 94122 |                |
| Phone 電話                   | (415) 361-5086                                                 | (415) 361-5086                                        |                |
| Email 電子郵件                 |                                                                |                                                       |                |
| Medical Group(s):          | CCHP, Jade Health Care                                         |                                                       |                |
| Specialty 專科               | Internal Medicine 內科<br>Nephrology 腎科                          |                                                       | Board Eligible |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語, Toishanese                          |                                                       |                |
| Education 醫科學院             | New York College of Osteopathic Medicine                       |                                                       |                |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                                               |                                                       |                |

## CCHP/Jade San Francisco County PCPs - 三藩市縣主治醫生

| Zheng, Weiwen, MD 鄭衛文      |                                                          | NPI #: 1023059201 CA License #: A92238 |                                                                 |
|----------------------------|----------------------------------------------------------|----------------------------------------|-----------------------------------------------------------------|
| Primary Care Provider 主診醫生 | Yes 是                                                    | New Patients 接受新病人                     | Yes 是                                                           |
| Address 地址                 | 950 Stockton Street Suite 328<br>San Francisco, CA 94108 |                                        | 1838 Noriega Street 2nd floor Unit A<br>San Francisco, CA 94122 |
| Phone 電話                   | (415) 398-2698                                           |                                        | (415) 398-2698                                                  |
| Email 電子郵件                 | zhengweiwen@hotmail.com                                  |                                        |                                                                 |
| Medical Group(s):          | CCHP, Jade Health Care                                   |                                        |                                                                 |
| Specialty 專科               | Family Medicine 家庭科                                      |                                        | Board Eligible                                                  |
| Other Languages Spoken 語言  | Cantonese 粵語, Taiwanese 台語, Mandarin 國語                  |                                        |                                                                 |
| Education 醫科學院             | Sun Yat-Sen University, China                            |                                        |                                                                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital, St. Francis Memorial Hospital          |                                        |                                                                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Acupuncture 針灸             |                                                           |                                         |                |
|----------------------------|-----------------------------------------------------------|-----------------------------------------|----------------|
| <b>Chen, Esther, Lac</b>   |                                                           | NPI #: 1285750299 CA License #: AC10941 |                |
| Primary Care Provider 主診醫生 | No 不是                                                     | New Patients 接受新病人                      | Yes 是          |
| Address 地址                 | 445 Grant Avenue Ground Floor*<br>San Francisco, CA 94108 |                                         |                |
| Phone 電話                   | (415) 795-8100                                            |                                         |                |
| Email 電子郵件                 |                                                           |                                         |                |
| Medical Group(s):          | CCHP, Jade Health Care                                    |                                         |                |
| Specialty 專科               | Acupuncture 針灸                                            |                                         | Board Eligible |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                                 |                                         |                |
| Education 醫科學院             | American College of Traditional Chinese Medicine          |                                         |                |
| Hospital Affiliations 醫院聯網 |                                                           |                                         |                |
| <b>Huey, Sabine, LAC</b>   |                                                           | NPI #: 1316304066 CA License #: AC16269 |                |
| Primary Care Provider 主診醫生 | No 不是                                                     | New Patients 接受新病人                      | Yes 是          |
| Address 地址                 | 445 Grant Avenue Ground Floor*<br>San Francisco, CA 94108 |                                         |                |
| Phone 電話                   | (415) 795-8100                                            |                                         |                |
| Email 電子郵件                 | sabineh@chasf.org                                         |                                         |                |
| Medical Group(s):          | CCHP, Jade Health Care                                    |                                         |                |
| Specialty 專科               | Acupuncture 針灸                                            |                                         | Board Eligible |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                                 |                                         |                |
| Education 醫科學院             | American College of Traditional Chinese Medicine          |                                         |                |
| Hospital Affiliations 醫院聯網 |                                                           |                                         |                |
| <b>Leung, Cecilia, LAC</b> |                                                           | NPI #: 1912265463 CA License #: AC14700 |                |
| Primary Care Provider 主診醫生 | No 不是                                                     | New Patients 接受新病人                      | Yes 是          |
| Address 地址                 | 445 Grant Avenue Ground Level<br>San Francisco, CA 94108  |                                         |                |
| Phone 電話                   | (415) 795-8100                                            |                                         |                |
| Email 電子郵件                 |                                                           |                                         |                |
| Medical Group(s):          | CCHP, Jade Health Care                                    |                                         |                |
| Specialty 專科               | Acupuncture 針灸                                            |                                         | Board Eligible |
| Other Languages Spoken 語言  | Mandarin 國語, Cantonese 粵語                                 |                                         |                |
| Education 醫科學院             |                                                           |                                         |                |
| Hospital Affiliations 醫院聯網 |                                                           |                                         |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Acupuncture 針灸                 |                                                           |                                         |                |
|--------------------------------|-----------------------------------------------------------|-----------------------------------------|----------------|
| <b>Ng, Catherine, LAC</b>      |                                                           | NPI #: 1023566106 CA License #: AC16950 |                |
| Primary Care Provider 主診醫生     | No 不是                                                     | New Patients 接受新病人                      | Yes 是          |
| Address 地址                     | 445 Grant Avenue Ground level*<br>San Francisco, CA 94108 |                                         |                |
| Phone 電話                       | (415) 795-8100                                            |                                         |                |
| Email 電子郵件                     |                                                           |                                         |                |
| Medical Group(s):              | CCHP, Jade Health Care                                    |                                         |                |
| Specialty 專科                   | Acupuncture 針灸                                            |                                         | Board Eligible |
| Other Languages Spoken 語言      | Cantonese 粵語, Mandarin 國語                                 |                                         |                |
| Education 醫科學院                 | Five Branches University                                  |                                         |                |
| Hospital Affiliations 醫院聯網     |                                                           |                                         |                |
| <b>Washington, Vickie, LAC</b> |                                                           | NPI #: 1194104679 CA License #: AC16602 |                |
| Primary Care Provider 主診醫生     | No 不是                                                     | New Patients 接受新病人                      | Yes 是          |
| Address 地址                     | 445 Grant Avenue Ground Floor<br>San Francisco, CA 94108  |                                         |                |
| Phone 電話                       | (415) 795-8100                                            |                                         |                |
| Email 電子郵件                     |                                                           |                                         |                |
| Medical Group(s):              | CCHP, Jade Health Care                                    |                                         |                |
| Specialty 專科                   | Acupuncture 針灸                                            |                                         | Board Eligible |
| Other Languages Spoken 語言      | Cantonese 粵語, Mandarin 國語                                 |                                         |                |
| Education 醫科學院                 | American College of Traditional Chinese                   |                                         |                |
| Hospital Affiliations 醫院聯網     |                                                           |                                         |                |
| <b>Yuen, Emily, L.Ac</b>       |                                                           | NPI #: 1477951986 CA License #: AC15631 |                |
| Primary Care Provider 主診醫生     | No 不是                                                     | New Patients 接受新病人                      | Yes 是          |
| Address 地址                     | 445 Grant Avenue*<br>San Francisco, CA 94108              |                                         |                |
| Phone 電話                       | (415) 795-8100                                            |                                         |                |
| Email 電子郵件                     |                                                           |                                         |                |
| Medical Group(s):              | Jade Health Care                                          |                                         |                |
| Specialty 專科                   | Acupuncture 針灸                                            |                                         | Board Eligible |
| Other Languages Spoken 語言      |                                                           |                                         |                |
| Education 醫科學院                 | American College of Traditional Chinese Medicine          |                                         |                |
| Hospital Affiliations 醫院聯網     |                                                           |                                         |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Acupuncture 針灸             |                                    |                                         |                |
|----------------------------|------------------------------------|-----------------------------------------|----------------|
| Zhou, Vincent, LAc         |                                    | NPI #: 1730499468 CA License #: AC13784 |                |
| Primary Care Provider 主診醫生 | No 不是                              | New Patients 接受新病人                      | Yes 是          |
| Address 地址                 | 2451 Judah Street*                 |                                         |                |
| Phone 電話                   | San Francisco, CA 94122            |                                         |                |
| Email 電子郵件                 | (415) 340-3260                     |                                         |                |
| Medical Group(s):          | CCHP, Jade Health Care             |                                         |                |
| Specialty 專科               | Acupuncture 針灸                     |                                         | Board Eligible |
| Other Languages Spoken 語言  | Chinese, Mandarin 國語               |                                         |                |
| Education 醫科學院             | University of East & West Medicine |                                         |                |
| Hospital Affiliations 醫院聯網 |                                    |                                         |                |

## CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Adult-Gerontology Nurse Practitioner |                                                       |                                          |                |
|--------------------------------------|-------------------------------------------------------|------------------------------------------|----------------|
| Heuklom, Shannon, NP                 |                                                       | NPI #: 1144686312 CA License #: 95080303 |                |
| Primary Care Provider 主診醫生           | No 不是                                                 | New Patients 接受新病人                       | Yes 是          |
| Address 地址                           | 330 Ellis Street Suite 600<br>San Francisco, CA 94102 |                                          |                |
| Phone 電話                             | (415) 674-6140                                        |                                          |                |
| Email 電子郵件                           |                                                       |                                          |                |
| Medical Group(s):                    | CCHP                                                  |                                          |                |
| Specialty 專科                         | Adult-Gerontology Nurse Practitioner                  |                                          | Board Eligible |
| Other Languages Spoken 語言            |                                                       |                                          |                |
| Education 醫科學院                       | John Hopkins University                               |                                          |                |
| Hospital Affiliations 醫院聯網           |                                                       |                                          |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Allergy & Immunology 敏感科   |                                                          |                                          |                 |
|----------------------------|----------------------------------------------------------|------------------------------------------|-----------------|
| Wang, Roger, DO 汪嶸卿        |                                                          | NPI #: 1164522165 CA License #: 20A10816 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                    | New Patients 接受新病人                       | Yes 是           |
| Address 地址                 | 950 Stockton Street Suite 399<br>San Francisco, CA 94108 |                                          |                 |
| Phone 電話                   | 415-677-0901                                             |                                          |                 |
| Email 電子郵件                 | acc950@gmail.com                                         |                                          |                 |
| Medical Group(s):          | Jade Health Care                                         |                                          |                 |
| Specialty 專科               | Allergy & Immunology 敏感科<br>Rheumatology 風濕科             |                                          | Board Certified |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                                |                                          |                 |
| Education 醫科學院             | University of New England                                |                                          |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                                         |                                          |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Anesthesiology 麻醉科         |                                                              |                                          |                 |
|----------------------------|--------------------------------------------------------------|------------------------------------------|-----------------|
| <b>Celis, Edgar, MD</b>    |                                                              | NPI #: 1851473268 CA License #: C131803  |                 |
| Primary Care Provider 主診醫生 | No 不是                                                        | New Patients 接受新病人                       | Yes 是           |
| Address 地址                 | 1160 Post Street*<br>San Francisco, CA 94109                 |                                          |                 |
| Phone 電話                   | (415) 440-1100                                               |                                          |                 |
| Email 電子郵件                 |                                                              |                                          |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                       |                                          |                 |
| Specialty 專科               | Anesthesiology 麻醉科                                           |                                          | Board Certified |
| Other Languages Spoken 語言  | Spanish Español                                              |                                          |                 |
| Education 醫科學院             | Pontificia Universidad Javeriana Bogota Facultad de Medicina |                                          |                 |
| Hospital Affiliations 醫院聯網 |                                                              |                                          |                 |
| <b>Chow, Irwin, MD</b>     |                                                              | NPI #: 1184637530 CA License #: A81510   |                 |
| Primary Care Provider 主診醫生 | No 不是                                                        | New Patients 接受新病人                       | Yes 是           |
| Address 地址                 | 845 Jackson Street B1<br>San Francisco, CA 94133             |                                          |                 |
| Phone 電話                   | (415) 677-2360                                               |                                          |                 |
| Email 電子郵件                 |                                                              |                                          |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                       |                                          |                 |
| Specialty 專科               | Anesthesiology 麻醉科                                           |                                          | Board Certified |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                                    |                                          |                 |
| Education 醫科學院             | University of Michigan-Ann Arbor                             |                                          |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                                             |                                          |                 |
| <b>Dery, Molyan, CRNA</b>  |                                                              | NPI #: 1033407853 CA License #: 95125311 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                        | New Patients 接受新病人                       | Yes 是           |
| Address 地址                 | 1160 Post Street*<br>San Francisco, CA 94109                 |                                          |                 |
| Phone 電話                   | (415) 440-1100                                               |                                          |                 |
| Email 電子郵件                 |                                                              |                                          |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                       |                                          |                 |
| Specialty 專科               | Anesthesiology 麻醉科                                           |                                          | Board Eligible  |
| Other Languages Spoken 語言  |                                                              |                                          |                 |
| Education 醫科學院             | Duke University, School of Nursing                           |                                          |                 |
| Hospital Affiliations 醫院聯網 |                                                              |                                          |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Anesthesiology 麻醉科            |                                                              |                                                |                 |
|-------------------------------|--------------------------------------------------------------|------------------------------------------------|-----------------|
| <b>Kanzaria, Kantilal, MD</b> |                                                              | NPI #: 1932156684 CA License #: A39152         |                 |
| Primary Care Provider 主診醫生    | No 不是                                                        | New Patients 接受新病人                             | Yes 是           |
| Address 地址                    | 1160 Post Street<br>San Francisco, CA 94109                  |                                                |                 |
| Phone 電話                      | (415) 440-1100                                               |                                                |                 |
| Email 電子郵件                    |                                                              |                                                |                 |
| Medical Group(s):             | CCHP, Jade Health Care                                       |                                                |                 |
| Specialty 專科                  | Anesthesiology 麻醉科                                           |                                                | Board Eligible  |
| Other Languages Spoken 語言     |                                                              |                                                |                 |
| Education 醫科學院                | topiwala national medical college                            |                                                |                 |
| Hospital Affiliations 醫院聯網    |                                                              |                                                |                 |
| <b>Lee, Diana, DO</b>         |                                                              | NPI #: 1851686828 CA License #: 20A11529       |                 |
| Primary Care Provider 主診醫生    | No 不是                                                        | New Patients 接受新病人                             | Yes 是           |
| Address 地址                    | 1160 Post Street*<br>San Francisco, CA 94109                 |                                                |                 |
| Phone 電話                      | (415) 440-1100                                               |                                                |                 |
| Email 電子郵件                    |                                                              |                                                |                 |
| Medical Group(s):             | CCHP, Jade Health Care                                       |                                                |                 |
| Specialty 專科                  | Anesthesiology 麻醉科                                           |                                                | Board Eligible  |
| Other Languages Spoken 語言     |                                                              |                                                |                 |
| Education 醫科學院                | Touro University, California College of Osteopathic Medicine |                                                |                 |
| Hospital Affiliations 醫院聯網    |                                                              |                                                |                 |
| <b>Li, Ho-Yin, MD 李浩然</b>     |                                                              | NPI #: 1265515290 CA License #: C50572         |                 |
| Primary Care Provider 主診醫生    | No 不是                                                        | New Patients 接受新病人                             | Yes 是           |
| Address 地址                    | 355 Cesar Chavez Street<br>San Francisco, CA 94110           | 1623 Noriega Street<br>San Francisco, CA 94122 |                 |
| Phone 電話                      | (209) 956-7725                                               | (415) 525-6022                                 |                 |
| Email 電子郵件                    | tforshey@sierrahealth.net                                    | tforshey@sierrahealth.net                      |                 |
| Medical Group(s):             | CCHP, Jade Health Care                                       |                                                |                 |
| Specialty 專科                  | Anesthesiology 麻醉科<br>Critical Care Medicine 重症監護科           |                                                | Board Certified |
| Other Languages Spoken 語言     | Cantonese 粵語                                                 |                                                |                 |
| Education 醫科學院                | Queen's University of Belfast, UK                            |                                                |                 |
| Hospital Affiliations 醫院聯網    | Chinese Hospital                                             |                                                |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Anesthesiology 麻醉科         |                                                  |                                        |                 |
|----------------------------|--------------------------------------------------|----------------------------------------|-----------------|
| Sun, Yang, MD              |                                                  | NPI #: 1649236076 CA License #: A77809 |                 |
| Primary Care Provider 主診醫生 | No 不是                                            | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 845 Jackson Street B1<br>San Francisco, CA 94133 |                                        |                 |
| Phone 電話                   | (415) 677-2360                                   |                                        |                 |
| Email 電子郵件                 |                                                  |                                        |                 |
| Medical Group(s):          | CCHP, Jade Health Care                           |                                        |                 |
| Specialty 專科               | Anesthesiology 麻醉科                               |                                        | Board Certified |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                        |                                        |                 |
| Education 醫科學院             | Chongqing Medical University, China              |                                        |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                                 |                                        |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Audiology 聽覺科              |                                                           |                                        |                |
|----------------------------|-----------------------------------------------------------|----------------------------------------|----------------|
| Leung, Pui Fung, AuD       |                                                           | NPI #: 1346289089 CA License #: AU1813 |                |
| Primary Care Provider 主診醫生 | No 不是                                                     | New Patients 接受新病人                     | Yes 是          |
| Address 地址                 | 3150 California Street Suite 1<br>San Francisco, CA 94115 |                                        |                |
| Phone 電話                   | (415) 346-6886                                            |                                        |                |
| Email 電子郵件                 | support@audiologysf.com                                   |                                        |                |
| Medical Group(s):          | CCHP                                                      |                                        |                |
| Specialty 專科               | Audiology 聽覺科                                             |                                        | Board Eligible |
| Other Languages Spoken 語言  |                                                           |                                        |                |
| Education 醫科學院             | Arizona School of Health Sciences                         |                                        |                |
| Hospital Affiliations 醫院聯網 |                                                           |                                        |                |

## CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Board Certified Behavior Analyst |                                                     |                                            |                |
|----------------------------------|-----------------------------------------------------|--------------------------------------------|----------------|
| Yost, Margaret, BCBA             |                                                     | NPI #: 1881937126 CA License #: 1-15-19584 |                |
| Primary Care Provider 主診醫生       | No 不是                                               | New Patients 接受新病人                         | Yes 是          |
| Address 地址                       | 1663 Mission Street #400<br>San Francisco, CA 94103 |                                            |                |
| Phone 電話                         | (877) 264-6747                                      |                                            |                |
| Email 電子郵件                       |                                                     |                                            |                |
| Medical Group(s):                | CCHP                                                |                                            |                |
| Specialty 專科                     | Board Certified Behavior Analyst                    |                                            | Board Eligible |
| Other Languages Spoken 語言        | Spanish Español, French Français                    |                                            |                |
| Education 醫科學院                   | Western New England University                      |                                            |                |
| Hospital Affiliations 醫院聯網       |                                                     |                                            |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Cardiovascular Disease 心臟科  |                                                                                                         |                                        |       |
|-----------------------------|---------------------------------------------------------------------------------------------------------|----------------------------------------|-------|
| <b>Cavero, Patricia, MD</b> |                                                                                                         | NPI #: 1912081654 CA License #: G65848 |       |
| Primary Care Provider 主診醫生  | No 不是                                                                                                   | New Patients 接受新病人                     | Yes 是 |
| Address 地址                  | 1580 Valencia Street #801 2250 Hayes St.*<br>San Francisco, CA 94110 San Francisco, CA 94117            |                                        |       |
| Phone 電話                    | (415) 282-3030 (415) 666-3220                                                                           |                                        |       |
| Email 電子郵件                  | pcaverocardio@gmail.com                                                                                 |                                        |       |
| Medical Group(s):           | CCHP                                                                                                    |                                        |       |
| Specialty 專科                | Cardiovascular Disease 心臟科 Board Certified                                                              |                                        |       |
| Other Languages Spoken 語言   | Tagalog, Spanish Español                                                                                |                                        |       |
| Education 醫科學院              | Northwestern University                                                                                 |                                        |       |
| Hospital Affiliations 醫院聯網  | Seton Medical Center, St. Mary's Medical Center, CPMC - St. Luke's Campus                               |                                        |       |
| <b>Chun, James, MD 陳偉勳</b>  |                                                                                                         | NPI #: 1134143506 CA License #: G75949 |       |
| Primary Care Provider 主診醫生  | No 不是                                                                                                   | New Patients 接受新病人                     | Yes 是 |
| Address 地址                  | 2250 Hayes Street #204<br>San Francisco, CA 94117                                                       |                                        |       |
| Phone 電話                    | (415) 933-9100                                                                                          |                                        |       |
| Email 電子郵件                  | breallofc@sbcglobal.net                                                                                 |                                        |       |
| Medical Group(s):           | CCHP                                                                                                    |                                        |       |
| Specialty 專科                | Cardiovascular Disease 心臟科 Board Certified                                                              |                                        |       |
| Other Languages Spoken 語言   | Cantonese 粵語 Tagalog,                                                                                   |                                        |       |
| Education 醫科學院              | University of Medicine & Dentistry of New Jersey                                                        |                                        |       |
| Hospital Affiliations 醫院聯網  | St. Francis Memorial Hospital, St. Mary's Medical Center                                                |                                        |       |
| <b>Ho, Gustin, MD 何明聖</b>   |                                                                                                         | NPI #: 1437189966 CA License #: A49169 |       |
| Primary Care Provider 主診醫生  | Yes 是                                                                                                   | New Patients 接受新病人                     | Yes 是 |
| Address 地址                  | 929 Clay Street Suite 401 1838 Noriega Street Unit A<br>San Francisco, CA 94108 San Francisco, CA 94122 |                                        |       |
| Phone 電話                    | (415) 982-4100 (415) 982-4100                                                                           |                                        |       |
| Email 電子郵件                  | ghomd@comcast.net ghomd@comcast.net                                                                     |                                        |       |
| Medical Group(s):           | CCHP, Jade Health Care                                                                                  |                                        |       |
| Specialty 專科                | Cardiovascular Disease 心臟科 Board Eligible                                                               |                                        |       |
| Other Languages Spoken 語言   | Cantonese 粵語, Mandarin 國語                                                                               |                                        |       |
| Education 醫科學院              | Georgetown University                                                                                   |                                        |       |
| Hospital Affiliations 醫院聯網  | Chinese Hospital, St. Mary's Medical Center                                                             |                                        |       |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Cardiovascular Disease 心臟科  |                                                                                                   |                                        |       |
|-----------------------------|---------------------------------------------------------------------------------------------------|----------------------------------------|-------|
| <b>Lam, Diana, MD</b>       |                                                                                                   | NPI #: 1659455251 CA License #: G45411 |       |
| Primary Care Provider 主診醫生  | Yes 是                                                                                             | New Patients 接受新病人                     | Yes 是 |
| Address 地址                  | 1199 Bush Street Suite 560 1800 31st Avenue<br>San Francisco, CA 94109 San Francisco, CA 94122    |                                        |       |
| Phone 電話                    | (415) 664-9183 (415) 677-2388                                                                     |                                        |       |
| Email 電子郵件                  | dianalammd@att.net dianalammd@att.net                                                             |                                        |       |
| Medical Group(s):           | CCHP, Jade Health Care                                                                            |                                        |       |
| Specialty 專科                | Cardiovascular Disease 心臟科 Board Certified                                                        |                                        |       |
| Other Languages Spoken 語言   | Cantonese 粵語, Mandarin 國語                                                                         |                                        |       |
| Education 醫科學院              | University of California, San Diego                                                               |                                        |       |
| Hospital Affiliations 醫院聯網  | Chinese Hospital, St. Francis Memorial Hospital, St. Mary's Medical Center                        |                                        |       |
| <b>Millhouse, Felix, MD</b> |                                                                                                   | NPI #: 1811912447 CA License #: G44428 |       |
| Primary Care Provider 主診醫生  | No 不是                                                                                             | New Patients 接受新病人                     | No 不是 |
| Address 地址                  | 2100 Webster Street Suite 400*<br>San Francisco, CA 94115                                         |                                        |       |
| Phone 電話                    | (650) 994-4666                                                                                    |                                        |       |
| Email 電子郵件                  | millhousemd@gmail.com                                                                             |                                        |       |
| Medical Group(s):           | CCHP, Jade Health Care                                                                            |                                        |       |
| Specialty 專科                | Cardiovascular Disease 心臟科 Board Certified                                                        |                                        |       |
| Other Languages Spoken 語言   | Spanish Español, Tagalog                                                                          |                                        |       |
| Education 醫科學院              | Medical College of Virginia                                                                       |                                        |       |
| Hospital Affiliations 醫院聯網  | Seton Medical Center, CPMC - St. Luke's Campus                                                    |                                        |       |
| <b>Teng, Peter, MD</b>      |                                                                                                   | NPI #: 1588688972 CA License #: G84598 |       |
| Primary Care Provider 主診醫生  | No 不是                                                                                             | New Patients 接受新病人                     | No 不是 |
| Address 地址                  | 2250 Hayes Street #204<br>San Francisco, CA 94117                                                 |                                        |       |
| Phone 電話                    | (415) 933-9100                                                                                    |                                        |       |
| Email 電子郵件                  | sk.breallgroup@gmail.com                                                                          |                                        |       |
| Medical Group(s):           | CCHP                                                                                              |                                        |       |
| Specialty 專科                | Cardiovascular Disease 心臟科 Board Certified                                                        |                                        |       |
| Other Languages Spoken 語言   | Mandarin 國語, Cantonese 粵語                                                                         |                                        |       |
| Education 醫科學院              | University of Medicine & Dentistry of New Jersey                                                  |                                        |       |
| Hospital Affiliations 醫院聯網  | Chinese Hospital, St. Mary's Medical Center, St. Francis Memorial Hospital, CPMC - Pacific Campus |                                        |       |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Chiropractic 脊椎神經治療         |                                               |                                        |                |
|-----------------------------|-----------------------------------------------|----------------------------------------|----------------|
| <b>Lau, Andrew, DC 劉俊英</b>  |                                               | NPI #:1790880482 CA License #: DC20278 |                |
| Primary Care Provider 主診醫生  | No 不是                                         | New Patients 接受新病人                     | Yes 是          |
| Address 地址                  | 2335 Irving Street<br>San Francisco, CA 94122 |                                        |                |
| Phone 電話                    | (415) 681-3883                                |                                        |                |
| Email 電子郵件                  |                                               |                                        |                |
| Medical Group(s):           | CCHP, Jade Health Care                        |                                        |                |
| Specialty 專科                | Chiropractic 脊椎神經治療                           |                                        | Board Eligible |
| Other Languages Spoken 語言   | Cantonese 粵語, Mandarin 國語                     |                                        |                |
| Education 醫科學院              | Palmer College of Chiropractic-West           |                                        |                |
| Hospital Affiliations 醫院聯網  |                                               |                                        |                |
| <b>Lau, Francis, DC 劉俊雄</b> |                                               | NPI #:1770688459 CA License #: DC20279 |                |
| Primary Care Provider 主診醫生  | No 不是                                         | New Patients 接受新病人                     | Yes 是          |
| Address 地址                  | 2335 Irving Street<br>San Francisco, CA 94122 |                                        |                |
| Phone 電話                    | (415) 681-3883                                |                                        |                |
| Email 電子郵件                  |                                               |                                        |                |
| Medical Group(s):           | CCHP, Jade Health Care                        |                                        |                |
| Specialty 專科                | Chiropractic 脊椎神經治療                           |                                        | Board Eligible |
| Other Languages Spoken 語言   | Cantonese 粵語, Mandarin 國語                     |                                        |                |
| Education 醫科學院              | Cleveland Chiropractic College                |                                        |                |
| Hospital Affiliations 醫院聯網  |                                               |                                        |                |
| <b>Lau, Gary, DC 劉俊賢</b>    |                                               | NPI #:1770688442 CA License #: DC15283 |                |
| Primary Care Provider 主診醫生  | No 不是                                         | New Patients 接受新病人                     | Yes 是          |
| Address 地址                  | 2335 Irving Street<br>San Francisco, CA 94122 |                                        |                |
| Phone 電話                    | (415) 681-3883                                |                                        |                |
| Email 電子郵件                  |                                               |                                        |                |
| Medical Group(s):           | CCHP, Jade Health Care                        |                                        |                |
| Specialty 專科                | Chiropractic 脊椎神經治療                           |                                        | Board Eligible |
| Other Languages Spoken 語言   | Cantonese 粵語, Mandarin 國語                     |                                        |                |
| Education 醫科學院              | Cleveland Chiropractic College                |                                        |                |
| Hospital Affiliations 醫院聯網  |                                               |                                        |                |

## CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Chiropractic 脊椎神經治療        |                                                           |                                         |                |
|----------------------------|-----------------------------------------------------------|-----------------------------------------|----------------|
| So, Kenneth, DC 蘇志雄        |                                                           | NPI #: 1023047743 CA License #: DC11662 |                |
| Primary Care Provider 主診醫生 | No 不是                                                     | New Patients 接受新病人                      | Yes 是          |
| Address 地址                 | 1237 Van Ness Avenue Suite 300<br>San Francisco, CA 94109 |                                         |                |
| Phone 電話                   | (415) 775-4204                                            |                                         |                |
| Email 電子郵件                 | LSandH1234@gmail.com                                      |                                         |                |
| Medical Group(s):          | CCHP                                                      |                                         |                |
| Specialty 專科               | Chiropractic 脊椎神經治療                                       |                                         | Board Eligible |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                                 |                                         |                |
| Education 醫科學院             | Palmer College of Chiropractic-West                       |                                         |                |
| Hospital Affiliations 醫院聯網 |                                                           |                                         |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Colon & Rectal Surgery 結直腸外科    |                                                                                                                                                            |                                        |       |
|---------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-------|
| <b>Leichtling, Jonathan, MD</b> |                                                                                                                                                            | NPI #: 1811094915 CA License #: G31362 |       |
| Primary Care Provider 主診醫生      | No 不是                                                                                                                                                      | New Patients 接受新病人                     | Yes 是 |
| Address 地址                      | 1580 Valencia Street Suite 809 19 Wilmot Street<br>San Francisco, CA 94110 San Francisco, CA 94115<br>Phone 電話 (415) 285-4666 (415) 285-4666<br>Email 電子郵件 |                                        |       |
| Medical Group(s):               | Jade Health Care                                                                                                                                           |                                        |       |
| Specialty 專科                    | Colon & Rectal Surgery 結直腸外科 Board Eligible<br>General Surgery 普通外科                                                                                        |                                        |       |
| Other Languages Spoken 語言       | Spanish Español                                                                                                                                            |                                        |       |
| Education 醫科學院                  | Columbia University College of Physicians and Surgeons                                                                                                     |                                        |       |
| Hospital Affiliations 醫院聯網      | CPMC - St. Luke's Campus, St. Francis Memorial Hospital, CPMC                                                                                              |                                        |       |
| <b>Million, Carolyn, MD</b>     |                                                                                                                                                            | NPI #: 1417986779 CA License #: G85165 |       |
| Primary Care Provider 主診醫生      | No 不是                                                                                                                                                      | New Patients 接受新病人                     | Yes 是 |
| Address 地址                      | 450 Sutter Street #1019<br>San Francisco, CA 94108<br>Phone 電話 (415) 765-0413<br>Email 電子郵件 cmillion@crhcenter.com                                         |                                        |       |
| Medical Group(s):               | CCHP, Jade Health Care                                                                                                                                     |                                        |       |
| Specialty 專科                    | Colon & Rectal Surgery 結直腸外科 Board Eligible<br>General Surgery 普通外科                                                                                        |                                        |       |
| Other Languages Spoken 語言       | Cantonese 粵語, Mandarin 國語, Spanish Español                                                                                                                 |                                        |       |
| Education 醫科學院                  | University of Louisville                                                                                                                                   |                                        |       |
| Hospital Affiliations 醫院聯網      | Chinese Hospital, St. Francis Memorial Hospital                                                                                                            |                                        |       |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Critical Care Medicine 重症監護科 |                                                    |                                                |                 |
|------------------------------|----------------------------------------------------|------------------------------------------------|-----------------|
| Li, Ho-Yin, MD 李浩然           |                                                    | NPI #: 1265515290 CA License #: C50572         |                 |
| Primary Care Provider 主診醫生   | No 不是                                              | New Patients 接受新病人                             | Yes 是           |
| Address 地址                   | 355 Cesar Chavez Street<br>San Francisco, CA 94110 | 1623 Noriega Street<br>San Francisco, CA 94122 |                 |
| Phone 電話                     | (209) 956-7725                                     | (415) 525-6022                                 |                 |
| Email 電子郵件                   | tforshey@sierrahealth.net                          | tforshey@sierrahealth.net                      |                 |
| Medical Group(s):            | CCHP, Jade Health Care                             |                                                |                 |
| Specialty 專科                 | Critical Care Medicine 重症監護科<br>Anesthesiology 麻醉科 |                                                | Board Certified |
| Other Languages Spoken 語言    | Cantonese 粵語                                       |                                                |                 |
| Education 醫科學院               | Queen's University of Belfast, UK                  |                                                |                 |
| Hospital Affiliations 醫院聯網   | Chinese Hospital                                   |                                                |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

## Dental 牙科

| Kir, Chun-Pang, DDS 賈振鵬    |                                                | NPI #:1699823104   |  | CA License #: 32335 |  |
|----------------------------|------------------------------------------------|--------------------|--|---------------------|--|
| Primary Care Provider 主診醫生 | No 不是                                          | New Patients 接受新病人 |  | Yes 是               |  |
| Address 地址                 | 814 Broadway Street<br>San Francisco, CA 94133 |                    |  |                     |  |
| Phone 電話                   | 415-392-0788                                   |                    |  |                     |  |
| Email 電子郵件                 |                                                |                    |  |                     |  |
| Medical Group(s):          | Jade Health Care                               |                    |  |                     |  |
| Specialty 專科               | Dental 牙科                                      |                    |  | Board Eligible      |  |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                      |                    |  |                     |  |
| Education 醫科學院             | University of Sydney, Australia                |                    |  |                     |  |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                               |                    |  |                     |  |
| Kir, Ryan, DDS             |                                                | NPI #:1457528382   |  | CA License #: 56212 |  |
| Primary Care Provider 主診醫生 | No 不是                                          | New Patients 接受新病人 |  | Yes 是               |  |
| Address 地址                 | 814 Broadway Street<br>San Francisco, CA 94133 |                    |  |                     |  |
| Phone 電話                   | 415-392-0788                                   |                    |  |                     |  |
| Email 電子郵件                 |                                                |                    |  |                     |  |
| Medical Group(s):          | Jade Health Care                               |                    |  |                     |  |
| Specialty 專科               | Dental 牙科                                      |                    |  | Board Eligible      |  |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                      |                    |  |                     |  |
| Education 醫科學院             | University of the Pacific                      |                    |  |                     |  |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                               |                    |  |                     |  |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

## Dermatology 皮膚科

| Ng, Judy, MD 伍穎喬           |                                                                                                 | NPI #:1720059579   |  | CA License #: A78745 |                 |
|----------------------------|-------------------------------------------------------------------------------------------------|--------------------|--|----------------------|-----------------|
| Primary Care Provider 主診醫生 | No 不是                                                                                           | New Patients 接受新病人 |  | Yes 是                |                 |
| Address 地址                 | 450 Sutter Street #1306<br>San Francisco, CA 94108                                              |                    |  |                      |                 |
| Phone 電話                   | (415) 781-4083                                                                                  |                    |  |                      |                 |
| Email 電子郵件                 |                                                                                                 |                    |  |                      |                 |
| Medical Group(s):          | Jade Health Care                                                                                |                    |  |                      |                 |
| Specialty 專科               | Dermatology 皮膚科                                                                                 |                    |  |                      | Board Certified |
| Other Languages Spoken 語言  | Tagalog, Spanish Español                                                                        |                    |  |                      |                 |
| Education 醫科學院             | University of California, San Francisco                                                         |                    |  |                      |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                                                                                |                    |  |                      |                 |
| Tuffanelli, Lucia, MD      |                                                                                                 | NPI #:1760474894   |  | CA License #: G53460 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                                           | New Patients 接受新病人 |  | Yes 是                |                 |
| Address 地址                 | 450 Sutter Street #1306<br>San Francisco, CA 94108                                              |                    |  |                      |                 |
| Phone 電話                   | (415) 781-4083                                                                                  |                    |  |                      |                 |
| Email 電子郵件                 | Ltuffanell1i@gmail.com                                                                          |                    |  |                      |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                                          |                    |  |                      |                 |
| Specialty 專科               | Dermatology 皮膚科                                                                                 |                    |  |                      | Board Certified |
| Other Languages Spoken 語言  | Tagalog, Spanish Español, Cantonese 粵語, Mandarin 國語                                             |                    |  |                      |                 |
| Education 醫科學院             | Medical College of Wisconsin                                                                    |                    |  |                      |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital, St. Mary's Medical Center, St. Francis Memorial Hospital, UCSF Medical Center |                    |  |                      |                 |
| Tuffanelli, Lucia, MD      |                                                                                                 | NPI #:1760474894   |  | CA License #: G53460 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                                           | New Patients 接受新病人 |  | No 不是                |                 |
| Address 地址                 | 450 Sutter Street #1306<br>San Francisco, CA 94108                                              |                    |  |                      |                 |
| Phone 電話                   | (415) 781-4083                                                                                  |                    |  |                      |                 |
| Email 電子郵件                 | Ltuffanell1i@gmail.com                                                                          |                    |  |                      |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                                          |                    |  |                      |                 |
| Specialty 專科               | Dermatology 皮膚科                                                                                 |                    |  |                      | Board Certified |
| Other Languages Spoken 語言  | Tagalog, Spanish Español, Cantonese 粵語, Mandarin 國語                                             |                    |  |                      |                 |
| Education 醫科學院             | Medical College of Wisconsin                                                                    |                    |  |                      |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital, St. Mary's Medical Center, St. Francis Memorial Hospital, UCSF Medical Center |                    |  |                      |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Diagnostic Radiology 放射科 - 診斷 |                                                   |                                         |                 |
|-------------------------------|---------------------------------------------------|-----------------------------------------|-----------------|
| <b>Eng, Roger, MD 吳子銘</b>     |                                                   | NPI #: 1871607291 CA License #: G75471  |                 |
| Primary Care Provider 主診醫生    | No 不是                                             | New Patients 接受新病人                      | Yes 是           |
| Address 地址                    | 845 Jackson Street B1*<br>San Francisco, CA 94133 |                                         |                 |
| Phone 電話                      | (415) 677-2320                                    |                                         |                 |
| Email 電子郵件                    | reng@goldengateradiology.com                      |                                         |                 |
| Medical Group(s):             | CCHP, Jade Health Care                            |                                         |                 |
| Specialty 專科                  | Diagnostic Radiology 放射科 - 診斷                     |                                         | Board Certified |
| Other Languages Spoken 語言     | Cantonese 粵語, Mandarin 國語                         |                                         |                 |
| Education 醫科學院                | George Washington University                      |                                         |                 |
| Hospital Affiliations 醫院聯網    | Chinese Hospital                                  |                                         |                 |
| <b>Wang, Eric, MD 王俊杰</b>     |                                                   | NPI #: 1518078120 CA License #: A101171 |                 |
| Primary Care Provider 主診醫生    | No 不是                                             | New Patients 接受新病人                      | Yes 是           |
| Address 地址                    | 845 Jackson Street B1<br>San Francisco, CA 94133  |                                         |                 |
| Phone 電話                      | (415) 677-2320                                    |                                         |                 |
| Email 電子郵件                    | ewangmd@gmail.com                                 |                                         |                 |
| Medical Group(s):             | CCHP, Jade Health Care                            |                                         |                 |
| Specialty 專科                  | Diagnostic Radiology 放射科 - 診斷                     |                                         | Board Certified |
| Other Languages Spoken 語言     | Cantonese 粵語, Mandarin 國語                         |                                         |                 |
| Education 醫科學院                | University of California, Los Angeles             |                                         |                 |
| Hospital Affiliations 醫院聯網    | Chinese Hospital                                  |                                         |                 |

## CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Dietitian                  |                                                        |                                         |                |
|----------------------------|--------------------------------------------------------|-----------------------------------------|----------------|
| Tsui, Karen, RD            |                                                        | NPI #: 1174964498 CA License #: 1041778 |                |
| Primary Care Provider 主診醫生 | No 不是                                                  | New Patients 接受新病人                      | Yes 是          |
| Address 地址                 | 845 Jackson Street Floor B1<br>San Francisco, CA 94133 |                                         |                |
| Phone 電話                   | (415) 677-2370                                         |                                         |                |
| Email 電子郵件                 |                                                        |                                         |                |
| Medical Group(s):          | CCHP, Jade Health Care                                 |                                         |                |
| Specialty 專科               | Dietitian                                              |                                         | Board Eligible |
| Other Languages Spoken 語言  |                                                        |                                         |                |
| Education 醫科學院             | Loma Linda University                                  |                                         |                |
| Hospital Affiliations 醫院聯網 |                                                        |                                         |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Endocrinology 內分泌科              |                                                      |                                         |                 |
|---------------------------------|------------------------------------------------------|-----------------------------------------|-----------------|
| <b>Lau, Helen, MD</b>           |                                                      | NPI #: 1235452871 CA License #: A106495 |                 |
| Primary Care Provider 主診醫生      | No 不是                                                | New Patients 接受新病人                      | Yes 是           |
| Address 地址                      | 1580 Valencia Street #504<br>San Francisco, CA 94110 |                                         |                 |
| Phone 電話                        | 415-695-7661                                         |                                         |                 |
| Email 電子郵件                      | hwylau@gmail.com                                     |                                         |                 |
| Medical Group(s):               | CCHP                                                 |                                         |                 |
| Specialty 專科                    | Endocrinology 內分泌科                                   |                                         | Board Eligible  |
| Other Languages Spoken 語言       | Spanish Español, Tagalog                             |                                         |                 |
| Education 醫科學院                  | University of California, Davis School of Medicine   |                                         |                 |
| Hospital Affiliations 醫院聯網      | Chinese Hospital, CPMC - St. Luke's Campus           |                                         |                 |
| <b>Tuan, Cheng-Yang, MD 段正揚</b> |                                                      | NPI #: 1891746129 CA License #: A67915  |                 |
| Primary Care Provider 主診醫生      | No 不是                                                | New Patients 接受新病人                      | Yes 是           |
| Address 地址                      | 1580 Valencia Street #504<br>San Francisco, CA 94110 |                                         |                 |
| Phone 電話                        | (415) 695-7661                                       |                                         |                 |
| Email 電子郵件                      |                                                      |                                         |                 |
| Medical Group(s):               | CCHP                                                 |                                         |                 |
| Specialty 專科                    | Endocrinology 內分泌科                                   |                                         | Board Eligible  |
| Other Languages Spoken 語言       | Spanish Español, Tagalog                             |                                         |                 |
| Education 醫科學院                  | New York University                                  |                                         |                 |
| Hospital Affiliations 醫院聯網      | Chinese Hospital, CPMC - St. Luke's Campus           |                                         |                 |
| <b>Xu, Chengyu, MD</b>          |                                                      | NPI #: 1669600086 CA License #: A121215 |                 |
| Primary Care Provider 主診醫生      | Yes 是                                                | New Patients 接受新病人                      | No 不是           |
| Address 地址                      | 845 Jackson Street B1*<br>San Francisco, CA 94133    |                                         |                 |
| Phone 電話                        | (415) 677-2370                                       |                                         |                 |
| Email 電子郵件                      |                                                      |                                         |                 |
| Medical Group(s):               | CCHP, Jade Health Care                               |                                         |                 |
| Specialty 專科                    | Endocrinology 內分泌科                                   |                                         | Board Certified |
| Other Languages Spoken 語言       | Cantonese 粵語, Mandarin 國語                            |                                         |                 |
| Education 醫科學院                  | Sun Yat-Sen University of Medical Sciences           |                                         |                 |
| Hospital Affiliations 醫院聯網      | Chinese Hospital                                     |                                         |                 |

## CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Facial Plastic & Reconstructive Surgery 面部整形及重建外科 |                                                                                         |                                         |       |
|---------------------------------------------------|-----------------------------------------------------------------------------------------|-----------------------------------------|-------|
| Wong, Denise, MD                                  |                                                                                         | NPI #: 1215191846 CA License #: A117618 |       |
| Primary Care Provider 主診醫生                        | No 不是                                                                                   | New Patients 接受新病人                      | Yes 是 |
| Address 地址                                        | 595 Buckingham Way #324<br>San Francisco, CA 94132                                      |                                         |       |
| Phone 電話                                          | (415) 665-1877                                                                          |                                         |       |
| Email 電子郵件                                        |                                                                                         |                                         |       |
| Medical Group(s):                                 | Jade Health Care                                                                        |                                         |       |
| Specialty 專科                                      | Facial Plastic & Reconstructive Surgery 面部整形及重建外科 Board Eligible<br>Otolaryngology 耳鼻喉科 |                                         |       |
| Other Languages Spoken 語言                         |                                                                                         |                                         |       |
| Education 醫科學院                                    | University of Minnesota                                                                 |                                         |       |
| Hospital Affiliations 醫院聯網                        |                                                                                         |                                         |       |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Gastroenterology 腸胃科          |                                                                       |                                                      |                 |
|-------------------------------|-----------------------------------------------------------------------|------------------------------------------------------|-----------------|
| <b>Bonacini, Maurizio, MD</b> |                                                                       | NPI #: 1114944972 CA License #: A43170               |                 |
| Primary Care Provider 主診醫生    | No 不是                                                                 | New Patients 接受新病人                                   | Yes 是           |
| Address 地址                    | 1580 Valencia Street #208<br>San Francisco, CA 94110                  |                                                      |                 |
| Phone 電話                      | (415) 641-5430                                                        |                                                      |                 |
| Email 電子郵件                    |                                                                       |                                                      |                 |
| Medical Group(s):             | Jade Health Care                                                      |                                                      |                 |
| Specialty 專科                  | Gastroenterology 腸胃科                                                  |                                                      | Board Certified |
| Other Languages Spoken 語言     |                                                                       |                                                      |                 |
| Education 醫科學院                | Katholieke Universiteit Leuven Faculteit Geneeskunde, Leuven, BELGIUM |                                                      |                 |
| Hospital Affiliations 醫院聯網    | CPMC - St. Luke's Campus                                              |                                                      |                 |
| <b>Shen, Dennis, MD 沈大年</b>   |                                                                       | NPI #: 1316049190 CA License #: A40994               |                 |
| Primary Care Provider 主診醫生    | Yes 是                                                                 | New Patients 接受新病人                                   | Yes 是           |
| Address 地址                    | 909 Hyde Street #210<br>San Francisco, CA 94109                       | 929 Clay Street Suite 301<br>San Francisco, CA 94108 |                 |
| Phone 電話                      | (415) 292-3313                                                        | (415) 788-6860                                       |                 |
| Email 電子郵件                    | dennisshen@aol.com                                                    | dennisshen@aol.com                                   |                 |
| Medical Group(s):             | Jade Health Care                                                      |                                                      |                 |
| Specialty 專科                  | Gastroenterology 腸胃科                                                  |                                                      | Board Certified |
| Other Languages Spoken 語言     | Cantonese 粵語, Mandarin 國語                                             |                                                      |                 |
| Education 醫科學院                | Hong Kong University, China                                           |                                                      |                 |
| Hospital Affiliations 醫院聯網    | Chinese Hospital, St. Francis Memorial Hospital                       |                                                      |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| General Surgery 普通外科            |                                                                                |                                             |                 |
|---------------------------------|--------------------------------------------------------------------------------|---------------------------------------------|-----------------|
| <b>Aquino, Melinda, MD</b>      |                                                                                | NPI #: 1033190970 CA License #: A94731      |                 |
| Primary Care Provider 主診醫生      | No 不是                                                                          | New Patients 接受新病人                          | Yes 是           |
| Address 地址                      | 1 Shrader Street #400*<br>San Francisco, CA 94117                              |                                             |                 |
| Phone 電話                        | (415) 752-1122                                                                 |                                             |                 |
| Email 電子郵件                      |                                                                                |                                             |                 |
| Medical Group(s):               | CCHP, Jade Health Care                                                         |                                             |                 |
| Specialty 專科                    | General Surgery 普通外科<br>Vascular Surgery 血管系外科                                 |                                             | Board Eligible  |
| Other Languages Spoken 語言       | Spanish Español, English                                                       |                                             |                 |
| Education 醫科學院                  | Indiana University School of Medicine                                          |                                             |                 |
| Hospital Affiliations 醫院聯網      | Seton Medical Center, St. Mary's Medical Center, St. Francis Memorial Hospital |                                             |                 |
| <b>Leichtling, Jonathan, MD</b> |                                                                                | NPI #: 1811094915 CA License #: G31362      |                 |
| Primary Care Provider 主診醫生      | No 不是                                                                          | New Patients 接受新病人                          | Yes 是           |
| Address 地址                      | 1580 Valencia Street Suite 809<br>San Francisco, CA 94110                      | 19 Wilmot Street<br>San Francisco, CA 94115 |                 |
| Phone 電話                        | (415) 285-4666                                                                 | (415) 285-4666                              |                 |
| Email 電子郵件                      |                                                                                |                                             |                 |
| Medical Group(s):               | Jade Health Care                                                               |                                             |                 |
| Specialty 專科                    | General Surgery 普通外科<br>Colon & Rectal Surgery 結直腸外科                           |                                             | Board Certified |
| Other Languages Spoken 語言       | Spanish Español                                                                |                                             |                 |
| Education 醫科學院                  | Columbia University College of Physicians and Surgeons                         |                                             |                 |
| Hospital Affiliations 醫院聯網      | CPMC - St. Luke's Campus, St. Francis Memorial Hospital, CPMC                  |                                             |                 |
| <b>Leichtling, Jonathan, MD</b> |                                                                                | NPI #: 1811094915 CA License #: G31362      |                 |
| Primary Care Provider 主診醫生      | No 不是                                                                          | New Patients 接受新病人                          | Yes 是           |
| Address 地址                      | 1580 Valencia Street Suite 809<br>San Francisco, CA 94110                      | 19 Wilmot Street<br>San Francisco, CA 94115 |                 |
| Phone 電話                        | (415) 285-4666                                                                 | (415) 285-4666                              |                 |
| Email 電子郵件                      |                                                                                |                                             |                 |
| Medical Group(s):               | Jade Health Care                                                               |                                             |                 |
| Specialty 專科                    | General Surgery 普通外科<br>Colon & Rectal Surgery 結直腸外科                           |                                             | Board Certified |
| Other Languages Spoken 語言       | Spanish Español                                                                |                                             |                 |
| Education 醫科學院                  | Columbia University College of Physicians and Surgeons                         |                                             |                 |
| Hospital Affiliations 醫院聯網      | CPMC - St. Luke's Campus, St. Francis Memorial Hospital, CPMC                  |                                             |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| General Surgery 普通外科        |                                                      |                                        |                 |
|-----------------------------|------------------------------------------------------|----------------------------------------|-----------------|
| <b>Lewis, Pamela, MD</b>    |                                                      | NPI #: 1992804462 CA License #: G51040 |                 |
| Primary Care Provider 主診醫生  | No 不是                                                | New Patients 接受新病人                     | Yes 是           |
| Address 地址                  | 1 Shrader Street #400<br>San Francisco, CA 94117     |                                        |                 |
| Phone 電話                    | (415) 668-8060                                       |                                        |                 |
| Email 電子郵件                  | plewisma@gmail.com                                   |                                        |                 |
| Medical Group(s):           | CCHP, Jade Health Care                               |                                        |                 |
| Specialty 專科                | General Surgery 普通外科                                 |                                        | Board Certified |
| Other Languages Spoken 語言   |                                                      |                                        |                 |
| Education 醫科學院              | Meharry Medical College School of Medicine           |                                        |                 |
| Hospital Affiliations 醫院聯網  | St. Mary's Medical Center                            |                                        |                 |
| <b>Million, Carolyn, MD</b> |                                                      | NPI #: 1417986779 CA License #: G85165 |                 |
| Primary Care Provider 主診醫生  | No 不是                                                | New Patients 接受新病人                     | Yes 是           |
| Address 地址                  | 450 Sutter Street #1019<br>San Francisco, CA 94108   |                                        |                 |
| Phone 電話                    | (415) 765-0413                                       |                                        |                 |
| Email 電子郵件                  | cmillion@crhcenter.com                               |                                        |                 |
| Medical Group(s):           | CCHP, Jade Health Care                               |                                        |                 |
| Specialty 專科                | General Surgery 普通外科<br>Colon & Rectal Surgery 結直腸外科 |                                        | Board Certified |
| Other Languages Spoken 語言   | Cantonese 粵語, Mandarin 國語, Spanish Español           |                                        |                 |
| Education 醫科學院              | University of Louisville                             |                                        |                 |
| Hospital Affiliations 醫院聯網  | Chinese Hospital, St. Francis Memorial Hospital      |                                        |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Gynecologic Oncology 婦女腫瘤科 |                                                           |                                        |                |
|----------------------------|-----------------------------------------------------------|----------------------------------------|----------------|
| Shen, Jenta, MD 沈仁達        |                                                           | NPI #: 1881692002 CA License #: A30257 |                |
| Primary Care Provider 主診醫生 | No 不是                                                     | New Patients 接受新病人                     | Yes 是          |
| Address 地址                 | 1 Shrader Street Suite 400<br>San Francisco, CA 94117     |                                        |                |
| Phone 電話                   | (415) 668-0900                                            |                                        |                |
| Email 電子郵件                 | jentashenmd@aol.com                                       |                                        |                |
| Medical Group(s):          | CCHP, Jade Health Care                                    |                                        |                |
| Specialty 專科               | Gynecologic Oncology 婦女腫瘤科<br>Obstetrics & Gynecology 婦產科 |                                        | Board Eligible |
| Other Languages Spoken 語言  | Cantonese 粵語                                              |                                        |                |
| Education 醫科學院             | National Taiwan University, Taiwan                        |                                        |                |
| Hospital Affiliations 醫院聯網 | Chinese Hospital, St. Mary's Medical Center               |                                        |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Hand Surgery 手外科           |                                                                         |                                         |                                                                             |
|----------------------------|-------------------------------------------------------------------------|-----------------------------------------|-----------------------------------------------------------------------------|
| Gordon, Joshua, MD         |                                                                         | NPI #: 1053604108 CA License #: A156227 |                                                                             |
| Primary Care Provider 主診醫生 | No 不是                                                                   | New Patients 接受新病人                      | Yes 是                                                                       |
| Address 地址                 | 2299 Post Street Suite 103<br>San Francisco, CA 94115<br>(415) 923-0992 |                                         | 1580 Valencia Street Suite 703<br>San Francisco, CA 94110<br>(415) 923-0992 |
| Phone 電話                   |                                                                         |                                         |                                                                             |
| Email 電子郵件                 |                                                                         |                                         |                                                                             |
| Medical Group(s):          | CCHP, Jade Health Care                                                  |                                         |                                                                             |
| Specialty 專科               | Hand Surgery 手外科<br>Orthopedic Surgery 骨科                               |                                         | Board Eligible                                                              |
| Other Languages Spoken 語言  | Spanish Español                                                         |                                         |                                                                             |
| Education 醫科學院             | University of California, Los Angeles David Geffen School of Medicine   |                                         |                                                                             |
| Hospital Affiliations 醫院聯網 |                                                                         |                                         |                                                                             |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Hand Surgery (Plastic) 手外科 (整形) |                                                                          |                                        |                                                   |
|---------------------------------|--------------------------------------------------------------------------|----------------------------------------|---------------------------------------------------|
| Lee, Charles, MD                |                                                                          | NPI #: 1487635298 CA License #: A82918 |                                                   |
| Primary Care Provider 主診醫生      | No 不是                                                                    | New Patients 接受新病人                     | Yes 是                                             |
| Address 地址                      | 2250 Hayes Street #508<br>San Francisco, CA 94117                        |                                        | 2250 Hayes Street #508<br>San Francisco, CA 94117 |
| Phone 電話                        | (415) 933-8330                                                           |                                        | (415) 933-8330                                    |
| Email 電子郵件                      | Lplasticsurgery@gmail.com                                                |                                        | Lplasticsurgery@gmail.com                         |
| Medical Group(s):               | Jade Health Care                                                         |                                        |                                                   |
| Specialty 專科                    | Hand Surgery (Plastic) 手外科 (整形)<br>Plastic & Reconstructive Surgery 整容外科 |                                        | Board Eligible                                    |
| Other Languages Spoken 語言       |                                                                          |                                        |                                                   |
| Education 醫科學院                  | Washington University in St. Louis School Of Medicine                    |                                        |                                                   |
| Hospital Affiliations 醫院聯網      | St. Mary's Medical Center                                                |                                        |                                                   |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Medical Oncology 腫瘤科       |                                                          |                                        |                 |
|----------------------------|----------------------------------------------------------|----------------------------------------|-----------------|
| Wang, Wei, MD              |                                                          | NPI #: 1861482853 CA License #: A95030 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                    | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 2100 Webster Street Suite 326<br>San Francisco, CA 94115 |                                        |                 |
| Phone 電話                   | (415) 885-8600                                           |                                        |                 |
| Email 電子郵件                 | wwang@sfoncologyassoc.com                                |                                        |                 |
| Medical Group(s):          | Jade Health Care                                         |                                        |                 |
| Specialty 專科               | Medical Oncology 腫瘤科                                     |                                        | Board Certified |
| Other Languages Spoken 語言  | Tagalog, Spanish Español, Mandarin 國語, Chinese           |                                        |                 |
| Education 醫科學院             | University of Virginia School of Medicine Health System  |                                        |                 |
| Hospital Affiliations 醫院聯網 |                                                          |                                        |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Nephrology 腎科                |                                                                                 |                                        |                 |
|------------------------------|---------------------------------------------------------------------------------|----------------------------------------|-----------------|
| <b>Chang, Warren, MD 張華倫</b> |                                                                                 | NPI #: 1083674550 CA License #: A69500 |                 |
| Primary Care Provider 主診醫生   | No 不是                                                                           | New Patients 接受新病人                     | No 不是           |
| Address 地址                   | 2250 Hayes Street #206*<br>San Francisco, CA 94117                              |                                        |                 |
| Phone 電話                     | (650) 755-4490                                                                  |                                        |                 |
| Email 電子郵件                   |                                                                                 |                                        |                 |
| Medical Group(s):            | CCHP                                                                            |                                        |                 |
| Specialty 專科                 | Nephrology 腎科                                                                   |                                        | Board Certified |
| Other Languages Spoken 語言    | Spanish Español, Tagalog, Ukranian, Russian Русский                             |                                        |                 |
| Education 醫科學院               | University of California, Davis                                                 |                                        |                 |
| Hospital Affiliations 醫院聯網   | Seton Medical Center, St. Mary's Medical Center, Mills-Peninsula Medical Center |                                        |                 |
| <b>Cruz, Christian, MD</b>   |                                                                                 | NPI #: 1023182227 CA License #: A96754 |                 |
| Primary Care Provider 主診醫生   | No 不是                                                                           | New Patients 接受新病人                     | No 不是           |
| Address 地址                   | 2250 Hayes Street Suite 206*<br>San Francisco, CA 94117                         |                                        |                 |
| Phone 電話                     | (650) 755-4490                                                                  |                                        |                 |
| Email 電子郵件                   |                                                                                 |                                        |                 |
| Medical Group(s):            | CCHP, Jade Health Care                                                          |                                        |                 |
| Specialty 專科                 | Nephrology 腎科                                                                   |                                        | Board Certified |
| Other Languages Spoken 語言    | Tagalog, Spanish Español, Russian Русский                                       |                                        |                 |
| Education 醫科學院               | Mount Sinai School of Medicine                                                  |                                        |                 |
| Hospital Affiliations 醫院聯網   | Seton Medical Center, St. Mary's Medical Center, Mills-Peninsula Medical Center |                                        |                 |
| <b>Kao, Albert, MD</b>       |                                                                                 | NPI #: 1225099286 CA License #: A75956 |                 |
| Primary Care Provider 主診醫生   | No 不是                                                                           | New Patients 接受新病人                     | No 不是           |
| Address 地址                   | 2250 Hayes Street #206*<br>San Francisco, CA 94117                              |                                        |                 |
| Phone 電話                     | (650) 755-4490                                                                  |                                        |                 |
| Email 電子郵件                   |                                                                                 |                                        |                 |
| Medical Group(s):            | CCHP                                                                            |                                        |                 |
| Specialty 專科                 | Nephrology 腎科                                                                   |                                        | Board Certified |
| Other Languages Spoken 語言    | Spanish Español, Tagalog, Ukrainian, Russian Русский                            |                                        |                 |
| Education 醫科學院               | Yale University School of Medicine                                              |                                        |                 |
| Hospital Affiliations 醫院聯網   | Seton Medical Center, Mills-Peninsula Medical Center, St. Mary's Medical Center |                                        |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Nephrology 腎科                |                                                        |                                          |                                                       |
|------------------------------|--------------------------------------------------------|------------------------------------------|-------------------------------------------------------|
| <b>Tseng, Robert, MD 曾瑞年</b> |                                                        | NPI #: 1053371559 CA License #: A66496   |                                                       |
| Primary Care Provider 主診醫生   | No 不是                                                  | New Patients 接受新病人                       | No 不是                                                 |
| Address 地址                   | 2250 Hayes Street Suite 206<br>San Francisco, CA 94117 |                                          |                                                       |
| Phone 電話                     | (650) 755-4490                                         |                                          |                                                       |
| Email 電子郵件                   |                                                        |                                          |                                                       |
| Medical Group(s):            | CCHP, Jade Health Care                                 |                                          |                                                       |
| Specialty 專科                 | Nephrology 腎科                                          |                                          | Board Certified                                       |
| Other Languages Spoken 語言    | Spanish Español, Tagalog, Ukrainian, Russian Русский   |                                          |                                                       |
| Education 醫科學院               | Hahnemann University                                   |                                          |                                                       |
| Hospital Affiliations 醫院聯網   | St. Mary's Medical Center, Seton Medical Center        |                                          |                                                       |
| <b>Ye, Maian, DO 葉脈安</b>     |                                                        | NPI #: 1912198110 CA License #: 20A10714 |                                                       |
| Primary Care Provider 主診醫生   | Yes 是                                                  | New Patients 接受新病人                       | Yes 是                                                 |
| Address 地址                   | 929 Clay Street Suite 302<br>San Francisco, CA 94108   |                                          | 1838 Noriega Street Unit A<br>San Francisco, CA 94122 |
| Phone 電話                     | (415) 361-5086                                         |                                          | (415) 361-5086                                        |
| Email 電子郵件                   |                                                        |                                          |                                                       |
| Medical Group(s):            | CCHP, Jade Health Care                                 |                                          |                                                       |
| Specialty 專科                 | Nephrology 腎科                                          |                                          | Board Eligible                                        |
| Other Languages Spoken 語言    | Cantonese 粵語, Mandarin 國語, Toishanese                  |                                          |                                                       |
| Education 醫科學院               | New York College of Osteopathic Medicine               |                                          |                                                       |
| Hospital Affiliations 醫院聯網   | Chinese Hospital                                       |                                          |                                                       |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Neurological Surgery 神經外科  |                                                   |                                        |                |
|----------------------------|---------------------------------------------------|----------------------------------------|----------------|
| Andrews, Brian, MD         |                                                   | NPI #: 1710935887 CA License #: G48858 |                |
| Primary Care Provider 主診醫生 | No 不是                                             | New Patients 接受新病人                     | Yes 是          |
| Address 地址                 | 45 Castro Street #421*<br>San Francisco, CA 94114 |                                        |                |
| Phone 電話                   | (415) 814-3429                                    |                                        |                |
| Email 電子郵件                 | km@pacificneurosurgery.com                        |                                        |                |
| Medical Group(s):          | CCHP                                              |                                        |                |
| Specialty 專科               | Neurological Surgery 神經外科                         |                                        | Board Eligible |
| Other Languages Spoken 語言  |                                                   |                                        |                |
| Education 醫科學院             | University of California, San Francisco           |                                        |                |
| Hospital Affiliations 醫院聯網 |                                                   |                                        |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Neurology 腦科               |                                                                            |                                         |                 |
|----------------------------|----------------------------------------------------------------------------|-----------------------------------------|-----------------|
| <b>Estrin, William, MD</b> |                                                                            | NPI #: 1952482390 CA License #: G53425  |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                      | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 450 Sutter Street #1324<br>San Francisco, CA 94108                         |                                         |                 |
| Phone 電話                   | 415-268-0054                                                               |                                         |                 |
| Email 電子郵件                 | drbillestrin@hotmail.com                                                   |                                         |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                     |                                         |                 |
| Specialty 專科               | Neurology 腦科                                                               |                                         | Board Certified |
| Other Languages Spoken 語言  |                                                                            |                                         |                 |
| Education 醫科學院             | University of Chicago                                                      |                                         |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital, St. Mary's Medical Center, St. Francis Memorial Hospital |                                         |                 |
| <b>Meng, Joy, MD</b>       |                                                                            | NPI #: 1174786123 CA License #: A111196 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                      | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 950 Stockton Street Suite 368<br>San Francisco, CA 94108                   |                                         |                 |
| Phone 電話                   | (415) 666-2536                                                             |                                         |                 |
| Email 電子郵件                 | office@sf-neurology.com                                                    |                                         |                 |
| Medical Group(s):          | Jade Health Care                                                           |                                         |                 |
| Specialty 專科               | Neurology 腦科<br>Sleep Medicine 睡眠研究醫學專家                                    |                                         | Board Certified |
| Other Languages Spoken 語言  | Mandarin 國語, Cantonese 粵語                                                  |                                         |                 |
| Education 醫科學院             | Tianjin Medical University, China                                          |                                         |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital, St. Francis Memorial Hospital, St. Mary's Medical Center |                                         |                 |
| <b>Tran, Thanh, MD</b>     |                                                                            | NPI #: 1134264831 CA License #: A52468  |                 |
| Primary Care Provider 主診醫生 | Yes 是                                                                      | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 439 O'Farrell Street<br>San Francisco, CA 94102                            |                                         |                 |
| Phone 電話                   | (415) 441-4882                                                             |                                         |                 |
| Email 電子郵件                 |                                                                            |                                         |                 |
| Medical Group(s):          | Jade Health Care                                                           |                                         |                 |
| Specialty 專科               | Neurology 腦科                                                               |                                         | Board Eligible  |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語, Cambodian ភាសាខ្មែរ, Vietnamese 越南語             |                                         |                 |
| Education 醫科學院             | University of Saigon, Vietnam                                              |                                         |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                                                           |                                         |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Nurse Practitioner 執業護理師            |                                                           |                                          |                |
|-------------------------------------|-----------------------------------------------------------|------------------------------------------|----------------|
| <b>Lareau-Meredith, Bennett, NP</b> |                                                           | NPI #: 1598001661 CA License #: 95007897 |                |
| Primary Care Provider 主診醫生          | No 不是                                                     | New Patients 接受新病人                       | Yes 是          |
| Address 地址                          | 1735 Mission Street<br>San Francisco, CA 94103            |                                          |                |
| Phone 電話                            | (415) 565-7667                                            |                                          |                |
| Email 電子郵件                          |                                                           |                                          |                |
| Medical Group(s):                   | CCHP                                                      |                                          |                |
| Specialty 專科                        | Nurse Practitioner 執業護理師                                  |                                          | Board Eligible |
| Other Languages Spoken 語言           |                                                           |                                          |                |
| Education 醫科學院                      | MGH Institute of Health Professions                       |                                          |                |
| Hospital Affiliations 醫院聯網          |                                                           |                                          |                |
| <b>Li, Sareen, NP</b>               |                                                           | NPI #: 1174894067 CA License #: 95009682 |                |
| Primary Care Provider 主診醫生          | No 不是                                                     | New Patients 接受新病人                       | Yes 是          |
| Address 地址                          | 4020 Balboa Street<br>San Francisco, CA 94121             |                                          |                |
| Phone 電話                            | (415) 668-5998                                            |                                          |                |
| Email 電子郵件                          |                                                           |                                          |                |
| Medical Group(s):                   | CCHP                                                      |                                          |                |
| Specialty 專科                        | Nurse Practitioner 執業護理師                                  |                                          | Board Eligible |
| Other Languages Spoken 語言           | Cantonese 粵語                                              |                                          |                |
| Education 醫科學院                      | University of California, San Francisco School of Nursing |                                          |                |
| Hospital Affiliations 醫院聯網          |                                                           |                                          |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Obstetrics & Gynecology 婦產科 |                                                        |                                        |                |
|-----------------------------|--------------------------------------------------------|----------------------------------------|----------------|
| <b>Fan, Yuan-Da, MD 范淵達</b> |                                                        | NPI #: 1609941798 CA License #: A43417 |                |
| Primary Care Provider 主診醫生  | No 不是                                                  | New Patients 接受新病人                     | Yes 是          |
| Address 地址                  | 490 Post Street #1112<br>San Francisco, CA 94102       |                                        |                |
| Phone 電話                    | (415) 781-5300                                         |                                        |                |
| Email 電子郵件                  | yuandafanmd@gmail.com                                  |                                        |                |
| Medical Group(s):           | CCHP                                                   |                                        |                |
| Specialty 專科                | Obstetrics & Gynecology 婦產科                            |                                        | Board Eligible |
| Other Languages Spoken 語言   | Cantonese 粵語, Mandarin 國語, Spanish Español             |                                        |                |
| Education 醫科學院              | Louisiana State University                             |                                        |                |
| Hospital Affiliations 醫院聯網  | Chinese Hospital, St. Francis Memorial Hospital        |                                        |                |
| <b>Lee, Ding Ding, MD</b>   |                                                        | NPI #: 1053468058 CA License #: C53109 |                |
| Primary Care Provider 主診醫生  | No 不是                                                  | New Patients 接受新病人                     | Yes 是          |
| Address 地址                  | 3838 California Street #408<br>San Francisco, CA 94118 |                                        |                |
| Phone 電話                    | (415) 221-6668                                         |                                        |                |
| Email 電子郵件                  |                                                        |                                        |                |
| Medical Group(s):           | Jade Health Care                                       |                                        |                |
| Specialty 專科                | Obstetrics & Gynecology 婦產科                            |                                        | Board Eligible |
| Other Languages Spoken 語言   |                                                        |                                        |                |
| Education 醫科學院              | Tufts University School of Medicine                    |                                        |                |
| Hospital Affiliations 醫院聯網  | CPMC - Pacific Campus                                  |                                        |                |
| <b>Moon, Jin, MD 文真光</b>    |                                                        | NPI #: 1285723106 CA License #: C51275 |                |
| Primary Care Provider 主診醫生  | No 不是                                                  | New Patients 接受新病人                     | Yes 是          |
| Address 地址                  | 1 Shrader Street Suite 400<br>San Francisco, CA 94117  |                                        |                |
| Phone 電話                    | (415) 418-0716                                         |                                        |                |
| Email 電子郵件                  | jkmooon1942@gmail.com                                  |                                        |                |
| Medical Group(s):           | CCHP, Jade Health Care                                 |                                        |                |
| Specialty 專科                | Obstetrics & Gynecology 婦產科                            |                                        | Board Eligible |
| Other Languages Spoken 語言   | Korean 한국어                                             |                                        |                |
| Education 醫科學院              | Catholic Medical College                               |                                        |                |
| Hospital Affiliations 醫院聯網  | Chinese Hospital, St. Mary's Medical Center            |                                        |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Obstetrics & Gynecology 婦產科 |                                                           |                                        |                |
|-----------------------------|-----------------------------------------------------------|----------------------------------------|----------------|
| Shen, Jenta, MD 沈仁達         |                                                           | NPI #: 1881692002 CA License #: A30257 |                |
| Primary Care Provider 主診醫生  | No 不是                                                     | New Patients 接受新病人                     | Yes 是          |
| Address 地址                  | 1 Shrader Street Suite 400<br>San Francisco, CA 94117     |                                        |                |
| Phone 電話                    | (415) 668-0900                                            |                                        |                |
| Email 電子郵件                  | jentashenmd@aol.com                                       |                                        |                |
| Medical Group(s):           | CCHP, Jade Health Care                                    |                                        |                |
| Specialty 專科                | Obstetrics & Gynecology 婦產科<br>Gynecologic Oncology 婦女腫瘤科 |                                        | Board Eligible |
| Other Languages Spoken 語言   | Cantonese 粵語                                              |                                        |                |
| Education 醫科學院              | National Taiwan University, Taiwan                        |                                        |                |
| Hospital Affiliations 醫院聯網  | Chinese Hospital, St. Mary's Medical Center               |                                        |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

## Ophthalmology 眼科

| Agarwal, Anita, MD         |                                                                                             | NPI #:1508940628   |       | CA License #: C143103 |                 |
|----------------------------|---------------------------------------------------------------------------------------------|--------------------|-------|-----------------------|-----------------|
| Primary Care Provider 主診醫生 | No 不是                                                                                       | New Patients 接受新病人 | Yes 是 |                       |                 |
| Address 地址                 | 1445 Bush Street<br>San Francisco, CA 94109                                                 |                    |       |                       |                 |
| Phone 電話                   | (415) 972-4600                                                                              |                    |       |                       |                 |
| Email 電子郵件                 |                                                                                             |                    |       |                       |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                                      |                    |       |                       |                 |
| Specialty 專科               | Ophthalmology 眼科                                                                            |                    |       |                       | Board Certified |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語, Spanish Español, Tagalog                                         |                    |       |                       |                 |
| Education 醫科學院             | Mangalore University                                                                        |                    |       |                       |                 |
| Hospital Affiliations 醫院聯網 | St. Mary's Medical Center, CPMC - Pacific Campus                                            |                    |       |                       |                 |
| Calman, Andrew, MD         |                                                                                             | NPI #:1447322169   |       | CA License #: G69615  |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                                       | New Patients 接受新病人 | Yes 是 |                       |                 |
| Address 地址                 | 2480 Mission Street Suite 212*<br>San Francisco, CA 94110                                   |                    |       |                       |                 |
| Phone 電話                   | (415) 648-3600                                                                              |                    |       |                       |                 |
| Email 電子郵件                 |                                                                                             |                    |       |                       |                 |
| Medical Group(s):          | Jade Health Care                                                                            |                    |       |                       |                 |
| Specialty 專科               | Ophthalmology 眼科                                                                            |                    |       |                       | Board Certified |
| Other Languages Spoken 語言  | Spanish Español, Tagalog, French Français                                                   |                    |       |                       |                 |
| Education 醫科學院             | University of California, San Francisco                                                     |                    |       |                       |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital, CPMC - St. Luke's Campus, St. Mary's Medical Center, Seton Medical Center |                    |       |                       |                 |
| Fu, Arthur, MD             |                                                                                             | NPI #:1609844604   |       | CA License #: A76165  |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                                       | New Patients 接受新病人 | Yes 是 |                       |                 |
| Address 地址                 | 1445 Bush Street*<br>San Francisco, CA 94109                                                |                    |       |                       |                 |
| Phone 電話                   | (415) 972-4600                                                                              |                    |       |                       |                 |
| Email 電子郵件                 | wcr@westcoastretina.com                                                                     |                    |       |                       |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                                      |                    |       |                       |                 |
| Specialty 專科               | Ophthalmology 眼科                                                                            |                    |       |                       | Board Certified |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語, Spanish Español, Russian Русский, Tagalog,                       |                    |       |                       |                 |
| Education 醫科學院             | University of North Carolina School of Medicine                                             |                    |       |                       |                 |
| Hospital Affiliations 醫院聯網 | St. Mary's Medical Center, Mills-Peninsula Medical Center                                   |                    |       |                       |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

## Ophthalmology 眼科

| <b>Jumper, James, MD</b>   |                                                                        | NPI #: 1609844687 CA License #: A52949 |                 |
|----------------------------|------------------------------------------------------------------------|----------------------------------------|-----------------|
| Primary Care Provider 主診醫生 | No 不是                                                                  | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 1445 Bush Street<br>San Francisco, CA 94109                            |                                        |                 |
| Phone 電話                   | (415) 972-4600                                                         |                                        |                 |
| Email 電子郵件                 | wcr@westcoastretina.com                                                |                                        |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                 |                                        |                 |
| Specialty 專科               | Ophthalmology 眼科                                                       |                                        | Board Certified |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語, Spanish Español, Russian, Tagalog, Tagalog, |                                        |                 |
| Education 醫科學院             | University of Texas Southwestern Medical Center at Dallas              |                                        |                 |
| Hospital Affiliations 醫院聯網 | St. Mary's Medical Center                                              |                                        |                 |
| <b>Kwok, Shiu, MD 郭兆源</b>  |                                                                        | NPI #: 1457345613 CA License #: G43512 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                  | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 728 Pacific Avenue Suite 702<br>San Francisco, CA 94133                |                                        |                 |
| Phone 電話                   | (415) 788-0810                                                         |                                        |                 |
| Email 電子郵件                 | jwl.manager@gmail.com                                                  |                                        |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                 |                                        |                 |
| Specialty 專科               | Ophthalmology 眼科                                                       |                                        | Board Certified |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                                              |                                        |                 |
| Education 醫科學院             | Albert Einstein College of Medicine                                    |                                        |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                                                       |                                        |                 |
| <b>Li, Suzanne, MD</b>     |                                                                        | NPI #: 1174685770 CA License #: G42546 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                  | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 2100 Webster Street #212<br>San Francisco, CA 94115                    |                                        |                 |
| Phone 電話                   | (415) 923-3030                                                         |                                        |                 |
| Email 電子郵件                 | suzanneglimd@hotmail.com                                               |                                        |                 |
| Medical Group(s):          | CCHP                                                                   |                                        |                 |
| Specialty 專科               | Ophthalmology 眼科                                                       |                                        | Board Certified |
| Other Languages Spoken 語言  | Japanese 日本の                                                           |                                        |                 |
| Education 醫科學院             | Columbia University                                                    |                                        |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                                                       |                                        |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

## Ophthalmology 眼科

| Lin, Danny, MD 林宜宏         |                                                                                       | NPI #:1871595710   |       | CA License #: A72782 |                 |
|----------------------------|---------------------------------------------------------------------------------------|--------------------|-------|----------------------|-----------------|
| Primary Care Provider 主診醫生 | No 不是                                                                                 | New Patients 接受新病人 | Yes 是 |                      |                 |
| Address 地址                 | 2100 Webster Street #214<br>San Francisco, CA 94115                                   |                    |       |                      |                 |
| Phone 電話                   | (415) 923-3007                                                                        |                    |       |                      |                 |
| Email 電子郵件                 | dannylinmd@pacificeye.com                                                             |                    |       |                      |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                                |                    |       |                      |                 |
| Specialty 專科               | Ophthalmology 眼科                                                                      |                    |       |                      | Board Certified |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語, French Français, Russian Русский, Spanish Español, Tagalog |                    |       |                      |                 |
| Education 醫科學院             | Stanford University                                                                   |                    |       |                      |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                                                                      |                    |       |                      |                 |
| McDonald, Henry, MD        |                                                                                       | NPI #:1720056567   |       | CA License #: G45366 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                                 | New Patients 接受新病人 | Yes 是 |                      |                 |
| Address 地址                 | 1445 Bush Street*<br>San Francisco, CA 94109                                          |                    |       |                      |                 |
| Phone 電話                   | (415) 972-4600                                                                        |                    |       |                      |                 |
| Email 電子郵件                 | wcr@westcoastretina.com                                                               |                    |       |                      |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                                |                    |       |                      |                 |
| Specialty 專科               | Ophthalmology 眼科                                                                      |                    |       |                      | Board Eligible  |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語, Spanish Español, Russian Русский, Tagalog,                 |                    |       |                      |                 |
| Education 醫科學院             | University of California, Los Angeles                                                 |                    |       |                      |                 |
| Hospital Affiliations 醫院聯網 |                                                                                       |                    |       |                      |                 |
| Seiff, Stuart, MD          |                                                                                       | NPI #:1114928561   |       | CA License #: G45235 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                                 | New Patients 接受新病人 | Yes 是 |                      |                 |
| Address 地址                 | 2100 Webster Street #214*<br>San Francisco, CA 94115                                  |                    |       |                      |                 |
| Phone 電話                   | (415) 923-3007                                                                        |                    |       |                      |                 |
| Email 電子郵件                 | eyeservices@pacificeye.com                                                            |                    |       |                      |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                                |                    |       |                      |                 |
| Specialty 專科               | Ophthalmology 眼科                                                                      |                    |       |                      | Board Certified |
| Other Languages Spoken 語言  | Spanish Español, Cantonese 粵語, Mandarin 國語, Russian Русский                           |                    |       |                      |                 |
| Education 醫科學院             | University of California, San Francisco                                               |                    |       |                      |                 |
| Hospital Affiliations 醫院聯網 | Mills-Peninsula Medical Center                                                        |                    |       |                      |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Ophthalmology 眼科           |                                                      |                                         |                 |
|----------------------------|------------------------------------------------------|-----------------------------------------|-----------------|
| <b>So, Scott, MD</b>       |                                                      | NPI #: 1942229984 CA License #: A82180  |                 |
| Primary Care Provider 主診醫生 | No 不是                                                | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 2100 Webster Street #214<br>San Francisco, CA 94115  |                                         |                 |
| Phone 電話                   | (415) 923-3007                                       |                                         |                 |
| Email 電子郵件                 |                                                      |                                         |                 |
| Medical Group(s):          | CCHP, Jade Health Care                               |                                         |                 |
| Specialty 專科               | Ophthalmology 眼科                                     |                                         | Board Certified |
| Other Languages Spoken 語言  |                                                      |                                         |                 |
| Education 醫科學院             | Tufts University                                     |                                         |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital, CPMC - Pacific Campus              |                                         |                 |
| <b>Yang, Jon, MD 楊仲伦</b>   |                                                      | NPI #: 1649417742 CA License #: A106461 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 929 Clay Street Suite 405<br>San Francisco, CA 94108 |                                         |                 |
| Phone 電話                   | 415-986-3239                                         |                                         |                 |
| Email 電子郵件                 | jon.yang.md@gmail.com                                |                                         |                 |
| Medical Group(s):          | Jade Health Care                                     |                                         |                 |
| Specialty 專科               | Ophthalmology 眼科                                     |                                         | Board Certified |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                            |                                         |                 |
| Education 醫科學院             | University of California, San Francisco              |                                         |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                                     |                                         |                 |
| <b>Yee, David, MD 余純光</b>  |                                                      | NPI #: 1104991751 CA License #: A23138  |                 |
| Primary Care Provider 主診醫生 | No 不是                                                | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 929 Clay Street Suite 405<br>San Francisco, CA 94108 |                                         |                 |
| Phone 電話                   | (415) 986-3239                                       |                                         |                 |
| Email 電子郵件                 |                                                      |                                         |                 |
| Medical Group(s):          | Jade Health Care                                     |                                         |                 |
| Specialty 專科               | Ophthalmology 眼科                                     |                                         | Board Certified |
| Other Languages Spoken 語言  | Cantonese 粵語, Vietnamese 越南語, Mandarin 國語            |                                         |                 |
| Education 醫科學院             | University of Utah                                   |                                         |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital, St. Francis Memorial Hospital      |                                         |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Ophthalmology (Retina) 眼科 (視網膜) |                                                                       |                                             |                |
|---------------------------------|-----------------------------------------------------------------------|---------------------------------------------|----------------|
| <b>Chen, Judy, MD</b>           |                                                                       | NPI #: 1265875611 CA License #: A141948     |                |
| Primary Care Provider 主診醫生      | No 不是                                                                 | New Patients 接受新病人                          | Yes 是          |
| Address 地址                      | 1445 Bush Street<br>San Francisco, CA 94109                           |                                             |                |
| Phone 電話                        | (415) 972-4600                                                        |                                             |                |
| Email 電子郵件                      |                                                                       |                                             |                |
| Medical Group(s):               | CCHP, Jade Health Care                                                |                                             |                |
| Specialty 專科                    | Ophthalmology (Retina) 眼科 (視網膜)                                       |                                             | Board Eligible |
| Other Languages Spoken 語言       | Cantonese 粵語, Mandarin 國語, Tagalog, Spanish Español                   |                                             |                |
| Education 醫科學院                  | University of Chicago, Pritzker School of Medicine                    |                                             |                |
| Hospital Affiliations 醫院聯網      | St. Mary's Medical Center                                             |                                             |                |
| <b>Johnson, Robert, MD</b>      |                                                                       | NPI #: 1558339747 CA License #: G52144      |                |
| Primary Care Provider 主診醫生      | No 不是                                                                 | New Patients 接受新病人                          | Yes 是          |
| Address 地址                      | 185 Berry Street Suite 130<br>San Francisco, CA 94107                 | 1445 Bush Street<br>San Francisco, CA 94109 |                |
| Phone 電話                        | (415) 972-4600                                                        | (415) 972-4600                              |                |
| Email 電子郵件                      | wcr@westcoastretina.com                                               | wcr@westcoastretina.com                     |                |
| Medical Group(s):               | CCHP, Jade Health Care                                                |                                             |                |
| Specialty 專科                    | Ophthalmology (Retina) 眼科 (視網膜)                                       |                                             | Board Eligible |
| Other Languages Spoken 語言       | Cantonese 粵語, Mandarin 國語, Spanish Español, Russian Русский, Tagalog, |                                             |                |
| Education 醫科學院                  | University of California, San Francisco                               |                                             |                |
| Hospital Affiliations 醫院聯網      | St. Mary's Medical Center                                             |                                             |                |

## CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Optometrist                |                                                       |                                       |                |
|----------------------------|-------------------------------------------------------|---------------------------------------|----------------|
| Cheung, Tina, OD           |                                                       | NPI #: 1306213160 CA License #: 15419 |                |
| Primary Care Provider 主診醫生 | No 不是                                                 | New Patients 接受新病人                    | Yes 是          |
| Address 地址                 | 929 Clay Street, Suite 405<br>San Francisco, CA 94108 |                                       |                |
| Phone 電話                   | (415) 986-3239                                        |                                       |                |
| Email 電子郵件                 |                                                       |                                       |                |
| Medical Group(s):          | CCHP, Jade Health Care                                |                                       |                |
| Specialty 專科               | Optometrist                                           |                                       | Board Eligible |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                             |                                       |                |
| Education 醫科學院             | New England College of Optometry                      |                                       |                |
| Hospital Affiliations 醫院聯網 |                                                       |                                       |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Optometry 視光科                  |                                                      |                                          |                |
|--------------------------------|------------------------------------------------------|------------------------------------------|----------------|
| <b>Chang, Bradford, OD 鄭善述</b> |                                                      | NPI #:1770658619 CA License #: OPT10262T |                |
| Primary Care Provider 主診醫生     | No 不是                                                | New Patients 接受新病人                       | Yes 是          |
| Address 地址                     | 929 Clay Street Suite 203<br>San Francisco, CA 94108 |                                          |                |
| Phone 電話                       | (415) 982-1700                                       |                                          |                |
| Email 電子郵件                     |                                                      |                                          |                |
| Medical Group(s):              | CCHP, Jade Health Care                               |                                          |                |
| Specialty 專科                   | Optometry 視光科                                        |                                          | Board Eligible |
| Other Languages Spoken 語言      | Cantonese 粵語, Mandarin 國語                            |                                          |                |
| Education 醫科學院                 | New England College of Optometry                     |                                          |                |
| Hospital Affiliations 醫院聯網     |                                                      |                                          |                |
| <b>Chang, Bradford, OD 鄭善述</b> |                                                      | NPI #:1770658619 CA License #:           |                |
| Primary Care Provider 主診醫生     | No 不是                                                | New Patients 接受新病人                       | Yes 是          |
| Address 地址                     | 929 Clay Street Suite 203<br>San Francisco, CA 94108 |                                          |                |
| Phone 電話                       | (415) 982-1700                                       |                                          |                |
| Email 電子郵件                     |                                                      |                                          |                |
| Medical Group(s):              | CCHP, Jade Health Care                               |                                          |                |
| Specialty 專科                   | Optometry 視光科                                        |                                          | Board Eligible |
| Other Languages Spoken 語言      | Cantonese 粵語, Mandarin 國語                            |                                          |                |
| Education 醫科學院                 | New England College of Optometry                     |                                          |                |
| Hospital Affiliations 醫院聯網     |                                                      |                                          |                |
| <b>Chew, Theresa, OD 趙黛娥</b>   |                                                      | NPI #:1265423131 CA License #: OPT9873   |                |
| Primary Care Provider 主診醫生     | No 不是                                                | New Patients 接受新病人                       | Yes 是          |
| Address 地址                     | 781 Vallejo Street<br>San Francisco, CA 94133        |                                          |                |
| Phone 電話                       | (415) 677-9930                                       |                                          |                |
| Email 電子郵件                     |                                                      |                                          |                |
| Medical Group(s):              | Jade Health Care                                     |                                          |                |
| Specialty 專科                   | Optometry 視光科                                        |                                          | Board Eligible |
| Other Languages Spoken 語言      | Cantonese 粵語, Mandarin 國語                            |                                          |                |
| Education 醫科學院                 | Pacific University College of Optometry              |                                          |                |
| Hospital Affiliations 醫院聯網     |                                                      |                                          |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Optometry 視光科                 |                                                          |                                         |                |
|-------------------------------|----------------------------------------------------------|-----------------------------------------|----------------|
| <b>Kwong, Avon, OD 鄺韋綺娜</b>   |                                                          | NPI #: 1427029123 CA License #: OPT9376 |                |
| Primary Care Provider 主診醫生    | No 不是                                                    | New Patients 接受新病人                      | Yes 是          |
| Address 地址                    | 611 Broadway Street<br>San Francisco, CA 94133           |                                         |                |
| Phone 電話                      | (415) 982-0388                                           |                                         |                |
| Email 電子郵件                    | awkestudio@yahoo.com                                     |                                         |                |
| Medical Group(s):             | CCHP                                                     |                                         |                |
| Specialty 專科                  | Optometry 視光科                                            |                                         | Board Eligible |
| Other Languages Spoken 語言     | Cantonese 粵語, Mandarin 國語                                |                                         |                |
| Education 醫科學院                | University of California, Berkeley School of Optometry   |                                         |                |
| Hospital Affiliations 醫院聯網    |                                                          |                                         |                |
| <b>Lee, Michael, OD 李漫谷</b>   |                                                          | NPI #: 1841359684 CA License #: OPT6491 |                |
| Primary Care Provider 主診醫生    | No 不是                                                    | New Patients 接受新病人                      | Yes 是          |
| Address 地址                    | 748 Sacramento Street<br>San Francisco, CA 94108         |                                         |                |
| Phone 電話                      | (415) 781-7437                                           |                                         |                |
| Email 電子郵件                    |                                                          |                                         |                |
| Medical Group(s):             | CCHP, Jade Health Care                                   |                                         |                |
| Specialty 專科                  | Optometry 視光科                                            |                                         | Board Eligible |
| Other Languages Spoken 語言     | Cantonese 粵語, English                                    |                                         |                |
| Education 醫科學院                | University of California, Berkeley School of Optometry   |                                         |                |
| Hospital Affiliations 醫院聯網    |                                                          |                                         |                |
| <b>Saldana, Sharlette, OD</b> |                                                          | NPI #: 1992147052 CA License #: 14861   |                |
| Primary Care Provider 主診醫生    | No 不是                                                    | New Patients 接受新病人                      | Yes 是          |
| Address 地址                    | 2480 Mission Street Suite 212<br>San Francisco, CA 94110 |                                         |                |
| Phone 電話                      | (415) 648-3600                                           |                                         |                |
| Email 電子郵件                    |                                                          |                                         |                |
| Medical Group(s):             | Jade Health Care                                         |                                         |                |
| Specialty 專科                  | Optometry 視光科                                            |                                         | Board Eligible |
| Other Languages Spoken 語言     | Spanish Español, English, Tagalog                        |                                         |                |
| Education 醫科學院                | New England College of Optometry                         |                                         |                |
| Hospital Affiliations 醫院聯網    |                                                          |                                         |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Optometry 視光科                 |                                                          |                                         |                |
|-------------------------------|----------------------------------------------------------|-----------------------------------------|----------------|
| <b>TLC Optical Co. 晶晶眼鏡公司</b> |                                                          | NPI #: 1699909036 CA License #: SL1918  |                |
| Primary Care Provider 主診醫生    | No 不是                                                    | New Patients 接受新病人                      | Yes 是          |
| Address 地址                    | 852 Clay Street<br>San Francisco, CA 94108               |                                         |                |
| Phone 電話                      | (415) 397-9718                                           |                                         |                |
| Email 電子郵件                    |                                                          |                                         |                |
| Medical Group(s):             | CCHP, Jade Health Care                                   |                                         |                |
| Specialty 專科                  | Optometry 視光科                                            |                                         | Board Eligible |
| Other Languages Spoken 語言     | Cantonese 粵語, Mandarin 國語                                |                                         |                |
| Education 醫科學院                |                                                          |                                         |                |
| Hospital Affiliations 醫院聯網    |                                                          |                                         |                |
| <b>Tong, Senoch, OD 唐寶泰</b>   |                                                          | NPI #: 1275607384 CA License #: OPT6574 |                |
| Primary Care Provider 主診醫生    | No 不是                                                    | New Patients 接受新病人                      | Yes 是          |
| Address 地址                    | 899 Washington Street Suite 6<br>San Francisco, CA 94108 |                                         |                |
| Phone 電話                      | (415) 781-4524                                           |                                         |                |
| Email 電子郵件                    |                                                          |                                         |                |
| Medical Group(s):             | Jade Health Care                                         |                                         |                |
| Specialty 專科                  | Optometry 視光科                                            |                                         | Board Eligible |
| Other Languages Spoken 語言     | Cantonese 粵語, Mandarin 國語                                |                                         |                |
| Education 醫科學院                | Southern California College of Optometry                 |                                         |                |
| Hospital Affiliations 醫院聯網    |                                                          |                                         |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Orthopedic Surgery 骨科      |                                                                       |                                                           |                 |
|----------------------------|-----------------------------------------------------------------------|-----------------------------------------------------------|-----------------|
| <b>Abbi, Gaurav, MD</b>    |                                                                       | NPI #: 1700074853 CA License #: A102193                   |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                 | New Patients 接受新病人                                        | Yes 是           |
| Address 地址                 | 845 Jackson Street Suite B1<br>San Francisco, CA 94133                |                                                           |                 |
| Phone 電話                   | (415) 677-2475                                                        |                                                           |                 |
| Email 電子郵件                 |                                                                       |                                                           |                 |
| Medical Group(s):          | Jade Health Care                                                      |                                                           |                 |
| Specialty 專科               | Orthopedic Surgery 骨科<br>Orthopedic Surgery (Spine) 矯形外科 ( 脊椎 )       |                                                           | Board Certified |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語, Spanish Español                            |                                                           |                 |
| Education 醫科學院             | UCSD                                                                  |                                                           |                 |
| Hospital Affiliations 醫院聯網 | St. Francis Memorial Hospital, Seton Medical Center                   |                                                           |                 |
| <b>Fong, Vernon, MD</b>    |                                                                       | NPI #: 1396743241 CA License #: G43492                    |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                 | New Patients 接受新病人                                        | Yes 是           |
| Address 地址                 | 728 Pacific Avenue Suite 501<br>San Francisco, CA 94133               |                                                           |                 |
| Phone 電話                   | (415) 398-5990                                                        |                                                           |                 |
| Email 電子郵件                 | vernonfongoffice@gmail.com                                            |                                                           |                 |
| Medical Group(s):          | Jade Health Care                                                      |                                                           |                 |
| Specialty 專科               | Orthopedic Surgery 骨科                                                 |                                                           | Board Certified |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                                             |                                                           |                 |
| Education 醫科學院             | University of California, Davis                                       |                                                           |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital, St. Francis Memorial Hospital, Seton Medical Center |                                                           |                 |
| <b>Gordon, Joshua, MD</b>  |                                                                       | NPI #: 1053604108 CA License #: A156227                   |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                 | New Patients 接受新病人                                        | Yes 是           |
| Address 地址                 | 2299 Post Street Suite 103<br>San Francisco, CA 94115                 | 1580 Valencia Street Suite 703<br>San Francisco, CA 94110 |                 |
| Phone 電話                   | (415) 923-0992                                                        | (415) 923-0992                                            |                 |
| Email 電子郵件                 |                                                                       |                                                           |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                |                                                           |                 |
| Specialty 專科               | Orthopedic Surgery 骨科<br>Hand Surgery 手外科                             |                                                           | Board Eligible  |
| Other Languages Spoken 語言  | Spanish Español                                                       |                                                           |                 |
| Education 醫科學院             | University of California, Los Angeles David Geffen School of Medicine |                                                           |                 |
| Hospital Affiliations 醫院聯網 |                                                                       |                                                           |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Orthopedic Surgery 骨科      |                                                            |                                         |                 |
|----------------------------|------------------------------------------------------------|-----------------------------------------|-----------------|
| <b>Gordon, Leonard, MD</b> |                                                            | NPI #: 1255301537 CA License #: A26770  |                 |
| Primary Care Provider 主診醫生 | No 不是                                                      | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 2299 Post Street Suite103<br>San Francisco, CA 94115       |                                         |                 |
| Phone 電話                   | (415) 923-0992                                             |                                         |                 |
| Email 電子郵件                 |                                                            |                                         |                 |
| Medical Group(s):          | Jade Health Care                                           |                                         |                 |
| Specialty 專科               | Orthopedic Surgery 骨科                                      |                                         | Board Certified |
| Other Languages Spoken 語言  | Spanish Español                                            |                                         |                 |
| Education 醫科學院             | University of the Witwatersrand Faculty of Health Sciences |                                         |                 |
| Hospital Affiliations 醫院聯網 |                                                            |                                         |                 |
| <b>Lo, Eddie, MD</b>       |                                                            | NPI #: 1376722017 CA License #: A102816 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                      | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 845 Jackson Street Suite B1<br>San Francisco, CA 94133     |                                         |                 |
| Phone 電話                   | (415) 677-2475                                             |                                         |                 |
| Email 電子郵件                 |                                                            |                                         |                 |
| Medical Group(s):          | Jade Health Care                                           |                                         |                 |
| Specialty 專科               | Orthopedic Surgery 骨科<br>Sports Medicine 運動醫科              |                                         | Board Eligible  |
| Other Languages Spoken 語言  | Mandarin, Chinese, Spanish Español, Cantonese 粵語, Chinese  |                                         |                 |
| Education 醫科學院             | Columbia University College of Physicians & Surgeons       |                                         |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital, Seton Medical Center                     |                                         |                 |
| <b>Missirian, John, MD</b> |                                                            | NPI #: 1972569499 CA License #: C37815  |                 |
| Primary Care Provider 主診醫生 | No 不是                                                      | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 909 Hyde Street #210*<br>San Francisco, CA 94109           |                                         |                 |
| Phone 電話                   | (415) 474-7900                                             |                                         |                 |
| Email 電子郵件                 | RHernandez@Ortho88.com                                     |                                         |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                     |                                         |                 |
| Specialty 專科               | Orthopedic Surgery 骨科                                      |                                         | Board Certified |
| Other Languages Spoken 語言  | English, French Français, Armenian, Arabic العربية         |                                         |                 |
| Education 醫科學院             | American University of Beirut, Lebanon                     |                                         |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center, St. Francis Memorial Hospital        |                                         |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Orthopedic Surgery 骨科      |                                                                 |                                        |                 |
|----------------------------|-----------------------------------------------------------------|----------------------------------------|-----------------|
| <b>Okumu, Kris, MD</b>     |                                                                 | NPI #: 1679736300 CA License #: A92195 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                           | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 888 Paris Street Suite 202<br>San Francisco, CA 94112           |                                        |                 |
| Phone 電話                   | (415) 677-2488                                                  |                                        |                 |
| Email 電子郵件                 |                                                                 |                                        |                 |
| Medical Group(s):          | Jade Health Care                                                |                                        |                 |
| Specialty 專科               | Orthopedic Surgery 骨科<br>Orthopedic Surgery (Spine) 矯形外科 ( 脊椎 ) |                                        | Board Eligible  |
| Other Languages Spoken 語言  | Tongan, Spanish Español, Spanish Español                        |                                        |                 |
| Education 醫科學院             | UC Davis School of Medicine                                     |                                        |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center                                            |                                        |                 |
| <b>Roache, Paul, MD</b>    |                                                                 | NPI #: 1255362919 CA License #: A48445 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                           | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 45 Castro Street #337<br>San Francisco, CA 94114                |                                        |                 |
| Phone 電話                   | (415) 447-0495                                                  |                                        |                 |
| Email 電子郵件                 | paulb@roachemd.com                                              |                                        |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                          |                                        |                 |
| Specialty 專科               | Orthopedic Surgery 骨科                                           |                                        | Board Certified |
| Other Languages Spoken 語言  | Spanish Español                                                 |                                        |                 |
| Education 醫科學院             | Arizona State University                                        |                                        |                 |
| Hospital Affiliations 醫院聯網 | CPMC - St. Luke's Campus, CPMC - Pacific Campus                 |                                        |                 |
| <b>Roache, Paul, MD</b>    |                                                                 | NPI #: 1255362919 CA License #: A48445 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                           | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 45 Castro Street #337<br>San Francisco, CA 94114                |                                        |                 |
| Phone 電話                   | (415) 447-0495                                                  |                                        |                 |
| Email 電子郵件                 | paulb@roachemd.com                                              |                                        |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                          |                                        |                 |
| Specialty 專科               | Orthopedic Surgery 骨科<br>Sports Medicine 運動醫科                   |                                        | Board Certified |
| Other Languages Spoken 語言  | Spanish Español                                                 |                                        |                 |
| Education 醫科學院             | Arizona State University                                        |                                        |                 |
| Hospital Affiliations 醫院聯網 | CPMC - St. Luke's Campus, CPMC - Pacific Campus                 |                                        |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Orthopedic Surgery 骨科          |                                                                 |                                         |                 |
|--------------------------------|-----------------------------------------------------------------|-----------------------------------------|-----------------|
| <b>Sciaroni, Laura, MD</b>     |                                                                 | NPI #: 1649236019 CA License #: A68521  |                 |
| Primary Care Provider 主診醫生     | No 不是                                                           | New Patients 接受新病人                      | Yes 是           |
| Address 地址                     | 1 Daniel Burnham Court #365-C<br>San Francisco, CA 94109        |                                         |                 |
| Phone 電話                       | (415) 409-7364                                                  |                                         |                 |
| Email 電子郵件                     | info@sfmtmg.com                                                 |                                         |                 |
| Medical Group(s):              | CCHP, Jade Health Care                                          |                                         |                 |
| Specialty 專科                   | Orthopedic Surgery 骨科<br>Sports Medicine 運動醫科                   |                                         | Board Certified |
| Other Languages Spoken 語言      | Tagalog, Spanish Español                                        |                                         |                 |
| Education 醫科學院                 | Medical College of Wisconsin                                    |                                         |                 |
| Hospital Affiliations 醫院聯網     | Seton Medical Center, St. Francis Memorial Hospital             |                                         |                 |
| <b>Zhang, Jianghui, MD 张江晖</b> |                                                                 | NPI #: 1508020751 CA License #: A117992 |                 |
| Primary Care Provider 主診醫生     | No 不是                                                           | New Patients 接受新病人                      | Yes 是           |
| Address 地址                     | 950 Stockton Street Suite 205<br>San Francisco, CA 94108        |                                         |                 |
| Phone 電話                       | (415) 402-0793                                                  |                                         |                 |
| Email 電子郵件                     | hueygs@gmail.com                                                |                                         |                 |
| Medical Group(s):              | Jade Health Care                                                |                                         |                 |
| Specialty 專科                   | Orthopedic Surgery 骨科<br>Orthopedic Surgery (Spine) 矯形外科 ( 脊椎 ) |                                         | Board Eligible  |
| Other Languages Spoken 語言      | Cantonese 粵語, Mandarin 國語, English                              |                                         |                 |
| Education 醫科學院                 | Xinjiang Medical School                                         |                                         |                 |
| Hospital Affiliations 醫院聯網     | Chinese Hospital                                                |                                         |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Orthopedic Surgery (Spine) 矯形外科 ( 脊椎 ) |                                                                 |                                        |                |
|----------------------------------------|-----------------------------------------------------------------|----------------------------------------|----------------|
| <b>Abbi, Gaurav, MD</b>                |                                                                 | NPI #:1700074853 CA License #: A102193 |                |
| Primary Care Provider 主診醫生             | No 不是                                                           | New Patients 接受新病人                     | Yes 是          |
| Address 地址                             | 845 Jackson Street Suite B1<br>San Francisco, CA 94133          |                                        |                |
| Phone 電話                               | (415) 677-2475                                                  |                                        |                |
| Email 電子郵件                             |                                                                 |                                        |                |
| Medical Group(s):                      | Jade Health Care                                                |                                        |                |
| Specialty 專科                           | Orthopedic Surgery (Spine) 矯形外科 ( 脊椎 )<br>Orthopedic Surgery 骨科 |                                        | Board Eligible |
| Other Languages Spoken 語言              | Cantonese 粵語, Mandarin 國語, Spanish Español                      |                                        |                |
| Education 醫科學院                         | UCSD                                                            |                                        |                |
| Hospital Affiliations 醫院聯網             | St. Francis Memorial Hospital, Seton Medical Center             |                                        |                |
| <b>Okumu, Kris, MD</b>                 |                                                                 | NPI #:1679736300 CA License #: A92195  |                |
| Primary Care Provider 主診醫生             | No 不是                                                           | New Patients 接受新病人                     | Yes 是          |
| Address 地址                             | 888 Paris Street Suite 202<br>San Francisco, CA 94112           |                                        |                |
| Phone 電話                               | (415) 677-2488                                                  |                                        |                |
| Email 電子郵件                             |                                                                 |                                        |                |
| Medical Group(s):                      | Jade Health Care                                                |                                        |                |
| Specialty 專科                           | Orthopedic Surgery (Spine) 矯形外科 ( 脊椎 )<br>Orthopedic Surgery 骨科 |                                        | Board Eligible |
| Other Languages Spoken 語言              | Tongan, Spanish Español, Spanish Español                        |                                        |                |
| Education 醫科學院                         | UC Davis School of Medicine                                     |                                        |                |
| Hospital Affiliations 醫院聯網             | Seton Medical Center                                            |                                        |                |
| <b>Zhang, Jianghui, MD 张江晖</b>         |                                                                 | NPI #:1508020751 CA License #: A117992 |                |
| Primary Care Provider 主診醫生             | No 不是                                                           | New Patients 接受新病人                     | Yes 是          |
| Address 地址                             | 950 Stockton Street Suite 205<br>San Francisco, CA 94108        |                                        |                |
| Phone 電話                               | (415) 402-0793                                                  |                                        |                |
| Email 電子郵件                             | hueygs@gmail.com                                                |                                        |                |
| Medical Group(s):                      | Jade Health Care                                                |                                        |                |
| Specialty 專科                           | Orthopedic Surgery (Spine) 矯形外科 ( 脊椎 )<br>Orthopedic Surgery 骨科 |                                        | Board Eligible |
| Other Languages Spoken 語言              | Cantonese 粵語, Mandarin 國語, English                              |                                        |                |
| Education 醫科學院                         | Xinjiang Medical School                                         |                                        |                |
| Hospital Affiliations 醫院聯網             | Chinese Hospital                                                |                                        |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Otolaryngology 耳鼻喉科          |                                                                          |                                         |                 |
|------------------------------|--------------------------------------------------------------------------|-----------------------------------------|-----------------|
| <b>Ho, Kevin Ki-Hong 何其康</b> |                                                                          | NPI #: 1215131883 CA License #: A110838 |                 |
| Primary Care Provider 主診醫生   | No 不是                                                                    | New Patients 接受新病人                      | Yes 是           |
| Address 地址                   | 1800 31st Avenue<br>San Francisco, CA 94122                              |                                         |                 |
| Phone 電話                     | (415) 677-2388                                                           |                                         |                 |
| Email 電子郵件                   |                                                                          |                                         |                 |
| Medical Group(s):            | CCHP, Jade Health Care                                                   |                                         |                 |
| Specialty 專科                 | Otolaryngology 耳鼻喉科                                                      |                                         | Board Certified |
| Other Languages Spoken 語言    | Cantonese 粵語, Mandarin 國語                                                |                                         |                 |
| Education 醫科學院               |                                                                          |                                         |                 |
| Hospital Affiliations 醫院聯網   |                                                                          |                                         |                 |
| <b>Ho, Kevin Ki-Hong 何其康</b> |                                                                          | NPI #: 1215131883 CA License #: A110838 |                 |
| Primary Care Provider 主診醫生   | No 不是                                                                    | New Patients 接受新病人                      | Yes 是           |
| Address 地址                   | 845 Jackson Street, B1<br>San Francisco, CA 94133                        |                                         |                 |
| Phone 電話                     | (415) 677-2370                                                           |                                         |                 |
| Email 電子郵件                   |                                                                          |                                         |                 |
| Medical Group(s):            | CCHP, Jade Health Care                                                   |                                         |                 |
| Specialty 專科                 | Otolaryngology 耳鼻喉科                                                      |                                         | Board Certified |
| Other Languages Spoken 語言    | Cantonese 粵語, Mandarin 國語                                                |                                         |                 |
| Education 醫科學院               |                                                                          |                                         |                 |
| Hospital Affiliations 醫院聯網   |                                                                          |                                         |                 |
| <b>Wong, Denise, MD</b>      |                                                                          | NPI #: 1215191846 CA License #: A117618 |                 |
| Primary Care Provider 主診醫生   | No 不是                                                                    | New Patients 接受新病人                      | Yes 是           |
| Address 地址                   | 595 Buckingham Way #324<br>San Francisco, CA 94132                       |                                         |                 |
| Phone 電話                     | (415) 665-1877                                                           |                                         |                 |
| Email 電子郵件                   |                                                                          |                                         |                 |
| Medical Group(s):            | Jade Health Care                                                         |                                         |                 |
| Specialty 專科                 | Otolaryngology 耳鼻喉科<br>Facial Plastic & Reconstructive Surgery 面部整形及重建外科 |                                         | Board Certified |
| Other Languages Spoken 語言    |                                                                          |                                         |                 |
| Education 醫科學院               | University of Minnesota                                                  |                                         |                 |
| Hospital Affiliations 醫院聯網   |                                                                          |                                         |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Pain Management 疼痛管理科      |                                                             |                                        |                |
|----------------------------|-------------------------------------------------------------|----------------------------------------|----------------|
| <b>Rena, Diokson, MD</b>   |                                                             | NPI #: 1205919008 CA License #: C51983 |                |
| Primary Care Provider 主診醫生 | No 不是                                                       | New Patients 接受新病人                     | Yes 是          |
| Address 地址                 | 500 Sutter Street Suite 322<br>San Francisco, CA 94102      |                                        |                |
| Phone 電話                   | (415) 757-0814                                              |                                        |                |
| Email 電子郵件                 | patientrelations.drmc@gmail.com                             |                                        |                |
| Medical Group(s):          | Jade Health Care                                            |                                        |                |
| Specialty 專科               | Pain Management 疼痛管理科<br>Physical Medicine & Rehab 物理及康復治療科 |                                        | Board Eligible |
| Other Languages Spoken 語言  | English, Cantonese 粵語, Filipino Wikang Filipino             |                                        |                |
| Education 醫科學院             | University of Santo Tomas                                   |                                        |                |
| Hospital Affiliations 醫院聯網 |                                                             |                                        |                |
| <b>Tan, Ho, MD 譚纘豪</b>     |                                                             | NPI #: 1285737692 CA License #: A32071 |                |
| Primary Care Provider 主診醫生 | No 不是                                                       | New Patients 接受新病人                     | No 不是          |
| Address 地址                 | 890 Jackson Street Suite 202<br>San Francisco, CA 94133     |                                        |                |
| Phone 電話                   | (415) 781-8881                                              |                                        |                |
| Email 電子郵件                 | sunnyday9887@gmail.com                                      |                                        |                |
| Medical Group(s):          | Jade Health Care                                            |                                        |                |
| Specialty 專科               | Pain Management 疼痛管理科                                       |                                        | Board Eligible |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語, Taishanese 台山語                   |                                        |                |
| Education 醫科學院             | Christian Medical College, India                            |                                        |                |
| Hospital Affiliations 醫院聯網 | St. Francis Memorial Hospital, Chinese Hospital             |                                        |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Physical Medicine & Rehab 物理及康復治療科 |                                                            |                                        |                |
|------------------------------------|------------------------------------------------------------|----------------------------------------|----------------|
| Rena, Diokson, MD                  |                                                            | NPI #: 1205919008 CA License #: C51983 |                |
| Primary Care Provider 主診醫生         | No 不是                                                      | New Patients 接受新病人                     | Yes 是          |
| Address 地址                         | 500 Sutter Street Suite 322<br>San Francisco, CA 94102     |                                        |                |
| Phone 電話                           | (415) 757-0814                                             |                                        |                |
| Email 電子郵件                         | patientrelations.drmc@gmail.com                            |                                        |                |
| Medical Group(s):                  | Jade Health Care                                           |                                        |                |
| Specialty 專科                       | Physical Medicine & Rehab 物理及康復治療科<br>Sports Medicine 運動醫科 |                                        | Board Eligible |
| Other Languages Spoken 語言          | English, Cantonese 粵語, Filipino Wikang Filipino            |                                        |                |
| Education 醫科學院                     | University of Santo Tomas                                  |                                        |                |
| Hospital Affiliations 醫院聯網         |                                                            |                                        |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Physical Therapy 物理治療科      |                                                                                                                                                                                           |                                         |                |
|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|----------------|
| <b>Cerra, Micheline, PT</b> |                                                                                                                                                                                           | NPI #: 1699943530 CA License #: PT22545 |                |
| Primary Care Provider 主診醫生  | No 不是                                                                                                                                                                                     | New Patients 接受新病人                      | Yes 是          |
| Address 地址                  | <div> <div>44 Gough Street #308<br/>San Francisco, CA 94103<br/>(415) 524-7390</div> <div>44 Gough Street #308<br/>San Francisco, CA 94103<br/>(415) 524-7390</div> </div>                |                                         |                |
| Phone 電話                    |                                                                                                                                                                                           |                                         |                |
| Email 電子郵件                  |                                                                                                                                                                                           |                                         |                |
| Medical Group(s):           | CCHP                                                                                                                                                                                      |                                         |                |
| Specialty 專科                | Physical Therapy 物理治療科                                                                                                                                                                    |                                         | Board Eligible |
| Other Languages Spoken 語言   | English                                                                                                                                                                                   |                                         |                |
| Education 醫科學院              |                                                                                                                                                                                           |                                         |                |
| Hospital Affiliations 醫院聯網  |                                                                                                                                                                                           |                                         |                |
| <b>Simpson, James, RPT</b>  |                                                                                                                                                                                           | NPI #: 1760598379 CA License #: PT3098  |                |
| Primary Care Provider 主診醫生  | No 不是                                                                                                                                                                                     | New Patients 接受新病人                      | Yes 是          |
| Address 地址                  | <div> <div>450 Sutter Street Suite 1003<br/>San Francisco, CA 94108<br/>(415) 433-3457</div> <div>2555 Ocean Avenue Suite 103<br/>San Francisco, CA 94132<br/>(415) 433-3457</div> </div> |                                         |                |
| Phone 電話                    |                                                                                                                                                                                           |                                         |                |
| Email 電子郵件                  |                                                                                                                                                                                           |                                         |                |
| Medical Group(s):           | CCHP, Jade Health Care                                                                                                                                                                    |                                         |                |
| Specialty 專科                | Physical Therapy 物理治療科                                                                                                                                                                    |                                         | Board Eligible |
| Other Languages Spoken 語言   | Spanish Español                                                                                                                                                                           |                                         |                |
| Education 醫科學院              |                                                                                                                                                                                           |                                         |                |
| Hospital Affiliations 醫院聯網  |                                                                                                                                                                                           |                                         |                |
| <b>Wong, Robin, RPT</b>     |                                                                                                                                                                                           | NPI #: 1013094127 CA License #: PT9507  |                |
| Primary Care Provider 主診醫生  | No 不是                                                                                                                                                                                     | New Patients 接受新病人                      | Yes 是          |
| Address 地址                  | <div> <div>818 Jackson Street #201<br/>San Francisco, CA 94133<br/>(415) 421-5678</div> <div>robinwongpt@gmail.com</div> </div>                                                           |                                         |                |
| Phone 電話                    |                                                                                                                                                                                           |                                         |                |
| Email 電子郵件                  |                                                                                                                                                                                           |                                         |                |
| Medical Group(s):           | CCHP                                                                                                                                                                                      |                                         |                |
| Specialty 專科                | Physical Therapy 物理治療科                                                                                                                                                                    |                                         | Board Eligible |
| Other Languages Spoken 語言   | Cantonese 粵語, Mandarin 國語                                                                                                                                                                 |                                         |                |
| Education 醫科學院              | University of Wisconsin                                                                                                                                                                   |                                         |                |
| Hospital Affiliations 醫院聯網  |                                                                                                                                                                                           |                                         |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Plastic & Reconstructive Surgery 整容外科 |                                                                          |                                                   |                |
|---------------------------------------|--------------------------------------------------------------------------|---------------------------------------------------|----------------|
| <b>Chang, Kristoffer, MD 張寧</b>       |                                                                          | NPI #:1790761336 CA License #: G36914             |                |
| Primary Care Provider 主診醫生            | No 不是                                                                    | New Patients 接受新病人                                | Yes 是          |
| Address 地址                            | 2100 Webster Street #328<br>San Francisco, CA 94115                      |                                                   |                |
| Phone 電話                              | (415) 923-3860                                                           |                                                   |                |
| Email 電子郵件                            | kningchang@hotmail.com                                                   |                                                   |                |
| Medical Group(s):                     | CCHP, Jade Health Care                                                   |                                                   |                |
| Specialty 專科                          | Plastic & Reconstructive Surgery 整容外科                                    |                                                   | Board Eligible |
| Other Languages Spoken 語言             | Mandarin 國語                                                              |                                                   |                |
| Education 醫科學院                        | University of Utah School of Medicine                                    |                                                   |                |
| Hospital Affiliations 醫院聯網            | Chinese Hospital                                                         |                                                   |                |
| <b>Lee, Charles, MD</b>               |                                                                          | NPI #:1487635298 CA License #: A82918             |                |
| Primary Care Provider 主診醫生            | No 不是                                                                    | New Patients 接受新病人                                | Yes 是          |
| Address 地址                            | 2250 Hayes Street #508<br>San Francisco, CA 94117                        | 2250 Hayes Street #508<br>San Francisco, CA 94117 |                |
| Phone 電話                              | (415) 933-8330                                                           | (415) 933-8330                                    |                |
| Email 電子郵件                            | Lplasticsurgery@gmail.com                                                | Lplasticsurgery@gmail.com                         |                |
| Medical Group(s):                     | Jade Health Care                                                         |                                                   |                |
| Specialty 專科                          | Plastic & Reconstructive Surgery 整容外科<br>Hand Surgery (Plastic) 手外科 (整形) |                                                   | Board Eligible |
| Other Languages Spoken 語言             |                                                                          |                                                   |                |
| Education 醫科學院                        | Washington University in St. Louis School Of Medicine                    |                                                   |                |
| Hospital Affiliations 醫院聯網            | St. Mary's Medical Center                                                |                                                   |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Plastic Surgery 整形外科          |                                                           |                                        |                 |
|-------------------------------|-----------------------------------------------------------|----------------------------------------|-----------------|
| <b>Fong, Kenton, MD</b>       |                                                           | NPI #: 1932388444 CA License #: A91371 |                 |
| Primary Care Provider 主診醫生    | No 不是                                                     | New Patients 接受新病人                     | Yes 是           |
| Address 地址                    | 845 Jackson St. Suite B1<br>San Francisco, CA 94133       |                                        |                 |
| Phone 電話                      | (415) 677-2370                                            |                                        |                 |
| Email 電子郵件                    |                                                           |                                        |                 |
| Medical Group(s):             | Jade Health Care                                          |                                        |                 |
| Specialty 專科                  | Plastic Surgery 整形外科                                      |                                        | Board Certified |
| Other Languages Spoken 語言     |                                                           |                                        |                 |
| Education 醫科學院                | University of California San Francisco School of Medicine |                                        |                 |
| Hospital Affiliations 醫院聯網    |                                                           |                                        |                 |
| <b>Friedenthal, Roger, MD</b> |                                                           | NPI #: 1164521605 CA License #: G9257  |                 |
| Primary Care Provider 主診醫生    | No 不是                                                     | New Patients 接受新病人                     | Yes 是           |
| Address 地址                    | 2100 Webster Street Suite 318<br>San Francisco, CA 94115  |                                        |                 |
| Phone 電話                      | (415) 752-2066                                            |                                        |                 |
| Email 電子郵件                    |                                                           |                                        |                 |
| Medical Group(s):             | Jade Health Care                                          |                                        |                 |
| Specialty 專科                  | Plastic Surgery 整形外科                                      |                                        | Board Eligible  |
| Other Languages Spoken 語言     | English                                                   |                                        |                 |
| Education 醫科學院                | Yale University School of Medicine                        |                                        |                 |
| Hospital Affiliations 醫院聯網    | St. Mary's Medical Center                                 |                                        |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Podiatry 足科                       |                                                                                |                                       |                |
|-----------------------------------|--------------------------------------------------------------------------------|---------------------------------------|----------------|
| <b>Cheung, Catherine, DPM 張向欣</b> |                                                                                | NPI #: 1891724399 CA License #: E4390 |                |
| Primary Care Provider 主診醫生        | No 不是                                                                          | New Patients 接受新病人                    | Yes 是          |
| Address 地址                        | 490 Post Street #900<br>San Francisco, CA 94102                                |                                       |                |
| Phone 電話                          | (415) 409-1367                                                                 |                                       |                |
| Email 電子郵件                        |                                                                                |                                       |                |
| Medical Group(s):                 | Jade Health Care                                                               |                                       |                |
| Specialty 專科                      | Podiatry 足科                                                                    |                                       | Board Eligible |
| Other Languages Spoken 語言         | Cantonese 粵語, Tagalog, Spanish Español                                         |                                       |                |
| Education 醫科學院                    | California College of Podiatric Medicine                                       |                                       |                |
| Hospital Affiliations 醫院聯網        | Chinese Hospital, St. Francis Memorial Hospital                                |                                       |                |
| <b>Choe, Susan, DPM</b>           |                                                                                | NPI #: 1275763252 CA License #: E4860 |                |
| Primary Care Provider 主診醫生        | No 不是                                                                          | New Patients 接受新病人                    | Yes 是          |
| Address 地址                        | 490 Post Street #336<br>San Francisco, CA 94102                                |                                       |                |
| Phone 電話                          | (415) 890-3377                                                                 |                                       |                |
| Email 電子郵件                        | info@elevatefoot.com                                                           |                                       |                |
| Medical Group(s):                 | CCHP, Jade Health Care                                                         |                                       |                |
| Specialty 專科                      | Podiatry 足科                                                                    |                                       | Board Eligible |
| Other Languages Spoken 語言         | Spanish Español                                                                |                                       |                |
| Education 醫科學院                    | Samuel Merritt University - California School of Podiatric Medicine            |                                       |                |
| Hospital Affiliations 醫院聯網        | St. Mary's Medical Center, Seton Medical Center, St. Francis Memorial Hospital |                                       |                |
| <b>Chong, Melody, DPM 張秀英</b>     |                                                                                | NPI #: 1497786040 CA License #: E3838 |                |
| Primary Care Provider 主診醫生        | No 不是                                                                          | New Patients 接受新病人                    | Yes 是          |
| Address 地址                        | 3838 California Street #514<br>San Francisco, CA 94118                         |                                       |                |
| Phone 電話                          | (415) 386-3338                                                                 |                                       |                |
| Email 電子郵件                        | footdoctormelodychong@gmail.co                                                 |                                       |                |
| Medical Group(s):                 | Jade Health Care                                                               |                                       |                |
| Specialty 專科                      | Podiatry 足科                                                                    |                                       | Board Eligible |
| Other Languages Spoken 語言         | Cantonese 粵語                                                                   |                                       |                |
| Education 醫科學院                    | Ohio College of Podiatric Medicine                                             |                                       |                |
| Hospital Affiliations 醫院聯網        | Chinese Hospital, St. Francis Memorial Hospital                                |                                       |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Podiatry 足科                  |                                                          |                                       |                 |
|------------------------------|----------------------------------------------------------|---------------------------------------|-----------------|
| <b>Choy, Robert, DPM 蔡英材</b> |                                                          | NPI #: 1831148618 CA License #: E3203 |                 |
| Primary Care Provider 主診醫生   | No 不是                                                    | New Patients 接受新病人                    | Yes 是           |
| Address 地址                   | 728 Pacific Avenue Suite 502<br>San Francisco, CA 94133  |                                       |                 |
| Phone 電話                     | (415) 981-8828                                           |                                       |                 |
| Email 電子郵件                   |                                                          |                                       |                 |
| Medical Group(s):            | Jade Health Care                                         |                                       |                 |
| Specialty 專科                 | Podiatry 足科                                              |                                       | Board Eligible  |
| Other Languages Spoken 語言    | Cantonese 粵語, Mandarin 國語                                |                                       |                 |
| Education 醫科學院               | California College of Podiatric Medicine                 |                                       |                 |
| Hospital Affiliations 醫院聯網   | Chinese Hospital                                         |                                       |                 |
| <b>Fong, David, DPM 方光祥</b>  |                                                          | NPI #: 1710995717 CA License #: E3379 |                 |
| Primary Care Provider 主診醫生   | No 不是                                                    | New Patients 接受新病人                    | Yes 是           |
| Address 地址                   | 950 Stockton Street Suite 300<br>San Francisco, CA 94108 |                                       |                 |
| Phone 電話                     | (415) 362-6602                                           |                                       |                 |
| Email 電子郵件                   | davidfongdpm@yahoo.com                                   |                                       |                 |
| Medical Group(s):            | Jade Health Care                                         |                                       |                 |
| Specialty 專科                 | Podiatry 足科                                              |                                       | Board Certified |
| Other Languages Spoken 語言    | Cantonese 粵語, Mandarin 國語                                |                                       |                 |
| Education 醫科學院               | California College of Podiatric Medicine                 |                                       |                 |
| Hospital Affiliations 醫院聯網   | Chinese Hospital                                         |                                       |                 |
| <b>Lam, Gary, DPM</b>        |                                                          | NPI #: 1588996557 CA License #: E4748 |                 |
| Primary Care Provider 主診醫生   | No 不是                                                    | New Patients 接受新病人                    | Yes 是           |
| Address 地址                   | 410 16th Avenue<br>San Francisco, CA 94118               |                                       |                 |
| Phone 電話                     | (415) 933-6725                                           |                                       |                 |
| Email 電子郵件                   | drlamdpm@sffeet.com                                      |                                       |                 |
| Medical Group(s):            | CCHP                                                     |                                       |                 |
| Specialty 專科                 | Podiatry 足科                                              |                                       | Board Certified |
| Other Languages Spoken 語言    | Chinese, Russian Русский                                 |                                       |                 |
| Education 醫科學院               | California College of Podiatric Medicine                 |                                       |                 |
| Hospital Affiliations 醫院聯網   |                                                          |                                       |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Podiatry 足科                      |                                                                  |                                       |                 |
|----------------------------------|------------------------------------------------------------------|---------------------------------------|-----------------|
| <b>Patel, Divyang, DPM</b>       |                                                                  | NPI #: 1639213606 CA License #: E3815 |                 |
| Primary Care Provider 主診醫生       | No 不是                                                            | New Patients 接受新病人                    | Yes 是           |
| Address 地址                       | 2858 San Bruno Avenue<br>San Francisco, CA 94134                 |                                       |                 |
| Phone 電話                         | (415) 467-7500                                                   |                                       |                 |
| Email 電子郵件                       |                                                                  |                                       |                 |
| Medical Group(s):                | Jade Health Care                                                 |                                       |                 |
| Specialty 專科                     | Podiatry 足科                                                      |                                       | Board Certified |
| Other Languages Spoken 語言        | Mandarin 國語, Tagalog, Vietnamese 越南語                             |                                       |                 |
| Education 醫科學院                   | California College of Podiatric Medicine                         |                                       |                 |
| Hospital Affiliations 醫院聯網       | Seton Medical Center                                             |                                       |                 |
| <b>Reyzelman, Alexander, DPM</b> |                                                                  | NPI #: 1023192721 CA License #: E4136 |                 |
| Primary Care Provider 主診醫生       | No 不是                                                            | New Patients 接受新病人                    | Yes 是           |
| Address 地址                       | 2299 Post Street #205<br>San Francisco, CA 94115                 |                                       |                 |
| Phone 電話                         | (415) 292-0638                                                   |                                       |                 |
| Email 電子郵件                       | rozana@BayAreaFootCare.com                                       |                                       |                 |
| Medical Group(s):                | CCHP, Jade Health Care                                           |                                       |                 |
| Specialty 專科                     | Podiatry 足科                                                      |                                       | Board Eligible  |
| Other Languages Spoken 語言        | Russian Русский, Spanish Español, Armenian                       |                                       |                 |
| Education 醫科學院                   | California College of Podiatric Medicine                         |                                       |                 |
| Hospital Affiliations 醫院聯網       | Chinese Hospital, St. Mary's Medical Center, UCSF Medical Center |                                       |                 |
| <b>Tran, David, DPM</b>          |                                                                  | NPI #: 1902804230 CA License #: E4274 |                 |
| Primary Care Provider 主診醫生       | No 不是                                                            | New Patients 接受新病人                    | Yes 是           |
| Address 地址                       | 1 Shrader Street Suite 510<br>San Francisco, CA 94117            |                                       |                 |
| Phone 電話                         | (415) 759-2014                                                   |                                       |                 |
| Email 電子郵件                       | drtran@bayareafotcare.com                                        |                                       |                 |
| Medical Group(s):                | CCHP, Jade Health Care                                           |                                       |                 |
| Specialty 專科                     | Podiatry 足科                                                      |                                       | Board Certified |
| Other Languages Spoken 語言        |                                                                  |                                       |                 |
| Education 醫科學院                   | California College of Podiatric Medicine                         |                                       |                 |
| Hospital Affiliations 醫院聯網       | Seton Medical Center, St. Mary's Medical Center                  |                                       |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Podiatry 足科                |                                                                                                                                                           |                                       |                |
|----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|----------------|
| Wong, Vincent, DPM 黃育威     |                                                                                                                                                           | NPI #: 1417051657 CA License #: E3798 |                |
| Primary Care Provider 主診醫生 | No 不是                                                                                                                                                     | New Patients 接受新病人                    | Yes 是          |
| Address 地址                 | 728 Pacific Avenue Suite 606 1800 31st Avenue*<br>San Francisco, CA 94133 San Francisco, CA 94122<br>Phone 電話 (415) 398-5023 (415) 677-2388<br>Email 電子郵件 |                                       |                |
| Medical Group(s):          | Jade Health Care                                                                                                                                          |                                       |                |
| Specialty 專科               | Podiatry 足科                                                                                                                                               |                                       | Board Eligible |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語, Vietnamese 越南語                                                                                                                 |                                       |                |
| Education 醫科學院             | California College of Podiatric Medicine                                                                                                                  |                                       |                |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                                                                                                                                          |                                       |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Radiation Oncology 放射性腫瘤科  |                                                                                                                                                                         |                                         |       |
|----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-------|
| <b>Abendroth, Roy, MD</b>  |                                                                                                                                                                         | NPI #: 1811988421 CA License #: G60844  |       |
| Primary Care Provider 主診醫生 | No 不是                                                                                                                                                                   | New Patients 接受新病人                      | Yes 是 |
| Address 地址                 | 2333 Buchanan Street Level B 900 Hyde Street Basement Level*<br>San Francisco, CA 94115 San Francisco, CA 94109<br>Phone 電話 (415) 600-3600 (415) 353-6300<br>Email 電子郵件 |                                         |       |
| Medical Group(s):          | CCHP                                                                                                                                                                    |                                         |       |
| Specialty 專科               | Radiation Oncology 放射性腫瘤科 Board Eligible                                                                                                                                |                                         |       |
| Other Languages Spoken 語言  |                                                                                                                                                                         |                                         |       |
| Education 醫科學院             |                                                                                                                                                                         |                                         |       |
| Hospital Affiliations 醫院聯網 | CPMC - St. Luke's Campus, St. Francis Memorial Hospital                                                                                                                 |                                         |       |
| <b>Geng, Alexander, MD</b> |                                                                                                                                                                         | NPI #: 1790066090 CA License #: A117696 |       |
| Primary Care Provider 主診醫生 | No 不是                                                                                                                                                                   | New Patients 接受新病人                      | Yes 是 |
| Address 地址                 | 900 Hyde Street Level B<br>San Francisco, CA 94109<br>Phone 電話 (415) 353-6443<br>Email 電子郵件                                                                             |                                         |       |
| Medical Group(s):          | CCHP                                                                                                                                                                    |                                         |       |
| Specialty 專科               | Radiation Oncology 放射性腫瘤科 Board Certified                                                                                                                               |                                         |       |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                                                                                                                                               |                                         |       |
| Education 醫科學院             | University of California                                                                                                                                                |                                         |       |
| Hospital Affiliations 醫院聯網 | St. Francis Memorial Hospital, Chinese Hospital                                                                                                                         |                                         |       |
| <b>Kornguth, David, MD</b> |                                                                                                                                                                         | NPI #: 1801820394 CA License #: A104635 |       |
| Primary Care Provider 主診醫生 | No 不是                                                                                                                                                                   | New Patients 接受新病人                      | Yes 是 |
| Address 地址                 | 139 Townsend Street Suite 100<br>San Francisco, CA 94107<br>Phone 電話 415-541-0800<br>Email 電子郵件 dkornguth@goldengateurology.co                                          |                                         |       |
| Medical Group(s):          | CCHP, Jade Health Care                                                                                                                                                  |                                         |       |
| Specialty 專科               | Radiation Oncology 放射性腫瘤科 Board Eligible                                                                                                                                |                                         |       |
| Other Languages Spoken 語言  | Hindi, Cantonese 粵語, Mandarin 國語, Tibetan                                                                                                                               |                                         |       |
| Education 醫科學院             | Boston University                                                                                                                                                       |                                         |       |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                                                                                                                                                        |                                         |       |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Radiation Oncology 放射性腫瘤科  |                                                                                                                                                                        |                                        |                 |
|----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-----------------|
| <b>Lee, John, MD 李威達</b>   |                                                                                                                                                                        | NPI #: 1316938657 CA License #: A55578 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                                                                                                                  | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 2333 Buchanan Street Level B 900 Hyde Street Basement Level<br>San Francisco, CA 94115 San Francisco, CA 94109<br>Phone 電話 (415) 600-3600 (415) 353-6420<br>Email 電子郵件 |                                        |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                                                                                                                 |                                        |                 |
| Specialty 專科               | Radiation Oncology 放射性腫瘤科                                                                                                                                              |                                        | Board Certified |
| Other Languages Spoken 語言  | Mandarin 國語, Cantonese 粵語, Spanish Español                                                                                                                             |                                        |                 |
| Education 醫科學院             | University of Ottawa, Canada                                                                                                                                           |                                        |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital, St. Francis Memorial Hospital                                                                                                                        |                                        |                 |
| <b>Meyer, John, MD</b>     |                                                                                                                                                                        | NPI #: 1164403416 CA License #: G35272 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                                                                                                                  | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 900 Hyde Street Basement Level<br>San Francisco, CA 94109<br>Phone 電話 (415) 353-6420<br>Email 電子郵件                                                                     |                                        |                 |
| Medical Group(s):          | CCHP                                                                                                                                                                   |                                        |                 |
| Specialty 專科               | Radiation Oncology 放射性腫瘤科                                                                                                                                              |                                        | Board Eligible  |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                                                                                                                                              |                                        |                 |
| Education 醫科學院             | University of California, San Francisco                                                                                                                                |                                        |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital, St. Francis Memorial Hospital, St. Mary's Medical Center                                                                                             |                                        |                 |
| <b>Tran, Loan, MD</b>      |                                                                                                                                                                        | NPI #: 1043292410 CA License #: G75743 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                                                                                                                  | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 900 Hyde St Radiation Oncology D 450 Stanyan St<br>San Francisco, CA 94109 San Francisco, CA 94117<br>Phone 電話 (415) 353-6820 (650) 696-4509<br>Email 電子郵件             |                                        |                 |
| Medical Group(s):          | Jade Health Care                                                                                                                                                       |                                        |                 |
| Specialty 專科               | Radiation Oncology 放射性腫瘤科                                                                                                                                              |                                        | Board Certified |
| Other Languages Spoken 語言  |                                                                                                                                                                        |                                        |                 |
| Education 醫科學院             | Tufts University School Of Medicine                                                                                                                                    |                                        |                 |
| Hospital Affiliations 醫院聯網 |                                                                                                                                                                        |                                        |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Rheumatology 風濕科             |                                                                             |                                          |                 |
|------------------------------|-----------------------------------------------------------------------------|------------------------------------------|-----------------|
| <b>Chan, Michael, MD 陳國樑</b> |                                                                             | NPI #: 1063413714 CA License #: G29657   |                 |
| Primary Care Provider 主診醫生   | Yes 是                                                                       | New Patients 接受新病人                       | Yes 是           |
| Address 地址                   | 2250 Hayes Street #502*<br>San Francisco, CA 94117                          |                                          |                 |
| Phone 電話                     | (415) 752-0337                                                              |                                          |                 |
| Email 電子郵件                   |                                                                             |                                          |                 |
| Medical Group(s):            | Jade Health Care                                                            |                                          |                 |
| Specialty 專科                 | Rheumatology 風濕科                                                            |                                          | Board Eligible  |
| Other Languages Spoken 語言    | Cantonese 粵語, Mandarin 國語                                                   |                                          |                 |
| Education 醫科學院               | Creighton University                                                        |                                          |                 |
| Hospital Affiliations 醫院聯網   | Chinese Hospital, St. Mary's Medical Center, Mills-Peninsula Medical Center |                                          |                 |
| <b>Wang, Roger, DO 汪嶸卿</b>   |                                                                             | NPI #: 1164522165 CA License #: 20A10816 |                 |
| Primary Care Provider 主診醫生   | No 不是                                                                       | New Patients 接受新病人                       | Yes 是           |
| Address 地址                   | 950 Stockton Street Suite 399<br>San Francisco, CA 94108                    |                                          |                 |
| Phone 電話                     | 415-677-0901                                                                |                                          |                 |
| Email 電子郵件                   | acc950@gmail.com                                                            |                                          |                 |
| Medical Group(s):            | Jade Health Care                                                            |                                          |                 |
| Specialty 專科                 | Rheumatology 風濕科<br>Allergy & Immunology 敏感科                                |                                          | Board Certified |
| Other Languages Spoken 語言    | Cantonese 粵語, Mandarin 國語                                                   |                                          |                 |
| Education 醫科學院               | University of New England                                                   |                                          |                 |
| Hospital Affiliations 醫院聯網   | Chinese Hospital                                                            |                                          |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Sleep Medicine 睡眠研究醫學專家    |                                                                            |                                         |                 |
|----------------------------|----------------------------------------------------------------------------|-----------------------------------------|-----------------|
| <b>Meng, Joy, MD</b>       |                                                                            | NPI #: 1174786123 CA License #: A111196 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                      | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 950 Stockton Street Suite 368<br>San Francisco, CA 94108                   |                                         |                 |
| Phone 電話                   | (415) 666-2536                                                             |                                         |                 |
| Email 電子郵件                 | office@sf-neurology.com                                                    |                                         |                 |
| Medical Group(s):          | Jade Health Care                                                           |                                         |                 |
| Specialty 專科               | Sleep Medicine 睡眠研究醫學專家<br>Neurology 腦科                                    |                                         | Board Certified |
| Other Languages Spoken 語言  | Mandarin 國語, Cantonese 粵語                                                  |                                         |                 |
| Education 醫科學院             | Tianjin Medical University, China                                          |                                         |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital, St. Francis Memorial Hospital, St. Mary's Medical Center |                                         |                 |

## CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Speech Pathology 言語治療科     |                                                                  |                                                                   |                |
|----------------------------|------------------------------------------------------------------|-------------------------------------------------------------------|----------------|
| Kong, Shannon, SLP         |                                                                  | NPI #: 1083796601 CA License #: SP10617                           |                |
| Primary Care Provider 主診醫生 | No 不是                                                            | New Patients 接受新病人                                                | Yes 是          |
| Address 地址                 | 1202 Vicente Street<br>San Francisco, CA 94116<br>(415) 469-4988 | 1106 Vicente Street*<br>San Francisco, CA 94116<br>(415) 469-4988 |                |
| Phone 電話                   |                                                                  |                                                                   |                |
| Email 電子郵件                 |                                                                  |                                                                   |                |
| Medical Group(s):          | Jade Health Care                                                 |                                                                   |                |
| Specialty 專科               | Speech Pathology 言語治療科                                           |                                                                   | Board Eligible |
| Other Languages Spoken 語言  |                                                                  |                                                                   |                |
| Education 醫科學院             |                                                                  |                                                                   |                |
| Hospital Affiliations 醫院聯網 |                                                                  |                                                                   |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Speech-Language Pathology      |                                                |                                       |                |
|--------------------------------|------------------------------------------------|---------------------------------------|----------------|
| <b>Kharrazi, Michelle, SLP</b> |                                                | NPI #: 1659847432 CA License #: 20017 |                |
| Primary Care Provider 主診醫生     | No 不是                                          | New Patients 接受新病人                    | Yes 是          |
| Address 地址                     | 1106 Vicente Street<br>San Francisco, CA 94116 |                                       |                |
| Phone 電話                       | (415) 469-4988                                 |                                       |                |
| Email 電子郵件                     | michellekharazzi@sevenbridgesth                |                                       |                |
| Medical Group(s):              | Jade Health Care                               |                                       |                |
| Specialty 專科                   | Speech-Language Pathology                      |                                       | Board Eligible |
| Other Languages Spoken 語言      |                                                |                                       |                |
| Education 醫科學院                 |                                                |                                       |                |
| Hospital Affiliations 醫院聯網     |                                                |                                       |                |
| <b>Lan, Josephine, SLP</b>     |                                                | NPI #: 1639650559 CA License #: 28463 |                |
| Primary Care Provider 主診醫生     | No 不是                                          | New Patients 接受新病人                    | Yes 是          |
| Address 地址                     | 1106 Vicente Street<br>San Francisco, CA 94116 |                                       |                |
| Phone 電話                       | (415) 469-4988                                 |                                       |                |
| Email 電子郵件                     |                                                |                                       |                |
| Medical Group(s):              | Jade Health Care                               |                                       |                |
| Specialty 專科                   | Speech-Language Pathology                      |                                       | Board Eligible |
| Other Languages Spoken 語言      | Chinese                                        |                                       |                |
| Education 醫科學院                 | San Jose State University                      |                                       |                |
| Hospital Affiliations 醫院聯網     |                                                |                                       |                |
| <b>Wyant, Rachele, SLP</b>     |                                                | NPI #: 1568822427 CA License #: 20672 |                |
| Primary Care Provider 主診醫生     | No 不是                                          | New Patients 接受新病人                    | Yes 是          |
| Address 地址                     | 1106 Vicente Street<br>San Francisco, CA 94116 |                                       |                |
| Phone 電話                       | (510) 639-2929                                 |                                       |                |
| Email 電子郵件                     |                                                |                                       |                |
| Medical Group(s):              | Jade Health Care                               |                                       |                |
| Specialty 專科                   | Speech-Language Pathology                      |                                       | Board Eligible |
| Other Languages Spoken 語言      |                                                |                                       |                |
| Education 醫科學院                 | California State University Chico              |                                       |                |
| Hospital Affiliations 醫院聯網     |                                                |                                       |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Sports Medicine 運動醫科       |                                                            |                                         |                 |
|----------------------------|------------------------------------------------------------|-----------------------------------------|-----------------|
| <b>Lo, Eddie, MD</b>       |                                                            | NPI #: 1376722017 CA License #: A102816 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                      | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 845 Jackson Street Suite B1<br>San Francisco, CA 94133     |                                         |                 |
| Phone 電話                   | (415) 677-2475                                             |                                         |                 |
| Email 電子郵件                 |                                                            |                                         |                 |
| Medical Group(s):          | Jade Health Care                                           |                                         |                 |
| Specialty 專科               | Sports Medicine 運動醫科<br>Orthopedic Surgery 骨科              |                                         | Board Eligible  |
| Other Languages Spoken 語言  | Mandarin, Chinese, Spanish Español, Cantonese 粵語, Chinese  |                                         |                 |
| Education 醫科學院             | Columbia University College of Physicians & Surgeons       |                                         |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital, Seton Medical Center                     |                                         |                 |
| <b>Rena, Diokson, MD</b>   |                                                            | NPI #: 1205919008 CA License #: C51983  |                 |
| Primary Care Provider 主診醫生 | No 不是                                                      | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 500 Sutter Street Suite 322<br>San Francisco, CA 94102     |                                         |                 |
| Phone 電話                   | (415) 757-0814                                             |                                         |                 |
| Email 電子郵件                 | patientrelations.drmc@gmail.com                            |                                         |                 |
| Medical Group(s):          | Jade Health Care                                           |                                         |                 |
| Specialty 專科               | Sports Medicine 運動醫科<br>Physical Medicine & Rehab 物理及康復治療科 |                                         | Board Eligible  |
| Other Languages Spoken 語言  | English, Cantonese 粵語, Filipino Wikang Filipino            |                                         |                 |
| Education 醫科學院             | University of Santo Tomas                                  |                                         |                 |
| Hospital Affiliations 醫院聯網 |                                                            |                                         |                 |
| <b>Roache, Paul, MD</b>    |                                                            | NPI #: 1255362919 CA License #: A48445  |                 |
| Primary Care Provider 主診醫生 | No 不是                                                      | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 45 Castro Street #337<br>San Francisco, CA 94114           |                                         |                 |
| Phone 電話                   | (415) 447-0495                                             |                                         |                 |
| Email 電子郵件                 | paulb@roachemd.com                                         |                                         |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                     |                                         |                 |
| Specialty 專科               | Sports Medicine 運動醫科<br>Orthopedic Surgery 骨科              |                                         | Board Certified |
| Other Languages Spoken 語言  | Spanish Español                                            |                                         |                 |
| Education 醫科學院             | Arizona State University                                   |                                         |                 |
| Hospital Affiliations 醫院聯網 | CPMC - St. Luke's Campus, CPMC - Pacific Campus            |                                         |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Sports Medicine 運動醫科          |                                                          |                                         |                |
|-------------------------------|----------------------------------------------------------|-----------------------------------------|----------------|
| <b>Sampson, Joshua, MD</b>    |                                                          | NPI #: 1497098909 CA License #: A132699 |                |
| Primary Care Provider 主診醫生    | No 不是                                                    | New Patients 接受新病人                      | Yes 是          |
| Address 地址                    | 2299 Post Street Suite 107<br>San Francisco, CA 94115    |                                         |                |
| Phone 電話                      | (415) 345-9400                                           |                                         |                |
| Email 電子郵件                    |                                                          |                                         |                |
| Medical Group(s):             | Jade Health Care                                         |                                         |                |
| Specialty 專科                  | Sports Medicine 運動醫科                                     |                                         | Board Eligible |
| Other Languages Spoken 語言     |                                                          |                                         |                |
| Education 醫科學院                | Georgetown University School of Medicine                 |                                         |                |
| Hospital Affiliations 醫院聯網    |                                                          |                                         |                |
| <b>Sciaroni, Laura, MD</b>    |                                                          | NPI #: 1649236019 CA License #: A68521  |                |
| Primary Care Provider 主診醫生    | No 不是                                                    | New Patients 接受新病人                      | Yes 是          |
| Address 地址                    | 1 Daniel Burnham Court #365-C<br>San Francisco, CA 94109 |                                         |                |
| Phone 電話                      | (415) 409-7364                                           |                                         |                |
| Email 電子郵件                    | info@sfmimg.com                                          |                                         |                |
| Medical Group(s):             | CCHP, Jade Health Care                                   |                                         |                |
| Specialty 專科                  | Sports Medicine 運動醫科<br>Orthopedic Surgery 骨科            |                                         | Board Eligible |
| Other Languages Spoken 語言     | Tagalog, Spanish Español                                 |                                         |                |
| Education 醫科學院                | Medical College of Wisconsin                             |                                         |                |
| Hospital Affiliations 醫院聯網    | Seton Medical Center, St. Francis Memorial Hospital      |                                         |                |
| <b>Wingfield, Kristin, MD</b> |                                                          | NPI #: 1790701225 CA License #: A83480  |                |
| Primary Care Provider 主診醫生    | No 不是                                                    | New Patients 接受新病人                      | Yes 是          |
| Address 地址                    | 490 Post Street, Suite 900<br>San Francisco, CA 94102    |                                         |                |
| Phone 電話                      | (415) 409-1367                                           |                                         |                |
| Email 電子郵件                    |                                                          |                                         |                |
| Medical Group(s):             | CCHP, Jade Health Care                                   |                                         |                |
| Specialty 專科                  | Sports Medicine 運動醫科                                     |                                         | Board Eligible |
| Other Languages Spoken 語言     |                                                          |                                         |                |
| Education 醫科學院                | University of British Columbia                           |                                         |                |
| Hospital Affiliations 醫院聯網    | UCSF Medical Center                                      |                                         |                |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

## Urology 泌尿科

| Grady, Brian, MD           |                                                                                                          | NPI #:1417018813   |                                                                          | CA License #: A60523 |                 |
|----------------------------|----------------------------------------------------------------------------------------------------------|--------------------|--------------------------------------------------------------------------|----------------------|-----------------|
| Primary Care Provider 主診醫生 | No 不是                                                                                                    | New Patients 接受新病人 |                                                                          | Yes 是                |                 |
| Address 地址                 | 45 Castro Street #165<br>San Francisco, CA 94114<br>(415) 861-0600                                       |                    | 1 Shrader Street Suite 400*<br>San Francisco, CA 94117<br>(415) 861-0600 |                      |                 |
| Phone 電話                   |                                                                                                          |                    |                                                                          |                      |                 |
| Email 電子郵件                 |                                                                                                          |                    |                                                                          |                      |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                                                   |                    |                                                                          |                      |                 |
| Specialty 專科               | Urology 泌尿科                                                                                              |                    |                                                                          |                      | Board Certified |
| Other Languages Spoken 語言  | Spanish Español, Tagalog                                                                                 |                    |                                                                          |                      |                 |
| Education 醫科學院             | Dartmouth College                                                                                        |                    |                                                                          |                      |                 |
| Hospital Affiliations 醫院聯網 | St. Mary's Medical Center, Seton Medical Center                                                          |                    |                                                                          |                      |                 |
| Hernandez, Raul, MD        |                                                                                                          | NPI #:1487721833   |                                                                          | CA License #: G67342 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                                                    | New Patients 接受新病人 |                                                                          | Yes 是                |                 |
| Address 地址                 | 1 Shrader Street #400<br>San Francisco, CA 94117<br>(415) 543-2830                                       |                    | 45 Castro Street #165<br>San Francisco, CA 94114<br>(415) 861-0600       |                      |                 |
| Phone 電話                   |                                                                                                          |                    |                                                                          |                      |                 |
| Email 電子郵件                 | rhernandez@goldengateurology.c                                                                           |                    | rhernandez@goldengateurology.com                                         |                      |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                                                   |                    |                                                                          |                      |                 |
| Specialty 專科               | Urology 泌尿科                                                                                              |                    |                                                                          |                      | Board Certified |
| Other Languages Spoken 語言  | Spanish Español, Tagalog                                                                                 |                    |                                                                          |                      |                 |
| Education 醫科學院             | University of Puerto Rico School of Medicine                                                             |                    |                                                                          |                      |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center, St. Mary's Medical Center, CPMC - St. Luke's Campus, St. Francis Memorial Hospital |                    |                                                                          |                      |                 |
| Hoang, Robert, MD          |                                                                                                          | NPI #:1407932155   |                                                                          | CA License #: C50923 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                                                    | New Patients 接受新病人 |                                                                          | Yes 是                |                 |
| Address 地址                 | 728 Pacific Avenue Suite 608<br>San Francisco, CA 94133<br>(415) 202-0260                                |                    |                                                                          |                      |                 |
| Phone 電話                   |                                                                                                          |                    |                                                                          |                      |                 |
| Email 電子郵件                 | rhoang@goldengateurology.com                                                                             |                    |                                                                          |                      |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                                                   |                    |                                                                          |                      |                 |
| Specialty 專科               | Urology 泌尿科                                                                                              |                    |                                                                          |                      | Board Certified |
| Other Languages Spoken 語言  | Mandarin 國語, Cantonese 粵語                                                                                |                    |                                                                          |                      |                 |
| Education 醫科學院             | The University of Texas Medical Branch                                                                   |                    |                                                                          |                      |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                                                                                         |                    |                                                                          |                      |                 |

# CCHP/Jade San Francisco County Specialists - 三藩市縣專科醫生

| Vascular Surgery 血管系外科       |                                                                                |                                        |                 |
|------------------------------|--------------------------------------------------------------------------------|----------------------------------------|-----------------|
| <b>Aquino, Melinda, MD</b>   |                                                                                | NPI #: 1033190970 CA License #: A94731 |                 |
| Primary Care Provider 主診醫生   | No 不是                                                                          | New Patients 接受新病人                     | Yes 是           |
| Address 地址                   | 1 Shrader Street #400*<br>San Francisco, CA 94117                              |                                        |                 |
| Phone 電話                     | (415) 752-1122                                                                 |                                        |                 |
| Email 電子郵件                   |                                                                                |                                        |                 |
| Medical Group(s):            | CCHP, Jade Health Care                                                         |                                        |                 |
| Specialty 專科                 | Vascular Surgery 血管系外科<br>General Surgery 普通外科                                 |                                        | Board Eligible  |
| Other Languages Spoken 語言    | Spanish Español, English                                                       |                                        |                 |
| Education 醫科學院               | Indiana University School of Medicine                                          |                                        |                 |
| Hospital Affiliations 醫院聯網   | Seton Medical Center, St. Mary's Medical Center, St. Francis Memorial Hospital |                                        |                 |
| <b>Nathanson, Daniel, MD</b> |                                                                                | NPI #: 1467653006 CA License #: A91712 |                 |
| Primary Care Provider 主診醫生   | No 不是                                                                          | New Patients 接受新病人                     | Yes 是           |
| Address 地址                   | 1 Daniel Burnham Court Suite 205<br>San Francisco, CA 94109                    |                                        |                 |
| Phone 電話                     | (415) 221-7056                                                                 |                                        |                 |
| Email 電子郵件                   |                                                                                |                                        |                 |
| Medical Group(s):            | Jade Health Care                                                               |                                        |                 |
| Specialty 專科                 | Vascular Surgery 血管系外科                                                         |                                        | Board Certified |
| Other Languages Spoken 語言    | Chinese, Mandarin 國語, Tagalog                                                  |                                        |                 |
| Education 醫科學院               | Penn State University College of Medicine                                      |                                        |                 |
| Hospital Affiliations 醫院聯網   | Chinese Hospital, St. Francis Memorial Hospital, UCSF Medical Center           |                                        |                 |

## Other Available Specialists (May Require Prior Authorization) :

其他可選專科醫生（可能需要事先申請）：

UCSF Medical Group Specialists / UCSF Medical Group Specialists 專科醫生

Sutter Pacific Medical Foundation Specialists / Sutter Pacific Medical Foundation Specialis 專科醫生

Stanford Medical Group Specialists / Stanford Medical Group Specialists 專科醫生

# San Francisco County Outpatient Mental Health - 三藩市縣精神健康門診醫生

| Clinical Psychology 精神 / 心理(臨床科) |                                                          |                                         |                |
|----------------------------------|----------------------------------------------------------|-----------------------------------------|----------------|
| <b>Bircher, Anja, PsyD</b>       |                                                          | NPI #:1629320338 CA License #: 29502    |                |
| Primary Care Provider 主診醫生       | No 不是                                                    | New Patients 接受新病人                      | Yes 是          |
| Address 地址                       | 1735 Mission Street<br>San Francisco, CA 94103           |                                         |                |
| Phone 電話                         | (415) 565-7667                                           |                                         |                |
| Email 電子郵件                       |                                                          |                                         |                |
| Medical Group(s):                | CCHP                                                     |                                         |                |
| Specialty 專科                     | Clinical Psychology 精神 / 心理(臨床科)                         |                                         | Board Eligible |
| Other Languages Spoken 語言        | Spanish Español                                          |                                         |                |
| Education 醫科學院                   |                                                          |                                         |                |
| Hospital Affiliations 醫院聯網       |                                                          |                                         |                |
| <b>De La Cerna, Felice, PsyD</b> |                                                          | NPI #:1053544239 CA License #: 29246    |                |
| Primary Care Provider 主診醫生       | No 不是                                                    | New Patients 接受新病人                      | Yes 是          |
| Address 地址                       | 1735 Mission Street<br>San Francisco, CA 94103           |                                         |                |
| Phone 電話                         | (415) 565-7667                                           |                                         |                |
| Email 電子郵件                       |                                                          |                                         |                |
| Medical Group(s):                | CCHP                                                     |                                         |                |
| Specialty 專科                     | Clinical Psychology 精神 / 心理(臨床科)                         |                                         | Board Eligible |
| Other Languages Spoken 語言        |                                                          |                                         |                |
| Education 醫科學院                   | Alliant International University                         |                                         |                |
| Hospital Affiliations 醫院聯網       |                                                          |                                         |                |
| <b>Guo, Hong, PsyD</b>           |                                                          | NPI #:1407063092 CA License #: PSY26918 |                |
| Primary Care Provider 主診醫生       | No 不是                                                    | New Patients 接受新病人                      | Yes 是          |
| Address 地址                       | 870 Market Street, Suite 1011<br>San Francisco, CA 94102 |                                         |                |
| Phone 電話                         | (415) 351-9467                                           |                                         |                |
| Email 電子郵件                       | drhongguo.psyd@yahoo.com                                 |                                         |                |
| Medical Group(s):                | Jade Health Care                                         |                                         |                |
| Specialty 專科                     | Clinical Psychology 精神 / 心理(臨床科)                         |                                         | Board Eligible |
| Other Languages Spoken 語言        |                                                          |                                         |                |
| Education 醫科學院                   | Wright Institute                                         |                                         |                |
| Hospital Affiliations 醫院聯網       |                                                          |                                         |                |

# San Francisco County Outpatient Mental Health - 三藩市縣精神健康門診醫生

| Licensed Clinical Social Worker 心理輔導 |                                                       |                                      |                |
|--------------------------------------|-------------------------------------------------------|--------------------------------------|----------------|
| <b>Craighead, Kenneth, LCSW</b>      |                                                       | NPI #:1043539117 CA License #: 64419 |                |
| Primary Care Provider 主診醫生           | No 不是                                                 | New Patients 接受新病人                   | Yes 是          |
| Address 地址                           | 330 Ellis Street Suite 600<br>San Francisco, CA 94102 |                                      |                |
| Phone 電話                             | (415) 674-6140                                        |                                      |                |
| Email 電子郵件                           |                                                       |                                      |                |
| Medical Group(s):                    | CCHP                                                  |                                      |                |
| Specialty 專科                         | Licensed Clinical Social Worker 心理輔導                  |                                      | Board Eligible |
| Other Languages Spoken 語言            |                                                       |                                      |                |
| Education 醫科學院                       | University of California, Berkeley                    |                                      |                |
| Hospital Affiliations 醫院聯網           |                                                       |                                      |                |
| <b>Dressel, Donald, LCSW</b>         |                                                       | NPI #:1275058869 CA License #: 80339 |                |
| Primary Care Provider 主診醫生           | No 不是                                                 | New Patients 接受新病人                   | Yes 是          |
| Address 地址                           | 558 Clayton Street<br>San Francisco, CA 94117         |                                      |                |
| Phone 電話                             | (415) 746-1950                                        |                                      |                |
| Email 電子郵件                           |                                                       |                                      |                |
| Medical Group(s):                    | CCHP                                                  |                                      |                |
| Specialty 專科                         | Licensed Clinical Social Worker 心理輔導                  |                                      | Board Eligible |
| Other Languages Spoken 語言            |                                                       |                                      |                |
| Education 醫科學院                       |                                                       |                                      |                |
| Hospital Affiliations 醫院聯網           |                                                       |                                      |                |
| <b>Willott, Sara, LCSW</b>           |                                                       | NPI #:1437240579 CA License #: 28342 |                |
| Primary Care Provider 主診醫生           | No 不是                                                 | New Patients 接受新病人                   | Yes 是          |
| Address 地址                           | 1735 Mission Street<br>San Francisco, CA 94103        |                                      |                |
| Phone 電話                             | (415) 565-7667                                        |                                      |                |
| Email 電子郵件                           |                                                       |                                      |                |
| Medical Group(s):                    | CCHP                                                  |                                      |                |
| Specialty 專科                         | Licensed Clinical Social Worker 心理輔導                  |                                      | Board Eligible |
| Other Languages Spoken 語言            |                                                       |                                      |                |
| Education 醫科學院                       | Smith College School for Social Work                  |                                      |                |
| Hospital Affiliations 醫院聯網           |                                                       |                                      |                |

# San Francisco County Outpatient Mental Health - 三藩市縣精神健康門診醫生

| Licensed Clinical Social Worker 心理輔導 |                                                 |                                           |                |
|--------------------------------------|-------------------------------------------------|-------------------------------------------|----------------|
| Wu, Rufina, LCSW                     |                                                 | NPI #: 1497827026 CA License #: LCSW28834 |                |
| Primary Care Provider 主診醫生           | No 不是                                           | New Patients 接受新病人                        | Yes 是          |
| Address 地址                           | 5028 Geary Boulevard<br>San Francisco, CA 94118 |                                           |                |
| Phone 電話                             | (415) 967-3613                                  |                                           |                |
| Email 電子郵件                           |                                                 |                                           |                |
| Medical Group(s):                    | CCHP                                            |                                           |                |
| Specialty 專科                         | Licensed Clinical Social Worker 心理輔導            |                                           | Board Eligible |
| Other Languages Spoken 語言            | Cantonese 粵語, Mandarin 國語                       |                                           |                |
| Education 醫科學院                       | University of California, Berkeley              |                                           |                |
| Hospital Affiliations 醫院聯網           |                                                 |                                           |                |

# San Francisco County Outpatient Mental Health - 三藩市縣精神健康門診醫生

| Marriage and Family Therapist 婚姻及家庭治療師 |                                                                               |                                          |                        |
|----------------------------------------|-------------------------------------------------------------------------------|------------------------------------------|------------------------|
| <b>Mak, Stella, LMFT</b>               |                                                                               | NPI #:1528375102 CA License #: MFT93815  |                        |
| Primary Care Provider 主診醫生             | No 不是                                                                         | New Patients 接受新病人                       | Yes 是                  |
| Address 地址                             | 2211 Post Street Suite 401<br>San Francisco, CA 94115                         |                                          |                        |
| Phone 電話                               | (209) 418-3234                                                                |                                          |                        |
| Email 電子郵件                             |                                                                               |                                          |                        |
| Medical Group(s):                      | CCHP                                                                          |                                          |                        |
| Specialty 專科                           | Marriage and Family Therapist 婚姻及家庭治療師                                        |                                          | Board Eligible         |
| Other Languages Spoken 語言              | Cantonese 粵語, Mandarin 國語                                                     |                                          |                        |
| Education 醫科學院                         |                                                                               |                                          |                        |
| Hospital Affiliations 醫院聯網             |                                                                               |                                          |                        |
| <b>Poon, Henry, PhD, LMFT</b>          |                                                                               | NPI #:1427269422 CA License #: 35772     |                        |
| Primary Care Provider 主診醫生             | No 不是                                                                         | New Patients 接受新病人                       | Yes 是                  |
| Address 地址                             | 845 Jackson Street Suite B1*<br>San Francisco, CA 94133                       |                                          |                        |
| Phone 電話                               | (415) 677-2370                                                                |                                          |                        |
| Email 電子郵件                             |                                                                               |                                          |                        |
| Medical Group(s):                      | CCHP, Jade Health Care                                                        |                                          |                        |
| Specialty 專科                           | Marriage and Family Therapist 婚姻及家庭治療師                                        |                                          | Board Eligible         |
| Other Languages Spoken 語言              |                                                                               |                                          |                        |
| Education 醫科學院                         | California Institute of Integral Studies                                      |                                          |                        |
| Hospital Affiliations 醫院聯網             |                                                                               |                                          |                        |
| <b>Wong, Diana, PsyD, LMFT</b>         |                                                                               | NPI #:1811072424 CA License #: LMFT43649 |                        |
| Primary Care Provider 主診醫生             | No 不是                                                                         | New Patients 接受新病人                       | Yes 是                  |
| Address 地址                             | 615 John Muir Drive D617<br>San Francisco, CA 94132                           |                                          |                        |
| Phone 電話                               | (415) 971-8213                                                                |                                          | Telehealth Only 只限遠程醫療 |
| Email 電子郵件                             | dianalisawong@gmail.com                                                       |                                          |                        |
| Medical Group(s):                      | Jade Health Care                                                              |                                          |                        |
| Specialty 專科                           | Marriage and Family Therapist 婚姻及家庭治療師<br>Psychologist 精神 / 心理                |                                          | Board Eligible         |
| Other Languages Spoken 語言              |                                                                               |                                          |                        |
| Education 醫科學院                         | Alliant International University - California School of Profession Psychology |                                          |                        |
| Hospital Affiliations 醫院聯網             |                                                                               |                                          |                        |

# San Francisco County Outpatient Mental Health - 三藩市縣精神健康門診醫生

| Mental Health 精神健康                                             |                                                |                                          |                |
|----------------------------------------------------------------|------------------------------------------------|------------------------------------------|----------------|
| <b>Asian American Recovery Services - HealthRight 360</b>      |                                                | NPI #:1952493199 CA License #: 380020AN  |                |
| Primary Care Provider 主診醫生                                     | No 不是                                          | New Patients 接受新病人                       | Yes 是          |
| Address 地址                                                     | 2024 Hayes Street<br>San Francisco, CA 94117   |                                          |                |
| Phone 電話                                                       | (415) 750-5111                                 |                                          |                |
| Email 電子郵件                                                     |                                                |                                          |                |
| Medical Group(s):                                              | CCHP, Jade Health Care                         |                                          |                |
| Specialty 專科                                                   | Mental Health 精神健康                             |                                          | Board Eligible |
| Other Languages Spoken 語言                                      |                                                |                                          |                |
| Education 醫科學院                                                 |                                                |                                          |                |
| Hospital Affiliations 醫院聯網                                     |                                                |                                          |                |
| <b>Asian Family Institute - RAMS</b>                           |                                                | NPI #:1548319544 CA License #: 4601      |                |
| Primary Care Provider 主診醫生                                     | No 不是                                          | New Patients 接受新病人                       | Yes 是          |
| Address 地址                                                     | 4020 Balboa Street<br>San Francisco, CA 94121  |                                          |                |
| Phone 電話                                                       | (415) 668-5998                                 |                                          |                |
| Email 電子郵件                                                     |                                                |                                          |                |
| Medical Group(s):                                              | CCHP, Jade Health Care                         |                                          |                |
| Specialty 專科                                                   | Mental Health 精神健康                             |                                          | Board Eligible |
| Other Languages Spoken 語言                                      |                                                |                                          |                |
| Education 醫科學院                                                 |                                                |                                          |                |
| Hospital Affiliations 醫院聯網                                     |                                                |                                          |                |
| <b>Haight Ashbury Integrated Care Center - HealthRight 360</b> |                                                | NPI #:1730363151 CA License #: 550000486 |                |
| Primary Care Provider 主診醫生                                     | No 不是                                          | New Patients 接受新病人                       | Yes 是          |
| Address 地址                                                     | 1563 Mission Street<br>San Francisco, CA 94103 |                                          |                |
| Phone 電話                                                       | (415) 746-1940                                 |                                          |                |
| Email 電子郵件                                                     |                                                |                                          |                |
| Medical Group(s):                                              | CCHP, Jade Health Care                         |                                          |                |
| Specialty 專科                                                   | Mental Health 精神健康                             |                                          | Board Eligible |
| Other Languages Spoken 語言                                      |                                                |                                          |                |
| Education 醫科學院                                                 |                                                |                                          |                |
| Hospital Affiliations 醫院聯網                                     |                                                |                                          |                |

# San Francisco County Outpatient Mental Health - 三藩市縣精神健康門診醫生

| Mental Health 精神健康                                     |                                                |                                          |                |
|--------------------------------------------------------|------------------------------------------------|------------------------------------------|----------------|
| <b>Haight Ashbury Medical Clinic - HealthRight 360</b> |                                                | NPI #:1760427843 CA License #: 220000030 |                |
| Primary Care Provider 主診醫生                             | No 不是                                          | New Patients 接受新病人                       | Yes 是          |
| Address 地址                                             | 558 Clayton Street<br>San Francisco, CA 94117  |                                          |                |
| Phone 電話                                               | (415) 746-1950                                 |                                          |                |
| Email 電子郵件                                             |                                                |                                          |                |
| Medical Group(s):                                      | CCHP, Jade Health Care                         |                                          |                |
| Specialty 專科                                           | Mental Health 精神健康                             |                                          | Board Eligible |
| Other Languages Spoken 語言                              |                                                |                                          |                |
| Education 醫科學院                                         |                                                |                                          |                |
| Hospital Affiliations 醫院聯網                             |                                                |                                          |                |
| <b>Lyon Martin Health Services - HealthRight 360</b>   |                                                | NPI #:1568556363 CA License #: 550000486 |                |
| Primary Care Provider 主診醫生                             | No 不是                                          | New Patients 接受新病人                       | Yes 是          |
| Address 地址                                             | 1735 Mission Street<br>San Francisco, CA 94103 |                                          |                |
| Phone 電話                                               | (415) 565-7667                                 |                                          |                |
| Email 電子郵件                                             |                                                |                                          |                |
| Medical Group(s):                                      | CCHP, Jade Health Care                         |                                          |                |
| Specialty 專科                                           | Mental Health 精神健康                             |                                          | Board Eligible |
| Other Languages Spoken 語言                              |                                                |                                          |                |
| Education 醫科學院                                         |                                                |                                          |                |
| Hospital Affiliations 醫院聯網                             |                                                |                                          |                |
| <b>Tenderloin Health Services - HealthRight 360</b>    |                                                | NPI #:1447279310 CA License #: 220000473 |                |
| Primary Care Provider 主診醫生                             | No 不是                                          | New Patients 接受新病人                       | Yes 是          |
| Address 地址                                             | 330 Ellis Street<br>San Francisco, CA 94102    |                                          |                |
| Phone 電話                                               | (415) 674-6140                                 |                                          |                |
| Email 電子郵件                                             |                                                |                                          |                |
| Medical Group(s):                                      | CCHP, Jade Health Care                         |                                          |                |
| Specialty 專科                                           | Mental Health 精神健康                             |                                          | Board Eligible |
| Other Languages Spoken 語言                              |                                                |                                          |                |
| Education 醫科學院                                         |                                                |                                          |                |
| Hospital Affiliations 醫院聯網                             |                                                |                                          |                |

# San Francisco County Outpatient Mental Health - 三藩市縣精神健康門診醫生

| Mental Health 精神健康             |                                                     |                                          |                |
|--------------------------------|-----------------------------------------------------|------------------------------------------|----------------|
| Walden House - HealthRight 360 |                                                     | NPI #:1700920345 CA License #: 380016ALN |                |
| Primary Care Provider 主診醫生     | No 不是                                               | New Patients 接受新病人                       | Yes 是          |
| Address 地址                     | 815 Buena Vista Ave West<br>San Francisco, CA 94117 |                                          |                |
| Phone 電話                       | (415) 762-3705                                      |                                          |                |
| Email 電子郵件                     |                                                     |                                          |                |
| Medical Group(s):              | CCHP, Jade Health Care                              |                                          |                |
| Specialty 專科                   | Mental Health 精神健康                                  |                                          | Board Eligible |
| Other Languages Spoken 語言      |                                                     |                                          |                |
| Education 醫科學院                 |                                                     |                                          |                |
| Hospital Affiliations 醫院聯網     |                                                     |                                          |                |

# San Francisco County Outpatient Mental Health - 三藩市縣精神健康門診醫生

## Psychiatry 精神病科

| Comprehensive Psychiatric Services |                                                    | NPI #:1184785834                       |                                                | CA License #: 2688 |  |
|------------------------------------|----------------------------------------------------|----------------------------------------|------------------------------------------------|--------------------|--|
| Primary Care Provider 主診醫生         | No 不是                                              | New Patients 接受新病人                     |                                                | Yes 是              |  |
| Address 地址                         | 2211 Post Street, #200*<br>San Francisco, CA 94115 |                                        |                                                |                    |  |
| Phone 電話                           | (415) 928-1221                                     |                                        |                                                |                    |  |
| Email 電子郵件                         |                                                    |                                        |                                                |                    |  |
| Medical Group(s):                  | CCHP, Jade Health Care                             |                                        |                                                |                    |  |
| Specialty 專科                       | Psychiatry 精神病科                                    |                                        |                                                | Board Eligible     |  |
| Other Languages Spoken 語言          |                                                    |                                        |                                                |                    |  |
| Education 醫科學院                     |                                                    |                                        |                                                |                    |  |
| Hospital Affiliations 醫院聯網         |                                                    |                                        |                                                |                    |  |
| Gaw, Albert, MD                    |                                                    | NPI #:1376965277 CA License #: A37104  |                                                |                    |  |
| Primary Care Provider 主診醫生         | No 不是                                              | New Patients 接受新病人                     |                                                | Yes 是              |  |
| Address 地址                         | 845 Jackson Street B1*<br>San Francisco, CA 94133  |                                        |                                                |                    |  |
| Phone 電話                           | (415) 677-2370                                     |                                        |                                                |                    |  |
| Email 電子郵件                         |                                                    |                                        |                                                |                    |  |
| Medical Group(s):                  | CCHP, Jade Health Care                             |                                        |                                                |                    |  |
| Specialty 專科                       | Psychiatry 精神病科                                    |                                        |                                                | Board Certified    |  |
| Other Languages Spoken 語言          |                                                    |                                        |                                                |                    |  |
| Education 醫科學院                     | University of East, Magsaysay College              |                                        |                                                |                    |  |
| Hospital Affiliations 醫院聯網         |                                                    |                                        |                                                |                    |  |
| Koenig, Jessica, MD                |                                                    | NPI #:1083050967 CA License #: A149210 |                                                |                    |  |
| Primary Care Provider 主診醫生         | No 不是                                              | New Patients 接受新病人                     |                                                | Yes 是              |  |
| Address 地址                         | 558 Clayton Street<br>San Francisco, CA 94117      |                                        | 1563 Mission Street<br>San Francisco, CA 94103 |                    |  |
| Phone 電話                           | (415) 746-1950                                     |                                        | (415) 746-1950                                 |                    |  |
| Email 電子郵件                         |                                                    |                                        |                                                |                    |  |
| Medical Group(s):                  | CCHP                                               |                                        |                                                |                    |  |
| Specialty 專科                       | Psychiatry 精神病科                                    |                                        |                                                | Board Certified    |  |
| Other Languages Spoken 語言          |                                                    |                                        |                                                |                    |  |
| Education 醫科學院                     | University of Texas Medical Branch at Galveston    |                                        |                                                |                    |  |
| Hospital Affiliations 醫院聯網         |                                                    |                                        |                                                |                    |  |

# San Francisco County Outpatient Mental Health - 三藩市縣精神健康門診醫生

| Psychiatry 精神病科            |                                                   |                                        |                 |
|----------------------------|---------------------------------------------------|----------------------------------------|-----------------|
| <b>Man, Wenyan, MD</b>     |                                                   | NPI #:1932455854 CA License #: A126714 |                 |
| Primary Care Provider 主診醫生 | No 不是                                             | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 2211 Post Street #200*<br>San Francisco, CA 94115 |                                        |                 |
| Phone 電話                   | (415) 928-1221                                    |                                        |                 |
| Email 電子郵件                 |                                                   |                                        |                 |
| Medical Group(s):          | CCHP, Jade Health Care                            |                                        |                 |
| Specialty 專科               | Psychiatry 精神病科                                   |                                        | Board Eligible  |
| Other Languages Spoken 語言  |                                                   |                                        |                 |
| Education 醫科學院             | UC San Diego                                      |                                        |                 |
| Hospital Affiliations 醫院聯網 |                                                   |                                        |                 |
| <b>Zuberi, Mansoor, MD</b> |                                                   | NPI #:1972666568 CA License #: A72551  |                 |
| Primary Care Provider 主診醫生 | No 不是                                             | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 2211 Post Street #200*<br>San Francisco, CA 94115 |                                        |                 |
| Phone 電話                   | (415) 928-1221                                    |                                        |                 |
| Email 電子郵件                 |                                                   |                                        |                 |
| Medical Group(s):          | CCHP                                              |                                        |                 |
| Specialty 專科               | Psychiatry 精神病科                                   |                                        | Board Certified |
| Other Languages Spoken 語言  |                                                   |                                        |                 |
| Education 醫科學院             | Sindit Medical College                            |                                        |                 |
| Hospital Affiliations 醫院聯網 |                                                   |                                        |                 |

# San Francisco County Outpatient Mental Health - 三藩市縣精神健康門診醫生

| Psychologist 精神 / 心理       |                                                         |                                         |                |
|----------------------------|---------------------------------------------------------|-----------------------------------------|----------------|
| <b>Chan, Flora, PsyD</b>   |                                                         | NPI #:1598997686 CA License #: PSY26219 |                |
| Primary Care Provider 主診醫生 | No 不是                                                   | New Patients 接受新病人                      | Yes 是          |
| Address 地址                 | 2211 Post Street Suite 401<br>San Francisco, CA 94115   |                                         |                |
| Phone 電話                   | (415) 579-1899                                          |                                         |                |
| Email 電子郵件                 |                                                         |                                         |                |
| Medical Group(s):          | CCHP, Jade Health Care                                  |                                         |                |
| Specialty 專科               | Psychologist 精神 / 心理                                    |                                         | Board Eligible |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                               |                                         |                |
| Education 醫科學院             |                                                         |                                         |                |
| Hospital Affiliations 醫院聯網 |                                                         |                                         |                |
| <b>Lai, David, PhD</b>     |                                                         | NPI #:1659417012 CA License #: PSY17205 |                |
| Primary Care Provider 主診醫生 | No 不是                                                   | New Patients 接受新病人                      | Yes 是          |
| Address 地址                 | 582 Market Street Suite 1603<br>San Francisco, CA 94104 |                                         |                |
| Phone 電話                   | (415) 608-7092                                          |                                         |                |
| Email 電子郵件                 |                                                         |                                         |                |
| Medical Group(s):          | Jade Health Care                                        |                                         |                |
| Specialty 專科               | Psychologist 精神 / 心理                                    |                                         | Board Eligible |
| Other Languages Spoken 語言  | Cantonese 粵語                                            |                                         |                |
| Education 醫科學院             | Alliant International University                        |                                         |                |
| Hospital Affiliations 醫院聯網 |                                                         |                                         |                |
| <b>Orgel, Ling, PhD 陳琳</b> |                                                         | NPI #:1225005283 CA License #: PSY17218 |                |
| Primary Care Provider 主診醫生 | No 不是                                                   | New Patients 接受新病人                      | Yes 是          |
| Address 地址                 | 2485 Clay Street Suite 103<br>San Francisco, CA 94115   |                                         |                |
| Phone 電話                   | (415) 775-5998                                          |                                         |                |
| Email 電子郵件                 |                                                         |                                         |                |
| Medical Group(s):          | CCHP, Jade Health Care                                  |                                         |                |
| Specialty 專科               | Psychologist 精神 / 心理                                    |                                         | Board Eligible |
| Other Languages Spoken 語言  | Mandarin 國語                                             |                                         |                |
| Education 醫科學院             | California School of Professional Psychology            |                                         |                |
| Hospital Affiliations 醫院聯網 |                                                         |                                         |                |

# San Francisco County Outpatient Mental Health - 三藩市縣精神健康門診醫生

| Psychologist 精神 / 心理           |                                                                               |                                               |                        |
|--------------------------------|-------------------------------------------------------------------------------|-----------------------------------------------|------------------------|
| <b>Wai, Christine, PsyD</b>    |                                                                               | NPI #:1578972808 CA License #: PSY28203       |                        |
| Primary Care Provider 主診醫生     | No 不是                                                                         | New Patients 接受新病人                            | Yes 是                  |
| Address 地址                     | 4020 Balboa Street<br>San Francisco, CA 94121                                 |                                               |                        |
| Phone 電話                       | (415) 668-5998                                                                |                                               |                        |
| Email 電子郵件                     |                                                                               |                                               |                        |
| Medical Group(s):              | CCHP                                                                          |                                               |                        |
| Specialty 專科                   | Psychologist 精神 / 心理                                                          |                                               | Board Eligible         |
| Other Languages Spoken 語言      | Cantonese 粵語, Mandarin 國語                                                     |                                               |                        |
| Education 醫科學院                 |                                                                               |                                               |                        |
| Hospital Affiliations 醫院聯網     |                                                                               |                                               |                        |
| <b>Wong, Diana, PsyD, LMFT</b> |                                                                               | NPI #:1811072424 CA License #: LMFT43649      |                        |
| Primary Care Provider 主診醫生     | No 不是                                                                         | New Patients 接受新病人                            | Yes 是                  |
| Address 地址                     | 615 John Muir Drive D617<br>San Francisco, CA 94132                           |                                               |                        |
| Phone 電話                       | (415) 971-8213                                                                |                                               | Telehealth Only 只限遠程醫療 |
| Email 電子郵件                     | dianalisawong@gmail.com                                                       |                                               |                        |
| Medical Group(s):              | Jade Health Care                                                              |                                               |                        |
| Specialty 專科                   | Psychologist 精神 / 心理<br>Marriage and Family Therapist 婚姻及家庭治療師                |                                               | Board Eligible         |
| Other Languages Spoken 語言      |                                                                               |                                               |                        |
| Education 醫科學院                 | Alliant International University - California School of Profession Psychology |                                               |                        |
| Hospital Affiliations 醫院聯網     |                                                                               |                                               |                        |
| <b>Yu, Bella, PSYD</b>         |                                                                               | NPI #:1073687778 CA License #: PSY23652       |                        |
| Primary Care Provider 主診醫生     | No 不是                                                                         | New Patients 接受新病人                            | Yes 是                  |
| Address 地址                     | 870 Market Street Suite 744<br>San Francisco, CA 94102                        | 3626 Balboa Street<br>San Francisco, CA 94121 |                        |
| Phone 電話                       | (415) 205-0456                                                                | (415) 668-5955                                |                        |
| Email 電子郵件                     |                                                                               |                                               |                        |
| Medical Group(s):              | CCHP                                                                          |                                               |                        |
| Specialty 專科                   | Psychologist 精神 / 心理                                                          |                                               | Board Eligible         |
| Other Languages Spoken 語言      | Mandarin 國語, Cantonese 粵語                                                     |                                               |                        |
| Education 醫科學院                 | The Wright Institute                                                          |                                               |                        |
| Hospital Affiliations 醫院聯網     |                                                                               |                                               |                        |

# San Francisco County Outpatient Mental Health - 三藩市縣精神健康門診醫生

| Psychologist 精神 / 心理       |                                               |                                         |                |
|----------------------------|-----------------------------------------------|-----------------------------------------|----------------|
| Zozulinsky, Anna, PHD      |                                               | NPI #:1730435397 CA License #: PSY28809 |                |
| Primary Care Provider 主診醫生 | No 不是                                         | New Patients 接受新病人                      | Yes 是          |
| Address 地址                 | 4020 Balboa Street<br>San Francisco, CA 94121 |                                         |                |
| Phone 電話                   | (415) 668-5998                                |                                         |                |
| Email 電子郵件                 |                                               |                                         |                |
| Medical Group(s):          | CCHP                                          |                                         |                |
| Specialty 專科               | Psychologist 精神 / 心理                          |                                         | Board Eligible |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                     |                                         |                |
| Education 醫科學院             | Palo Alto Univeristy                          |                                         |                |
| Hospital Affiliations 醫院聯網 |                                               |                                         |                |

# CCHP/Jade San Mateo County PCPs - 聖馬刁縣主治醫生

| <b>Arcilla, Angelo, MD</b>                    |                                                       | NPI #:1821093394 CA License #: A48557    |                |
|-----------------------------------------------|-------------------------------------------------------|------------------------------------------|----------------|
| Primary Care Provider 主診醫生                    | Yes 是                                                 | New Patients 接受新病人                       | Yes 是          |
| Address 地址                                    | 1800 Sullivan Avenue Suite 101<br>Daly City, CA 94015 |                                          |                |
| Phone 電話                                      | (650) 994-0459                                        |                                          |                |
| Email 電子郵件                                    |                                                       |                                          |                |
| Medical Group(s):                             | CCHP                                                  |                                          |                |
| Specialty 專科                                  | General Practice 一般家庭科                                |                                          | Board Eligible |
| Other Languages Spoken 語言                     | Tagalog, Spanish Español                              |                                          |                |
| Education 醫科學院                                | Lyceum-Northwestern University, Philippines           |                                          |                |
| Hospital Affiliations 醫院聯網                    | CPMC - St. Luke's Campus, Seton Medical Center        |                                          |                |
| <b>Carrillo, Lornalyn, MD</b>                 |                                                       | NPI #:1558383844 CA License #: A51743    |                |
| Primary Care Provider 主診醫生                    | Yes 是                                                 | New Patients 接受新病人                       | Yes 是          |
| Address 地址                                    | 1800 Sullivan Avenue Suite 101<br>Daly City, CA 94015 |                                          |                |
| Phone 電話                                      | (650) 994-0459                                        |                                          |                |
| Email 電子郵件                                    |                                                       |                                          |                |
| Medical Group(s):                             | CCHP                                                  |                                          |                |
| Specialty 專科                                  | Family Medicine 家庭科                                   |                                          | Board Eligible |
| Other Languages Spoken 語言                     | Tagalog, Spanish Español                              |                                          |                |
| Education 醫科學院                                | Far Eastern University, Philippines                   |                                          |                |
| Hospital Affiliations 醫院聯網                    | CPMC - St. Luke's Campus, Seton Medical Center        |                                          |                |
| <b>Gellert Health Services Gellert 華康醫務中心</b> |                                                       | NPI #:1891150587 CA License #: 550003393 |                |
| Primary Care Provider 主診醫生                    | Yes 是                                                 | New Patients 接受新病人                       | Yes 是          |
| Address 地址                                    | 386 Gellert Boulevard<br>Daly City, CA 94015          |                                          |                |
| Phone 電話                                      | (650) 761-3500                                        |                                          |                |
| Email 電子郵件                                    |                                                       |                                          |                |
| Medical Group(s):                             | CCHP, Jade Health Care                                |                                          |                |
| Specialty 專科                                  | Primary Care Clinic 醫療護理診所                            |                                          |                |
| Other Languages Spoken 語言                     | Cantonese 粵語, Mandarin 國語                             |                                          |                |
| Education 醫科學院                                |                                                       |                                          |                |
| Hospital Affiliations 醫院聯網                    |                                                       |                                          |                |

# CCHP/Jade San Mateo County PCPs - 聖馬刁縣主治醫生

| Ho, Dominic, MD            |                                                          | NPI #:1881610582 CA License #: G52943 |                 |
|----------------------------|----------------------------------------------------------|---------------------------------------|-----------------|
| Primary Care Provider 主診醫生 | Yes 是                                                    | New Patients 接受新病人                    | Yes 是           |
| Address 地址                 | 101 South San Mateo Drive #302<br>San Mateo, CA 94401    |                                       |                 |
| Phone 電話                   | (650) 342-0663                                           |                                       |                 |
| Email 電子郵件                 |                                                          |                                       |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                   |                                       |                 |
| Specialty 專科               | Internal Medicine 內科                                     |                                       | Board Eligible  |
| Other Languages Spoken 語言  | Tagalog, Cantonese 粵語, Mandarin 國語                       |                                       |                 |
| Education 醫科學院             | Harvard Medical School                                   |                                       |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center, Mills-Peninsula Medical Center     |                                       |                 |
| Huynh, Thanh, MD           |                                                          | NPI #:1962463026 CA License #: A93650 |                 |
| Primary Care Provider 主診醫生 | Yes 是                                                    | New Patients 接受新病人                    | Yes 是           |
| Address 地址                 | 1001 Broadway Avenue Suite 302<br>Millbrae, CA 94030     |                                       |                 |
| Phone 電話                   | (650) 689-5431                                           |                                       |                 |
| Email 電子郵件                 |                                                          |                                       |                 |
| Medical Group(s):          | Jade Health Care                                         |                                       |                 |
| Specialty 專科               | Family Medicine 家庭科                                      |                                       | Board Eligible  |
| Other Languages Spoken 語言  | Vietnamese 越南語, Cantonese 粵語                             |                                       |                 |
| Education 醫科學院             | Ross Univerisity, School of Medicine                     |                                       |                 |
| Hospital Affiliations 醫院聯網 |                                                          |                                       |                 |
| Jain, Rashmi, MD           |                                                          | NPI #:1346444577 CA License #: C42911 |                 |
| Primary Care Provider 主診醫生 | Yes 是                                                    | New Patients 接受新病人                    | Yes 是           |
| Address 地址                 | 1828 El Camino Real Suite 407<br>Burlingame, CA 94010    |                                       |                 |
| Phone 電話                   | (650) 777-0050                                           |                                       |                 |
| Email 電子郵件                 |                                                          |                                       |                 |
| Medical Group(s):          | Jade Health Care                                         |                                       |                 |
| Specialty 專科               | Internal Medicine 內科<br>Nephrology 腎科                    |                                       | Board Certified |
| Other Languages Spoken 語言  | Spanish Español                                          |                                       |                 |
| Education 醫科學院             | Aligarh Muslim University, Aligarh, Uttar Pradesh, India |                                       |                 |
| Hospital Affiliations 醫院聯網 | Mills-Peninsula Medical Center                           |                                       |                 |

# CCHP/Jade San Mateo County PCPs - 聖馬刁縣主治醫生

| Kanen, Nani, MD            |                                                        | NPI #: 1548358435 CA License #: A77565 |                |
|----------------------------|--------------------------------------------------------|----------------------------------------|----------------|
| Primary Care Provider 主診醫生 | Yes 是                                                  | New Patients 接受新病人                     | Yes 是          |
| Address 地址                 | 1838 El Camino Real Suite 100<br>Burlingame, CA 94010  |                                        |                |
| Phone 電話                   | (650) 697-0361                                         |                                        |                |
| Email 電子郵件                 | nanikanenmd@sbcglobal.net                              |                                        |                |
| Medical Group(s):          | CCHP, Jade Health Care                                 |                                        |                |
| Specialty 專科               | Internal Medicine 內科                                   |                                        | Board Eligible |
| Other Languages Spoken 語言  | Spanish Español                                        |                                        |                |
| Education 醫科學院             | Tbilisi State Medical University                       |                                        |                |
| Hospital Affiliations 醫院聯網 | Mills-Peninsula Medical Center                         |                                        |                |
| Kay, Lynda, MD 李王珠         |                                                        | NPI #: 1740320183 CA License #: A52407 |                |
| Primary Care Provider 主診醫生 | Yes 是                                                  | New Patients 接受新病人                     | Yes 是          |
| Address 地址                 | 1828 El Camino Real Suite 802<br>Burlingame, CA 94010  |                                        |                |
| Phone 電話                   | (650) 689-5587                                         |                                        |                |
| Email 電子郵件                 | llkaymd1828@gmail.com                                  |                                        |                |
| Medical Group(s):          | Jade Health Care                                       |                                        |                |
| Specialty 專科               | Family Medicine 家庭科                                    |                                        | Board Eligible |
| Other Languages Spoken 語言  | Burmese မြန်မာစာ, Taiwanese 台語, Mandarin 國語, English   |                                        |                |
| Education 醫科學院             | Insititute of Medicine 2                               |                                        |                |
| Hospital Affiliations 醫院聯網 | Mills-Peninsula Medical Center                         |                                        |                |
| Kini, Divya, MD            |                                                        | NPI #: 1649354309 CA License #: A74472 |                |
| Primary Care Provider 主診醫生 | Yes 是                                                  | New Patients 接受新病人                     | Yes 是          |
| Address 地址                 | 1500 Southgate Avenue Suite 204<br>Daly City, CA 94015 |                                        |                |
| Phone 電話                   | (650) 755-2192                                         |                                        |                |
| Email 電子郵件                 |                                                        |                                        |                |
| Medical Group(s):          | Jade Health Care                                       |                                        |                |
| Specialty 專科               | Internal Medicine 內科                                   |                                        | Board Eligible |
| Other Languages Spoken 語言  | Tagalog                                                |                                        |                |
| Education 醫科學院             | Kasturba Medical College                               |                                        |                |
| Hospital Affiliations 醫院聯網 | Seton Medical Center                                   |                                        |                |

# CCHP/Jade San Mateo County PCPs - 聖馬刁縣主治醫生

| <b>Ko, Edward, MD 高景行</b>     |                                                                            | NPI #:1841364841 CA License #: A61149   |                 |
|-------------------------------|----------------------------------------------------------------------------|-----------------------------------------|-----------------|
| Primary Care Provider 主診醫生    | Yes 是                                                                      | New Patients 接受新病人                      | Yes 是           |
| Address 地址                    | 1750 El Camino Real Suite 301*<br>Burlingame, CA 94010                     |                                         |                 |
| Phone 電話                      | (415) 956-9823                                                             |                                         |                 |
| Email 電子郵件                    |                                                                            |                                         |                 |
| Medical Group(s):             | CCHP, Jade Health Care                                                     |                                         |                 |
| Specialty 專科                  | Internal Medicine 內科                                                       |                                         | Board Certified |
| Other Languages Spoken 語言     | Cantonese 粵語, Mandarin 國語, Shanghainese 上海話                                |                                         |                 |
| Education 醫科學院                | Harvard University                                                         |                                         |                 |
| Hospital Affiliations 醫院聯網    | Chinese Hospital, St. Mary's Medical Center, St. Francis Memorial Hospital |                                         |                 |
| <b>Ling, Jie, MD, PhD 凌潔</b>  |                                                                            | NPI #:1003187766 CA License #: A130461  |                 |
| Primary Care Provider 主診醫生    | Yes 是                                                                      | New Patients 接受新病人                      | Yes 是           |
| Address 地址                    | 1828 El Camino Real Suite 405<br>Burlingame, CA 94010                      |                                         |                 |
| Phone 電話                      | (650) 651-7175                                                             |                                         |                 |
| Email 電子郵件                    | dr.jennyling@gmail.com                                                     |                                         |                 |
| Medical Group(s):             | CCHP, Jade Health Care                                                     |                                         |                 |
| Specialty 專科                  | Internal Medicine 內科<br>Acupuncture 針灸                                     |                                         | Board Certified |
| Other Languages Spoken 語言     | Mandarin 國語, Cantonese 粵語, Spanish Español                                 |                                         |                 |
| Education 醫科學院                | West China University of Medical sciences                                  |                                         |                 |
| Hospital Affiliations 醫院聯網    | Chinese Hospital, Mills-Peninsula Medical Center                           |                                         |                 |
| <b>McKell, Bernadette, DO</b> |                                                                            | NPI #:1710185053 CA License #: 20A12893 |                 |
| Primary Care Provider 主診醫生    | Yes 是                                                                      | New Patients 接受新病人                      | Yes 是           |
| Address 地址                    | 248 Main Street Suite 110<br>Half Moon Bay, CA 94019                       |                                         |                 |
| Phone 電話                      | (650) 276-0170                                                             |                                         |                 |
| Email 電子郵件                    | drmckell@mainstreetmed.net                                                 |                                         |                 |
| Medical Group(s):             | Jade Health Care                                                           |                                         |                 |
| Specialty 專科                  | Internal Medicine 內科                                                       |                                         | Board Eligible  |
| Other Languages Spoken 語言     | Spanish Español                                                            |                                         |                 |
| Education 醫科學院                | University of New England College of Osteopathic Medicine                  |                                         |                 |
| Hospital Affiliations 醫院聯網    |                                                                            |                                         |                 |

# CCHP/Jade San Mateo County PCPs - 聖馬刁縣主治醫生

|                               |                                                        |                                            |                 |
|-------------------------------|--------------------------------------------------------|--------------------------------------------|-----------------|
| <b>Moskowitz, Richard, MD</b> |                                                        | NPI #: 1124102868 CA License #: G49392     |                 |
| Primary Care Provider 主診醫生    | Yes 是                                                  | New Patients 接受新病人                         | Yes 是           |
| Address 地址                    | 1500 Southgate Avenue Suite 209<br>Daly City, CA 94015 |                                            |                 |
| Phone 電話                      | (650) 755-3000                                         |                                            |                 |
| Email 電子郵件                    | rmoskowitzoffice@gmail.com                             |                                            |                 |
| Medical Group(s):             | CCHP                                                   |                                            |                 |
| Specialty 專科                  | Internal Medicine 內科                                   |                                            | Board Certified |
| Other Languages Spoken 語言     | Tagalog                                                |                                            |                 |
| Education 醫科學院                | University of California, Davis                        |                                            |                 |
| Hospital Affiliations 醫院聯網    | Seton Medical Center, CPMC - St. Luke's Campus         |                                            |                 |
| <b>Qin, Kelly, NP-C</b>       |                                                        | NPI #: 1831630813 CA License #: NP95006261 |                 |
| Primary Care Provider 主診醫生    | Yes 是                                                  | New Patients 接受新病人                         | Yes 是           |
| Address 地址                    | 386 Gellert Boulevard*<br>Daly City, CA 94015          |                                            |                 |
| Phone 電話                      | (650) 761-3500                                         |                                            |                 |
| Email 電子郵件                    |                                                        |                                            |                 |
| Medical Group(s):             | CCHP, Jade Health Care                                 |                                            |                 |
| Specialty 專科                  | Nurse Practitioner 執業護理師                               |                                            | Board Eligible  |
| Other Languages Spoken 語言     | English, Cantonese 粵語, Mandarin 國語                     |                                            |                 |
| Education 醫科學院                | Holy Names University                                  |                                            |                 |
| Hospital Affiliations 醫院聯網    |                                                        |                                            |                 |
| <b>Tran, Jennifer, NP</b>     |                                                        | NPI #: 1689031346 CA License #: NP95003700 |                 |
| Primary Care Provider 主診醫生    | Yes 是                                                  | New Patients 接受新病人                         | Yes 是           |
| Address 地址                    | 386 Gellert Boulevard<br>Daly City, CA 94015           |                                            |                 |
| Phone 電話                      | (650) 761-3500                                         |                                            |                 |
| Email 電子郵件                    |                                                        |                                            |                 |
| Medical Group(s):             | CCHP, Jade Health Care                                 |                                            |                 |
| Specialty 專科                  | Nurse Practitioner 執業護理師                               |                                            | Board Certified |
| Other Languages Spoken 語言     | Cantonese 粵語, Mandarin 國語                              |                                            |                 |
| Education 醫科學院                | Samuel Merritt University                              |                                            |                 |
| Hospital Affiliations 醫院聯網    | Chinese Hospital                                       |                                            |                 |

# CCHP/Jade San Mateo County PCPs - 聖馬刁縣主治醫生

| <b>Valdez, Amelia, MD</b>  |                                                                                                                                                             | NPI #:1124053012 CA License #: A52626   |                 |
|----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------|
| Primary Care Provider 主診醫生 | Yes 是                                                                                                                                                       | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 1850 Sullivan Avenue Suite 420 1800 Sullivan Avenue #408<br>Daly City, CA 94015 Daly City, CA 94015<br>Phone 電話 (650) 756-1214 (650) 756-1214<br>Email 電子郵件 |                                         |                 |
| Medical Group(s):          | CCHP                                                                                                                                                        |                                         |                 |
| Specialty 專科               | Family Medicine 家庭科                                                                                                                                         |                                         | Board Eligible  |
| Other Languages Spoken 語言  | Tagalog                                                                                                                                                     |                                         |                 |
| Education 醫科學院             | Lyceum-Northwestern University, Philippines                                                                                                                 |                                         |                 |
| Hospital Affiliations 醫院聯網 | CPMC - St. Luke's Campus, Seton Medical Center                                                                                                              |                                         |                 |
| <b>Wong, Judi, DO</b>      |                                                                                                                                                             | NPI #:1750791067 CA License #: 20A14627 |                 |
| Primary Care Provider 主診醫生 | Yes 是                                                                                                                                                       | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 386 Gellert Boulevard<br>Daly City, CA 94015<br>Phone 電話 (650) 761-3500<br>Email 電子郵件                                                                       |                                         |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                                                                                                      |                                         |                 |
| Specialty 專科               | Family Medicine 家庭科                                                                                                                                         |                                         | Board Eligible  |
| Other Languages Spoken 語言  |                                                                                                                                                             |                                         |                 |
| Education 醫科學院             | Kirkville College of Osteopaths                                                                                                                             |                                         |                 |
| Hospital Affiliations 醫院聯網 |                                                                                                                                                             |                                         |                 |
| <b>Yan, Alice, MD</b>      |                                                                                                                                                             | NPI #:1245265362 CA License #: A50244   |                 |
| Primary Care Provider 主診醫生 | Yes 是                                                                                                                                                       | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 1800 Sullivan Avenue Suite 405<br>Daly City, CA 94015<br>Phone 電話 (650) 994-2330<br>Email 電子郵件 alicelyan@hotmail.com                                        |                                         |                 |
| Medical Group(s):          | CCHP                                                                                                                                                        |                                         |                 |
| Specialty 專科               | Internal Medicine 內科                                                                                                                                        |                                         | Board Certified |
| Other Languages Spoken 語言  | , Tagalog                                                                                                                                                   |                                         |                 |
| Education 醫科學院             | Manila Central University                                                                                                                                   |                                         |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center                                                                                                                                        |                                         |                 |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Acupuncture 針灸             |                                                  |                                         |                |
|----------------------------|--------------------------------------------------|-----------------------------------------|----------------|
| <b>Chen, Esther, Lac</b>   |                                                  | NPI #: 1285750299 CA License #: AC10941 |                |
| Primary Care Provider 主診醫生 | No 不是                                            | New Patients 接受新病人                      | Yes 是          |
| Address 地址                 | 386 Gellert Boulevard*<br>Daly City, CA 94015    |                                         |                |
| Phone 電話                   | (650) 761-3542                                   |                                         |                |
| Email 電子郵件                 | esther.chen@chasf.org                            |                                         |                |
| Medical Group(s):          | CCHP, Jade Health Care                           |                                         |                |
| Specialty 專科               | Acupuncture 針灸                                   |                                         | Board Eligible |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                        |                                         |                |
| Education 醫科學院             | American College of Traditional Chinese Medicine |                                         |                |
| Hospital Affiliations 醫院聯網 |                                                  |                                         |                |
| <b>Huey, Sabine, LAC</b>   |                                                  | NPI #: 1316304066 CA License #: AC16269 |                |
| Primary Care Provider 主診醫生 | No 不是                                            | New Patients 接受新病人                      | Yes 是          |
| Address 地址                 | 386 Gellert Boulevard*<br>Daly City, CA 94015    |                                         |                |
| Phone 電話                   | (650) 761-3542                                   |                                         |                |
| Email 電子郵件                 | sabines@chasf.org                                |                                         |                |
| Medical Group(s):          | CCHP, Jade Health Care                           |                                         |                |
| Specialty 專科               | Acupuncture 針灸                                   |                                         | Board Eligible |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                        |                                         |                |
| Education 醫科學院             | American College of Traditional Chinese Medicine |                                         |                |
| Hospital Affiliations 醫院聯網 |                                                  |                                         |                |
| <b>Leung, Cecilia, LAC</b> |                                                  | NPI #: 1912265463 CA License #: AC14700 |                |
| Primary Care Provider 主診醫生 | No 不是                                            | New Patients 接受新病人                      | Yes 是          |
| Address 地址                 | 386 Gellert Boulevard<br>Daly City, CA 94015     |                                         |                |
| Phone 電話                   | (650) 761-3542                                   |                                         |                |
| Email 電子郵件                 |                                                  |                                         |                |
| Medical Group(s):          | CCHP, Jade Health Care                           |                                         |                |
| Specialty 專科               | Acupuncture 針灸                                   |                                         | Board Eligible |
| Other Languages Spoken 語言  | Mandarin 國語, Cantonese 粵語                        |                                         |                |
| Education 醫科學院             |                                                  |                                         |                |
| Hospital Affiliations 醫院聯網 |                                                  |                                         |                |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Acupuncture 針灸               |                                                                          |                                        |                |
|------------------------------|--------------------------------------------------------------------------|----------------------------------------|----------------|
| <b>Ling, Jie, MD, PhD 凌潔</b> |                                                                          | NPI #:1003187766 CA License #: A130461 |                |
| Primary Care Provider 主診醫生   | Yes 是                                                                    | New Patients 接受新病人                     | Yes 是          |
| Address 地址                   | 1828 El Camino Real Suite 405<br>Burlingame, CA 94010                    |                                        |                |
| Phone 電話                     | (650) 651-7175                                                           |                                        |                |
| Email 電子郵件                   | dr.jennyling@gmail.com                                                   |                                        |                |
| Medical Group(s):            | CCHP, Jade Health Care                                                   |                                        |                |
| Specialty 專科                 | Acupuncture 針灸                                                           |                                        | Board Eligible |
| Other Languages Spoken 語言    | Mandarin 國語, Cantonese 粵語, Spanish Español                               |                                        |                |
| Education 醫科學院               | West China University of Medical sciences                                |                                        |                |
| Hospital Affiliations 醫院聯網   | Chinese Hospital, Mills-Peninsula Medical Center                         |                                        |                |
| <b>Ng, Catherine, LAC</b>    |                                                                          | NPI #:1023566106 CA License #: AC16950 |                |
| Primary Care Provider 主診醫生   | No 不是                                                                    | New Patients 接受新病人                     | Yes 是          |
| Address 地址                   | 386 Gellert Boulevard*<br>Daly City, CA 94015                            |                                        |                |
| Phone 電話                     | (650) 761-3542                                                           |                                        |                |
| Email 電子郵件                   |                                                                          |                                        |                |
| Medical Group(s):            | CCHP, Jade Health Care                                                   |                                        |                |
| Specialty 專科                 | Acupuncture 針灸                                                           |                                        | Board Eligible |
| Other Languages Spoken 語言    | Cantonese 粵語, Mandarin 國語                                                |                                        |                |
| Education 醫科學院               | Five Branches University                                                 |                                        |                |
| Hospital Affiliations 醫院聯網   |                                                                          |                                        |                |
| <b>Yu, Dove, LAc</b>         |                                                                          | NPI #:1972923357 CA License #: AC16086 |                |
| Primary Care Provider 主診醫生   | No 不是                                                                    | New Patients 接受新病人                     | Yes 是          |
| Address 地址                   | 386 Gellert Boulevard Ste D<br>Daly City, CA 94015                       |                                        |                |
| Phone 電話                     | (650) 761-3542                                                           |                                        |                |
| Email 電子郵件                   |                                                                          |                                        |                |
| Medical Group(s):            | CCHP, Jade Health Care                                                   |                                        |                |
| Specialty 專科                 | Acupuncture 針灸                                                           |                                        | Board Eligible |
| Other Languages Spoken 語言    |                                                                          |                                        |                |
| Education 醫科學院               | American College of Traditional Chinese Medicine at California Institute |                                        |                |
| Hospital Affiliations 醫院聯網   |                                                                          |                                        |                |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Acupuncture 針灸             |                                                  |                                                         |                |
|----------------------------|--------------------------------------------------|---------------------------------------------------------|----------------|
| <b>Yuen, Emily, L.Ac</b>   |                                                  | NPI #: 1477951986 CA License #: AC15631                 |                |
| Primary Care Provider 主診醫生 | No 不是                                            | New Patients 接受新病人                                      | Yes 是          |
| Address 地址                 | 386 Gellert Boulevard*<br>Daly City, CA 94015    |                                                         |                |
| Phone 電話                   | (650) 761-3500                                   |                                                         |                |
| Email 電子郵件                 |                                                  |                                                         |                |
| Medical Group(s):          | Jade Health Care                                 |                                                         |                |
| Specialty 專科               | Acupuncture 針灸                                   |                                                         | Board Eligible |
| Other Languages Spoken 語言  |                                                  |                                                         |                |
| Education 醫科學院             | American College of Traditional Chinese Medicine |                                                         |                |
| Hospital Affiliations 醫院聯網 |                                                  |                                                         |                |
| <b>Zhou, Vincent, LAc</b>  |                                                  | NPI #: 1730499468 CA License #: AC13784                 |                |
| Primary Care Provider 主診醫生 | No 不是                                            | New Patients 接受新病人                                      | Yes 是          |
| Address 地址                 | 1828 El Camino Real #804<br>Burlingame, CA 94010 | 333 Gellert Boulevard Suite 222*<br>Daly City, CA 94015 |                |
| Phone 電話                   | (650) 580-8697                                   | (650) 867-1238                                          |                |
| Email 電子郵件                 |                                                  |                                                         |                |
| Medical Group(s):          | CCHP, Jade Health Care                           |                                                         |                |
| Specialty 專科               | Acupuncture 針灸                                   |                                                         | Board Eligible |
| Other Languages Spoken 語言  | Chinese, Mandarin 國語                             |                                                         |                |
| Education 醫科學院             | University of East & West Medicine               |                                                         |                |
| Hospital Affiliations 醫院聯網 |                                                  |                                                         |                |

## CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Allergy & Immunology 敏感科   |                                                                                                            |                                        |       |
|----------------------------|------------------------------------------------------------------------------------------------------------|----------------------------------------|-------|
| Kardassakis, Dean, MD      |                                                                                                            | NPI #: 1811906571 CA License #: G62905 |       |
| Primary Care Provider 主診醫生 | No 不是                                                                                                      | New Patients 接受新病人                     | Yes 是 |
| Address 地址                 | 100 South Ellsworth Avenue Suite 1828 El Camino Real Suite 703<br>San Mateo, CA 94401 Burlingame, CA 94010 |                                        |       |
| Phone 電話                   | (650) 696-8230 (650) 692-1892                                                                              |                                        |       |
| Email 電子郵件                 |                                                                                                            |                                        |       |
| Medical Group(s):          | CCHP, Jade Health Care                                                                                     |                                        |       |
| Specialty 專科               | Allergy & Immunology 敏感科 Board Certified                                                                   |                                        |       |
| Other Languages Spoken 語言  |                                                                                                            |                                        |       |
| Education 醫科學院             | University of Nevada SOM - Reno                                                                            |                                        |       |
| Hospital Affiliations 醫院聯網 | Mills-Peninsula Medical Center, Seton Medical Center                                                       |                                        |       |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Anesthesiology 麻醉科         |                                                              |                                         |                 |
|----------------------------|--------------------------------------------------------------|-----------------------------------------|-----------------|
| <b>Celis, Edgar, MD</b>    |                                                              | NPI #: 1851473268 CA License #: C131803 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                        | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 901 Campus Drive Suite 310*<br>Daly City, CA 94015           |                                         |                 |
| Phone 電話                   | (650) 755-0733                                               |                                         |                 |
| Email 電子郵件                 |                                                              |                                         |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                       |                                         |                 |
| Specialty 專科               | Anesthesiology 麻醉科                                           |                                         | Board Certified |
| Other Languages Spoken 語言  | Spanish Español                                              |                                         |                 |
| Education 醫科學院             | Pontificia Universidad Javeriana Bogota Facultad de Medicina |                                         |                 |
| Hospital Affiliations 醫院聯網 |                                                              |                                         |                 |
| <b>Chiang, Yi, DO</b>      |                                                              | NPI #: 1295830958 CA License #: 20A8819 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                        | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 901 Campus Drive Suite 102<br>Daly City, CA 94015            |                                         |                 |
| Phone 電話                   | 650-991-2000                                                 |                                         |                 |
| Email 電子郵件                 |                                                              |                                         |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                       |                                         |                 |
| Specialty 專科               | Anesthesiology 麻醉科                                           |                                         | Board Certified |
| Other Languages Spoken 語言  |                                                              |                                         |                 |
| Education 醫科學院             | Kirkville College of Osteopathic Medicine                    |                                         |                 |
| Hospital Affiliations 醫院聯網 | CPMC - St. Luke's Campus                                     |                                         |                 |
| <b>Churnin, Jon, MD</b>    |                                                              | NPI #: 1841283892 CA License #: G34291  |                 |
| Primary Care Provider 主診醫生 | No 不是                                                        | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 901 Campus Drive Suite 102<br>Daly City, CA 94015            |                                         |                 |
| Phone 電話                   | (650) 991-2000                                               |                                         |                 |
| Email 電子郵件                 | kendrade@comcast.net                                         |                                         |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                       |                                         |                 |
| Specialty 專科               | Anesthesiology 麻醉科                                           |                                         | Board Certified |
| Other Languages Spoken 語言  | Cantonese 粵語, Italian Italiano, Spanish Español, Tagalog     |                                         |                 |
| Education 醫科學院             | University of Pennsylvania                                   |                                         |                 |
| Hospital Affiliations 醫院聯網 |                                                              |                                         |                 |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Anesthesiology 麻醉科         |                                                              |                                          |                |
|----------------------------|--------------------------------------------------------------|------------------------------------------|----------------|
| <b>Dery, Molyan, CRNA</b>  |                                                              | NPI #: 1033407853 CA License #: 95125311 |                |
| Primary Care Provider 主診醫生 | No 不是                                                        | New Patients 接受新病人                       | Yes 是          |
| Address 地址                 | 901 Campus Drive Suite 310*                                  |                                          |                |
| Phone 電話                   | Daly City, CA 94015                                          |                                          |                |
| Email 電子郵件                 | (650) 755-0733                                               |                                          |                |
| Medical Group(s):          | CCHP, Jade Health Care                                       |                                          |                |
| Specialty 專科               | Anesthesiology 麻醉科                                           |                                          | Board Eligible |
| Other Languages Spoken 語言  |                                                              |                                          |                |
| Education 醫科學院             | Duke University, School of Nursing                           |                                          |                |
| Hospital Affiliations 醫院聯網 |                                                              |                                          |                |
| <b>Lee, Diana, DO</b>      |                                                              | NPI #: 1851686828 CA License #: 20A11529 |                |
| Primary Care Provider 主診醫生 | No 不是                                                        | New Patients 接受新病人                       | Yes 是          |
| Address 地址                 | 901 Campus Drive Suite 310*                                  |                                          |                |
| Phone 電話                   | Daly City, CA 94015                                          |                                          |                |
| Email 電子郵件                 | (209) 956-7725                                               |                                          |                |
| Medical Group(s):          | CCHP, Jade Health Care                                       |                                          |                |
| Specialty 專科               | Anesthesiology 麻醉科                                           |                                          | Board Eligible |
| Other Languages Spoken 語言  |                                                              |                                          |                |
| Education 醫科學院             | Touro University, California College of Osteopathic Medicine |                                          |                |
| Hospital Affiliations 醫院聯網 |                                                              |                                          |                |

## CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| CardioThoracic Surgery 心臟外科 |                                                        |                                        |                |
|-----------------------------|--------------------------------------------------------|----------------------------------------|----------------|
| Baladi, Naoum, MD           |                                                        | NPI #: 1295740173 CA License #: A43839 |                |
| Primary Care Provider 主診醫生  | No 不是                                                  | New Patients 接受新病人                     | Yes 是          |
| Address 地址                  | 1500 Southgate Avenue Suite 209<br>Daly City, CA 94015 |                                        |                |
| Phone 電話                    | (650) 991-2662                                         |                                        |                |
| Email 電子郵件                  |                                                        |                                        |                |
| Medical Group(s):           | Jade Health Care                                       |                                        |                |
| Specialty 專科                | CardioThoracic Surgery 心臟外科<br>Thoracic Surgery 胸腔外科   |                                        | Board Eligible |
| Other Languages Spoken 語言   | English                                                |                                        |                |
| Education 醫科學院              | University of Aleppo Faculty of Medicine               |                                        |                |
| Hospital Affiliations 醫院聯網  | Seton Medical Center, St. Mary's Medical Center        |                                        |                |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Cardiovascular Disease 心臟科  |                                                                           |                                        |                 |
|-----------------------------|---------------------------------------------------------------------------|----------------------------------------|-----------------|
| <b>Cavero, Patricia, MD</b> |                                                                           | NPI #: 1912081654 CA License #: G65848 |                 |
| Primary Care Provider 主診醫生  | No 不是                                                                     | New Patients 接受新病人                     | Yes 是           |
| Address 地址                  | 1500 Southgate Avenue Suite 202<br>Daly City, CA 94015                    |                                        |                 |
| Phone 電話                    | (650) 991-3200                                                            |                                        |                 |
| Email 電子郵件                  | pcaverocardio@gmail.com                                                   |                                        |                 |
| Medical Group(s):           | CCHP                                                                      |                                        |                 |
| Specialty 專科                | Cardiovascular Disease 心臟科                                                |                                        | Board Certified |
| Other Languages Spoken 語言   | Tagalog, Spanish Español                                                  |                                        |                 |
| Education 醫科學院              | Northwestern University                                                   |                                        |                 |
| Hospital Affiliations 醫院聯網  | Seton Medical Center, St. Mary's Medical Center, CPMC - St. Luke's Campus |                                        |                 |
| <b>Feeney, James, MD</b>    |                                                                           | NPI #: 1386624377 CA License #: G45181 |                 |
| Primary Care Provider 主診醫生  | Yes 是                                                                     | New Patients 接受新病人                     | Yes 是           |
| Address 地址                  | 1800 Sullivan Avenue Suite 207<br>Daly City, CA 94015                     |                                        |                 |
| Phone 電話                    | (650) 992-0463                                                            |                                        |                 |
| Email 電子郵件                  | nicole@feeney-vaughan.com                                                 |                                        |                 |
| Medical Group(s):           | CCHP                                                                      |                                        |                 |
| Specialty 專科                | Cardiovascular Disease 心臟科                                                |                                        | Board Certified |
| Other Languages Spoken 語言   | Spanish Español, Tagalog                                                  |                                        |                 |
| Education 醫科學院              | Creighton University                                                      |                                        |                 |
| Hospital Affiliations 醫院聯網  | Seton Medical Center, St. Mary's Medical Center                           |                                        |                 |
| <b>Feeney, Thomas, MD</b>   |                                                                           | NPI #: 1588631568 CA License #: G83196 |                 |
| Primary Care Provider 主診醫生  | No 不是                                                                     | New Patients 接受新病人                     | Yes 是           |
| Address 地址                  | 1850 Sullivan Avenue Suite 310<br>Daly City, CA 94015                     |                                        |                 |
| Phone 電話                    | (650) 757-6131                                                            |                                        |                 |
| Email 電子郵件                  | tcardio@msn.com                                                           |                                        |                 |
| Medical Group(s):           | CCHP                                                                      |                                        |                 |
| Specialty 專科                | Cardiovascular Disease 心臟科                                                |                                        | Board Certified |
| Other Languages Spoken 語言   | Spanish Español, Tagalog                                                  |                                        |                 |
| Education 醫科學院              | Creighton University                                                      |                                        |                 |
| Hospital Affiliations 醫院聯網  | Seton Medical Center, CPMC - St. Luke's Campus, Chinese Hospital          |                                        |                 |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Cardiovascular Disease 心臟科  |                                                        |                                        |                 |
|-----------------------------|--------------------------------------------------------|----------------------------------------|-----------------|
| <b>Millhouse, Felix, MD</b> |                                                        | NPI #: 1811912447 CA License #: G44428 |                 |
| Primary Care Provider 主診醫生  | No 不是                                                  | New Patients 接受新病人                     | No 不是           |
| Address 地址                  | 1800 Sullivan Avenue Suite 302*<br>Daly City, CA 94015 |                                        |                 |
| Phone 電話                    | (650) 994-4666                                         |                                        |                 |
| Email 電子郵件                  | millhousemd@gmail.com                                  |                                        |                 |
| Medical Group(s):           | CCHP, Jade Health Care                                 |                                        |                 |
| Specialty 專科                | Cardiovascular Disease 心臟科                             |                                        | Board Certified |
| Other Languages Spoken 語言   | Spanish Español, Tagalog                               |                                        |                 |
| Education 醫科學院              | Medical College of Virginia                            |                                        |                 |
| Hospital Affiliations 醫院聯網  | Seton Medical Center, CPMC - St. Luke's Campus         |                                        |                 |
| <b>O'Neill, Daniel, MD</b>  |                                                        | NPI #: 1477533461 CA License #: A65286 |                 |
| Primary Care Provider 主診醫生  | No 不是                                                  | New Patients 接受新病人                     | Yes 是           |
| Address 地址                  | 1800 Sullivan Avenue Suite 207<br>Daly City, CA 94015  |                                        |                 |
| Phone 電話                    | (650) 992-0463                                         |                                        |                 |
| Email 電子郵件                  | nicole@feeney-vaughan.com                              |                                        |                 |
| Medical Group(s):           | CCHP                                                   |                                        |                 |
| Specialty 專科                | Cardiovascular Disease 心臟科                             |                                        | Board Certified |
| Other Languages Spoken 語言   | Spanish Español, Tagalog                               |                                        |                 |
| Education 醫科學院              | Georgetown University                                  |                                        |                 |
| Hospital Affiliations 醫院聯網  | St. Mary's Medical Center, Seton Medical Center        |                                        |                 |
| <b>Vaughan, David, MD</b>   |                                                        | NPI #: 1194705186 CA License #: G51966 |                 |
| Primary Care Provider 主診醫生  | Yes 是                                                  | New Patients 接受新病人                     | Yes 是           |
| Address 地址                  | 1800 Sullivan Avenue Suite 207<br>Daly City, CA 94015  |                                        |                 |
| Phone 電話                    | (650) 992-0463                                         |                                        |                 |
| Email 電子郵件                  | nicole@feeney-vaughan.com                              |                                        |                 |
| Medical Group(s):           | CCHP                                                   |                                        |                 |
| Specialty 專科                | Cardiovascular Disease 心臟科                             |                                        | Board Certified |
| Other Languages Spoken 語言   | Spanish Español, Tagalog                               |                                        |                 |
| Education 醫科學院              | Dartmouth College                                      |                                        |                 |
| Hospital Affiliations 醫院聯網  | Seton Medical Center, St. Mary's Medical Center        |                                        |                 |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Chiropractic 脊椎神經治療        |                                                      |                                         |                |
|----------------------------|------------------------------------------------------|-----------------------------------------|----------------|
| <b>Balch, Dennis, DC</b>   |                                                      | NPI #: 1578646485 CA License #: DC24791 |                |
| Primary Care Provider 主診醫生 | No 不是                                                | New Patients 接受新病人                      | Yes 是          |
| Address 地址                 | 199 California Drive Suite 100<br>Millbrae, CA 94030 |                                         |                |
| Phone 電話                   | (650) 692-2273                                       |                                         |                |
| Email 電子郵件                 |                                                      |                                         |                |
| Medical Group(s):          | Jade Health Care                                     |                                         |                |
| Specialty 專科               | Chiropractic 脊椎神經治療                                  |                                         | Board Eligible |
| Other Languages Spoken 語言  |                                                      |                                         |                |
| Education 醫科學院             | Palmer College of Chiropractic                       |                                         |                |
| Hospital Affiliations 醫院聯網 |                                                      |                                         |                |
| <b>Isero, Eric, DC</b>     |                                                      | NPI #: 1366543555 CA License #: DC24965 |                |
| Primary Care Provider 主診醫生 | No 不是                                                | New Patients 接受新病人                      | Yes 是          |
| Address 地址                 | 199 California Drive Suite 100<br>Millbrae, CA 94030 |                                         |                |
| Phone 電話                   | (650) 692-2273                                       |                                         |                |
| Email 電子郵件                 |                                                      |                                         |                |
| Medical Group(s):          | Jade Health Care                                     |                                         |                |
| Specialty 專科               | Chiropractic 脊椎神經治療                                  |                                         | Board Eligible |
| Other Languages Spoken 語言  |                                                      |                                         |                |
| Education 醫科學院             | Palmer College of Chiropractic, West Campus          |                                         |                |
| Hospital Affiliations 醫院聯網 |                                                      |                                         |                |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Diagnostic Radiology 放射科 - 診斷 |                                                                                                                                                         |                                        |                 |
|-------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-----------------|
| <b>Abedon, Stephen, MD</b>    |                                                                                                                                                         | NPI #: 1689628687 CA License #: G70312 |                 |
| Primary Care Provider 主診醫生    | No 不是                                                                                                                                                   | New Patients 接受新病人                     | Yes 是           |
| Address 地址                    | 1498 Southgate Avenue Suite 102 1900 Sullivan Avenue<br>Daly City, CA 94015 Daly City, CA 94015<br>Phone 電話 (650) 755-4490 (650) 991-6503<br>Email 電子郵件 |                                        |                 |
| Medical Group(s):             | CCHP                                                                                                                                                    |                                        |                 |
| Specialty 專科                  | Diagnostic Radiology 放射科 - 診斷                                                                                                                           |                                        | Board Certified |
| Other Languages Spoken 語言     |                                                                                                                                                         |                                        |                 |
| Education 醫科學院                | University of Vermont School of Medicine                                                                                                                |                                        |                 |
| Hospital Affiliations 醫院聯網    | Seton Medical Center                                                                                                                                    |                                        |                 |
| <b>Eng, Roger, MD 吳子銘</b>     |                                                                                                                                                         | NPI #: 1871607291 CA License #: G75471 |                 |
| Primary Care Provider 主診醫生    | No 不是                                                                                                                                                   | New Patients 接受新病人                     | Yes 是           |
| Address 地址                    | 386 Gellert Boulevard*<br>Daly City, CA 94015<br>Phone 電話<br>Email 電子郵件                                                                                 |                                        |                 |
| Medical Group(s):             | CCHP, Jade Health Care                                                                                                                                  |                                        |                 |
| Specialty 專科                  | Diagnostic Radiology 放射科 - 診斷                                                                                                                           |                                        | Board Certified |
| Other Languages Spoken 語言     | Cantonese 粵語, Mandarin 國語                                                                                                                               |                                        |                 |
| Education 醫科學院                | George Washington University                                                                                                                            |                                        |                 |
| Hospital Affiliations 醫院聯網    | Chinese Hospital                                                                                                                                        |                                        |                 |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Endocrinology 內分泌科         |                                            |                                         |                 |
|----------------------------|--------------------------------------------|-----------------------------------------|-----------------|
| Xu, Chengyu, MD            |                                            | NPI #: 1669600086 CA License #: A121215 |                 |
| Primary Care Provider 主診醫生 | Yes 是                                      | New Patients 接受新病人                      | No 不是           |
| Address 地址                 | 386 Gellert Boulevard*                     |                                         |                 |
| Phone 電話                   | Daly City, CA 94015                        |                                         |                 |
| Email 電子郵件                 | (650) 761-3500                             |                                         |                 |
| Medical Group(s):          | CCHP, Jade Health Care                     |                                         |                 |
| Specialty 專科               | Endocrinology 內分泌科                         |                                         | Board Certified |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                  |                                         |                 |
| Education 醫科學院             | Sun Yat-Sen University of Medical Sciences |                                         |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                           |                                         |                 |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Gastroenterology 腸胃科               |                                                       |                                         |                 |
|------------------------------------|-------------------------------------------------------|-----------------------------------------|-----------------|
| <b>Aditi, Anupam, MD</b>           |                                                       | NPI #: 1407084494 CA License #: A120979 |                 |
| Primary Care Provider 主診醫生         | No 不是                                                 | New Patients 接受新病人                      | Yes 是           |
| Address 地址                         | 1800 Sullivan Ave Suite 507<br>Daly City, CA 94015    |                                         |                 |
| Phone 電話                           | (650) 756-5000                                        |                                         |                 |
| Email 電子郵件                         |                                                       |                                         |                 |
| Medical Group(s):                  | Jade Health Care                                      |                                         |                 |
| Specialty 專科                       | Gastroenterology 腸胃科                                  |                                         | Board Eligible  |
| Other Languages Spoken 語言          | English, Spanish Español                              |                                         |                 |
| Education 醫科學院                     | Baylor College of Medicine                            |                                         |                 |
| Hospital Affiliations 醫院聯網         | Seton Medical Center                                  |                                         |                 |
| <b>Chin, Stefan, MD</b>            |                                                       | NPI #: 1891794152 CA License #: G83120  |                 |
| Primary Care Provider 主診醫生         | No 不是                                                 | New Patients 接受新病人                      | Yes 是           |
| Address 地址                         | 1850 Sullivan Avenue Suite 520<br>Daly City, CA 94015 |                                         |                 |
| Phone 電話                           | (650) 756-5000                                        |                                         |                 |
| Email 電子郵件                         | info@insitedigestive.com                              |                                         |                 |
| Medical Group(s):                  | CCHP, Jade Health Care                                |                                         |                 |
| Specialty 專科                       | Gastroenterology 腸胃科                                  |                                         | Board Certified |
| Other Languages Spoken 語言          | TagalogArabic العربية                                 |                                         |                 |
| Education 醫科學院                     | Columbia University                                   |                                         |                 |
| Hospital Affiliations 醫院聯網         | Seton Medical Center, Mills-Peninsula Medical Center  |                                         |                 |
| <b>Garcia-Chuapoco, Rowena, MD</b> |                                                       | NPI #: 1578563789 CA License #: A51290  |                 |
| Primary Care Provider 主診醫生         | No 不是                                                 | New Patients 接受新病人                      | Yes 是           |
| Address 地址                         | 1850 Sullivan Avenue Suite 520<br>Daly City, CA 94015 |                                         |                 |
| Phone 電話                           | (650) 756-5000                                        |                                         |                 |
| Email 電子郵件                         | info@insitedigestive.com                              |                                         |                 |
| Medical Group(s):                  | CCHP, Jade Health Care                                |                                         |                 |
| Specialty 專科                       | Gastroenterology 腸胃科                                  |                                         | Board Certified |
| Other Languages Spoken 語言          | Tagalog                                               |                                         |                 |
| Education 醫科學院                     | University of Santo Tomas, Philippines                |                                         |                 |
| Hospital Affiliations 醫院聯網         | Seton Medical Center, Mills-Peninsula Medical Center  |                                         |                 |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Gastroenterology 腸胃科       |                                                         |                                        |                 |
|----------------------------|---------------------------------------------------------|----------------------------------------|-----------------|
| <b>Hamby, Dennis, MD</b>   |                                                         | NPI #: 1922099415 CA License #: C26833 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                   | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 1500 Southgate Avenue Suite 201<br>Daly City, CA 94015  |                                        |                 |
| Phone 電話                   | (650) 997-0555                                          |                                        |                 |
| Email 電子郵件                 | dhambymd@earthlink.net                                  |                                        |                 |
| Medical Group(s):          | CCHP                                                    |                                        |                 |
| Specialty 專科               | Gastroenterology 腸胃科                                    |                                        | Board Eligible  |
| Other Languages Spoken 語言  | Spanish Español, Tagalog, Cantonese 粵語, Mandarin 國語     |                                        |                 |
| Education 醫科學院             | University of Louisville                                |                                        |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center, Chinese Hospital                  |                                        |                 |
| <b>Kao, Roger, MD</b>      |                                                         | NPI #: 1982786133 CA License #: A98824 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                   | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 1000 Laurel Street<br>San Carlos, CA 94070              |                                        |                 |
| Phone 電話                   | (650) 596-8800                                          |                                        |                 |
| Email 電子郵件                 | dcadmin@sbcglobal.net                                   |                                        |                 |
| Medical Group(s):          | Jade Health Care                                        |                                        |                 |
| Specialty 專科               | Gastroenterology 腸胃科<br>Hepatology 肝臟科                  |                                        | Board Certified |
| Other Languages Spoken 語言  |                                                         |                                        |                 |
| Education 醫科學院             | Rosalind Franklin University of Medicine & Science      |                                        |                 |
| Hospital Affiliations 醫院聯網 |                                                         |                                        |                 |
| <b>Lee, Eugene, MD</b>     |                                                         | NPI #: 1023049590 CA License #: A87261 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                   | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 100 South Ellsworth Avenue Suite<br>San Mateo, CA 94401 |                                        |                 |
| Phone 電話                   | (650) 342-7432                                          |                                        |                 |
| Email 電子郵件                 |                                                         |                                        |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                  |                                        |                 |
| Specialty 專科               | Gastroenterology 腸胃科                                    |                                        | Board Certified |
| Other Languages Spoken 語言  |                                                         |                                        |                 |
| Education 醫科學院             | New York University School of Medicine                  |                                        |                 |
| Hospital Affiliations 醫院聯網 | Mills-Peninsula Medical Center                          |                                        |                 |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Gastroenterology 腸胃科       |                                                             |                                        |                 |
|----------------------------|-------------------------------------------------------------|----------------------------------------|-----------------|
| <b>Levenson, Scott, MD</b> |                                                             | NPI #: 1578548186 CA License #: G71807 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                       | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 1000 Laurel Street<br>San Carlos, CA 94070                  |                                        |                 |
| Phone 電話                   | (650) 596-8800                                              |                                        |                 |
| Email 電子郵件                 | scottlevenson@sbcglobal.net                                 |                                        |                 |
| Medical Group(s):          | Jade Health Care                                            |                                        |                 |
| Specialty 專科               | Gastroenterology 腸胃科<br>Hepatology 肝臟科                      |                                        | Board Certified |
| Other Languages Spoken 語言  | Italian Italiano, Chinese, Russian Русский, Spanish Español |                                        |                 |
| Education 醫科學院             | University of Michigan Medical School                       |                                        |                 |
| Hospital Affiliations 醫院聯網 |                                                             |                                        |                 |
| <b>Onuma, Edward, MD</b>   |                                                             | NPI #: 1477559722 CA License #: G85508 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                       | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 100 South Ellsworth Avenue Suite<br>San Mateo, CA 94401     |                                        |                 |
| Phone 電話                   | (650) 342-7432                                              |                                        |                 |
| Email 電子郵件                 |                                                             |                                        |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                      |                                        |                 |
| Specialty 專科               | Gastroenterology 腸胃科                                        |                                        | Board Certified |
| Other Languages Spoken 語言  | Spanish Español                                             |                                        |                 |
| Education 醫科學院             | SUNY Upstate Medical University College of Medicine         |                                        |                 |
| Hospital Affiliations 醫院聯網 | Mills-Peninsula Medical Center                              |                                        |                 |
| <b>Tschiyose, Mark, MD</b> |                                                             | NPI #: 1063412195 CA License #: G53160 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                       | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 1850 Sullivan Avenue Suite 520<br>Daly City, CA 94015       |                                        |                 |
| Phone 電話                   | (650) 756-5000                                              |                                        |                 |
| Email 電子郵件                 | info@insitedigestive.com                                    |                                        |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                      |                                        |                 |
| Specialty 專科               | Gastroenterology 腸胃科                                        |                                        | Board Certified |
| Other Languages Spoken 語言  | Tagalog                                                     |                                        |                 |
| Education 醫科學院             | University of California, Los Angeles                       |                                        |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center, Mills-Peninsula Medical Center        |                                        |                 |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| General Surgery 普通外科        |                                                                                |                                        |                 |
|-----------------------------|--------------------------------------------------------------------------------|----------------------------------------|-----------------|
| <b>Aquino, Melinda, MD</b>  |                                                                                | NPI #: 1033190970 CA License #: A94731 |                 |
| Primary Care Provider 主診醫生  | No 不是                                                                          | New Patients 接受新病人                     | Yes 是           |
| Address 地址                  | 1850 Sullivan Avenue Suite 300*<br>Daly City, CA 94015                         |                                        |                 |
| Phone 電話                    | (650) 991-1122                                                                 |                                        |                 |
| Email 電子郵件                  | info@sfveincenter.com                                                          |                                        |                 |
| Medical Group(s):           | CCHP, Jade Health Care                                                         |                                        |                 |
| Specialty 專科                | General Surgery 普通外科<br>Vascular Surgery 血管系外科                                 |                                        | Board Eligible  |
| Other Languages Spoken 語言   | Spanish Español, English                                                       |                                        |                 |
| Education 醫科學院              | Indiana University School of Medicine                                          |                                        |                 |
| Hospital Affiliations 醫院聯網  | Seton Medical Center, St. Mary's Medical Center, St. Francis Memorial Hospital |                                        |                 |
| <b>Perez, Robert, MD</b>    |                                                                                | NPI #: 1699866061 CA License #: G58842 |                 |
| Primary Care Provider 主診醫生  | No 不是                                                                          | New Patients 接受新病人                     | Yes 是           |
| Address 地址                  | 1800 Sullivan Avenue Suite 507<br>Daly City, CA 94015                          |                                        |                 |
| Phone 電話                    | (650) 994-9936                                                                 |                                        |                 |
| Email 電子郵件                  |                                                                                |                                        |                 |
| Medical Group(s):           | CCHP                                                                           |                                        |                 |
| Specialty 專科                | General Surgery 普通外科                                                           |                                        | Board Certified |
| Other Languages Spoken 語言   | Spanish Español                                                                |                                        |                 |
| Education 醫科學院              | Brown University                                                               |                                        |                 |
| Hospital Affiliations 醫院聯網  | Seton Medical Center, St. Mary's Medical Center                                |                                        |                 |
| <b>Scribner, Robert, MD</b> |                                                                                | NPI #: 1336150572 CA License #: G24490 |                 |
| Primary Care Provider 主診醫生  | No 不是                                                                          | New Patients 接受新病人                     | Yes 是           |
| Address 地址                  | 1800 Sullivan Avenue Suite 308<br>Daly City, CA 94015                          |                                        |                 |
| Phone 電話                    | (650) 755-1132                                                                 |                                        |                 |
| Email 電子郵件                  | rscribner08@gmail.com                                                          |                                        |                 |
| Medical Group(s):           | CCHP, Jade Health Care                                                         |                                        |                 |
| Specialty 專科                | General Surgery 普通外科<br>Vascular Surgery 血管系外科                                 |                                        | Board Certified |
| Other Languages Spoken 語言   | Tagalog                                                                        |                                        |                 |
| Education 醫科學院              | University of Colorado                                                         |                                        |                 |
| Hospital Affiliations 醫院聯網  | Seton Medical Center, St. Francis Memorial Hospital                            |                                        |                 |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

## Hepatology 肝臟科

| Kao, Roger, MD             |                                                             | NPI #:1982786133   |       | CA License #: A98824 |  |
|----------------------------|-------------------------------------------------------------|--------------------|-------|----------------------|--|
| Primary Care Provider 主診醫生 | No 不是                                                       | New Patients 接受新病人 | Yes 是 |                      |  |
| Address 地址                 | 1000 Laurel Street<br>San Carlos, CA 94070                  |                    |       |                      |  |
| Phone 電話                   | (650) 596-8800                                              |                    |       |                      |  |
| Email 電子郵件                 | dcadmin@sbcglobal.net                                       |                    |       |                      |  |
| Medical Group(s):          | Jade Health Care                                            |                    |       |                      |  |
| Specialty 專科               | Hepatology 肝臟科                                              |                    |       | Board Eligible       |  |
|                            | Gastroenterology 腸胃科                                        |                    |       |                      |  |
| Other Languages Spoken 語言  |                                                             |                    |       |                      |  |
| Education 醫科學院             | Rosalind Franklin University of Medicine & Science          |                    |       |                      |  |
| Hospital Affiliations 醫院聯網 |                                                             |                    |       |                      |  |
| Levenson, Scott, MD        |                                                             | NPI #:1578548186   |       | CA License #: G71807 |  |
| Primary Care Provider 主診醫生 | No 不是                                                       | New Patients 接受新病人 | Yes 是 |                      |  |
| Address 地址                 | 1000 Laurel Street<br>San Carlos, CA 94070                  |                    |       |                      |  |
| Phone 電話                   | (650) 596-8800                                              |                    |       |                      |  |
| Email 電子郵件                 | scottlevenson@sbcglobal.net                                 |                    |       |                      |  |
| Medical Group(s):          | Jade Health Care                                            |                    |       |                      |  |
| Specialty 專科               | Hepatology 肝臟科                                              |                    |       | Board Eligible       |  |
|                            | Gastroenterology 腸胃科                                        |                    |       |                      |  |
| Other Languages Spoken 語言  | Italian Italiano, Chinese, Russian Русский, Spanish Español |                    |       |                      |  |
| Education 醫科學院             | University of Michigan Medical School                       |                    |       |                      |  |
| Hospital Affiliations 醫院聯網 |                                                             |                    |       |                      |  |
| Nguyen, Mindie, MD         |                                                             | NPI #:1164558326   |       | CA License #: G79013 |  |
| Primary Care Provider 主診醫生 | No 不是                                                       | New Patients 接受新病人 | Yes 是 |                      |  |
| Address 地址                 | 386 Gellert Boulevard<br>Daly City, CA 94015                |                    |       |                      |  |
| Phone 電話                   | (650) 761-3500                                              |                    |       |                      |  |
| Email 電子郵件                 | mindien@chasf.org                                           |                    |       |                      |  |
| Medical Group(s):          | CCHP, Jade Health Care                                      |                    |       |                      |  |
| Specialty 專科               | Hepatology 肝臟科                                              |                    |       | Board Eligible       |  |
| Other Languages Spoken 語言  | Vietnamese 越南語                                              |                    |       |                      |  |
| Education 醫科學院             | University of California, San Diego School of Medicine      |                    |       |                      |  |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                                            |                    |       |                      |  |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Nephrology 腎科                |                                                                                                            |                                        |                 |
|------------------------------|------------------------------------------------------------------------------------------------------------|----------------------------------------|-----------------|
| <b>Chang, Warren, MD 張華倫</b> |                                                                                                            | NPI #: 1083674550 CA License #: A69500 |                 |
| Primary Care Provider 主診醫生   | No 不是                                                                                                      | New Patients 接受新病人                     | No 不是           |
| Address 地址                   | 1498 Southgate Avenue Suite 102 1828 El Camino Real Suite 406*<br>Daly City, CA 94015 Burlingame, CA 94010 |                                        |                 |
| Phone 電話                     | (650) 755-4490 (650) 755-4490                                                                              |                                        |                 |
| Email 電子郵件                   |                                                                                                            |                                        |                 |
| Medical Group(s):            | CCHP                                                                                                       |                                        |                 |
| Specialty 專科                 | Nephrology 腎科                                                                                              |                                        | Board Certified |
| Other Languages Spoken 語言    | Spanish Español, Tagalog, Ukranian, Russian Русский                                                        |                                        |                 |
| Education 醫科學院               | University of California, Davis                                                                            |                                        |                 |
| Hospital Affiliations 醫院聯網   | Seton Medical Center, St. Mary's Medical Center, Mills-Peninsula Medical Center                            |                                        |                 |
| <b>Cruz, Christian, MD</b>   |                                                                                                            | NPI #: 1023182227 CA License #: A96754 |                 |
| Primary Care Provider 主診醫生   | No 不是                                                                                                      | New Patients 接受新病人                     | No 不是           |
| Address 地址                   | 1498 Southgate Avenue Suite 102<br>Daly City, CA 94015 Burlingame, CA 94010                                |                                        |                 |
| Phone 電話                     | (650) 755-4490 (650) 989-5001                                                                              |                                        |                 |
| Email 電子郵件                   |                                                                                                            |                                        |                 |
| Medical Group(s):            | CCHP, Jade Health Care                                                                                     |                                        |                 |
| Specialty 專科                 | Nephrology 腎科                                                                                              |                                        | Board Certified |
| Other Languages Spoken 語言    | Tagalog, Spanish Español, Russian Русский                                                                  |                                        |                 |
| Education 醫科學院               | Mount Sinai School of Medicine                                                                             |                                        |                 |
| Hospital Affiliations 醫院聯網   | Seton Medical Center, St. Mary's Medical Center, Mills-Peninsula Medical Center                            |                                        |                 |
| <b>Jain, Rashmi, MD</b>      |                                                                                                            | NPI #: 1346444577 CA License #: C42911 |                 |
| Primary Care Provider 主診醫生   | Yes 是                                                                                                      | New Patients 接受新病人                     | Yes 是           |
| Address 地址                   | 1828 El Camino Real Suite 407<br>Burlingame, CA 94010                                                      |                                        |                 |
| Phone 電話                     | (650) 777-0050                                                                                             |                                        |                 |
| Email 電子郵件                   |                                                                                                            |                                        |                 |
| Medical Group(s):            | Jade Health Care                                                                                           |                                        |                 |
| Specialty 專科                 | Nephrology 腎科                                                                                              |                                        | Board Certified |
| Other Languages Spoken 語言    | Spanish Español                                                                                            |                                        |                 |
| Education 醫科學院               | Aligarh Muslim University, Aligarh, Uttar Pradesh, India                                                   |                                        |                 |
| Hospital Affiliations 醫院聯網   | Mills-Peninsula Medical Center                                                                             |                                        |                 |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Nephrology 腎科                 |                                                                                                            |                                         |                 |
|-------------------------------|------------------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------|
| <b>Kao, Albert, MD</b>        |                                                                                                            | NPI #: 1225099286 CA License #: A75956  |                 |
| Primary Care Provider 主診醫生    | No 不是                                                                                                      | New Patients 接受新病人                      | No 不是           |
| Address 地址                    | 1498 Southgate Avenue Suite 102 1860 El Camino Real Suite 321*<br>Daly City, CA 94015 Burlingame, CA 94010 |                                         |                 |
| Phone 電話                      | (650) 755-4490 (650) 755-4490                                                                              |                                         |                 |
| Email 電子郵件                    |                                                                                                            |                                         |                 |
| Medical Group(s):             | CCHP                                                                                                       |                                         |                 |
| Specialty 專科                  | Nephrology 腎科                                                                                              |                                         | Board Certified |
| Other Languages Spoken 語言     | Spanish Español, Tagalog, Ukrainian, Russian Русский                                                       |                                         |                 |
| Education 醫科學院                | Yale University School of Medicine                                                                         |                                         |                 |
| Hospital Affiliations 醫院聯網    | Seton Medical Center, Mills-Peninsula Medical Center, St. Mary's Medical Center                            |                                         |                 |
| <b>Sanjorjo, Josephus, MD</b> |                                                                                                            | NPI #: 1073808168 CA License #: A117377 |                 |
| Primary Care Provider 主診醫生    | No 不是                                                                                                      | New Patients 接受新病人                      | Yes 是           |
| Address 地址                    | 1800 Sullivan Avenue Suite 507<br>Daly City, CA 94015                                                      |                                         |                 |
| Phone 電話                      | (650) 817-7188                                                                                             |                                         |                 |
| Email 電子郵件                    | jsanjorjo@gmail.com                                                                                        |                                         |                 |
| Medical Group(s):             | CCHP, Jade Health Care                                                                                     |                                         |                 |
| Specialty 專科                  | Nephrology 腎科                                                                                              |                                         | Board Eligible  |
| Other Languages Spoken 語言     | Spanish Español, Visaya, Arabic العربية, Cantonese 粵語                                                      |                                         |                 |
| Education 醫科學院                | Ross University                                                                                            |                                         |                 |
| Hospital Affiliations 醫院聯網    | Seton Medical Center                                                                                       |                                         |                 |
| <b>Tseng, Robert, MD 曾瑞年</b>  |                                                                                                            | NPI #: 1053371559 CA License #: A66496  |                 |
| Primary Care Provider 主診醫生    | No 不是                                                                                                      | New Patients 接受新病人                      | No 不是           |
| Address 地址                    | 1498 Southgate Avenue Suite 102 1860 El Camino Real Suite 321<br>Daly City, CA 94015 Burlingame, CA 94010  |                                         |                 |
| Phone 電話                      | (650) 755-4490 (650) 755-4490                                                                              |                                         |                 |
| Email 電子郵件                    |                                                                                                            |                                         |                 |
| Medical Group(s):             | CCHP, Jade Health Care                                                                                     |                                         |                 |
| Specialty 專科                  | Nephrology 腎科                                                                                              |                                         | Board Certified |
| Other Languages Spoken 語言     | Spanish Español, Tagalog, Ukrainian, Russian Русский                                                       |                                         |                 |
| Education 醫科學院                | Hahnemann University                                                                                       |                                         |                 |
| Hospital Affiliations 醫院聯網    | St. Mary's Medical Center, Seton Medical Center                                                            |                                         |                 |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Neurological Surgery 神經外科  |                                                              |                                        |                |
|----------------------------|--------------------------------------------------------------|----------------------------------------|----------------|
| <b>Andrews, Brian, MD</b>  |                                                              | NPI #: 1710935887 CA License #: G48858 |                |
| Primary Care Provider 主診醫生 | No 不是                                                        | New Patients 接受新病人                     | Yes 是          |
| Address 地址                 | 345 Lorton Ave #102*<br>Burlingame, CA 94010                 |                                        |                |
| Phone 電話                   | (415) 814-3429                                               |                                        |                |
| Email 電子郵件                 |                                                              |                                        |                |
| Medical Group(s):          | CCHP                                                         |                                        |                |
| Specialty 專科               | Neurological Surgery 神經外科                                    |                                        | Board Eligible |
| Other Languages Spoken 語言  |                                                              |                                        |                |
| Education 醫科學院             | University of California, San Francisco                      |                                        |                |
| Hospital Affiliations 醫院聯網 |                                                              |                                        |                |
| <b>Berta, Scott, MD</b>    |                                                              | NPI #: 1780878967 CA License #: A91971 |                |
| Primary Care Provider 主診醫生 | No 不是                                                        | New Patients 接受新病人                     | Yes 是          |
| Address 地址                 | 445 Hickey Boulevard #31<br>Daly City, CA 94015              |                                        |                |
| Phone 電話                   | (650) 339-1000                                               |                                        |                |
| Email 電子郵件                 |                                                              |                                        |                |
| Medical Group(s):          | Jade Health Care                                             |                                        |                |
| Specialty 專科               | Neurological Surgery 神經外科                                    |                                        | Board Eligible |
| Other Languages Spoken 語言  |                                                              |                                        |                |
| Education 醫科學院             | Sidney Kimmel Medical College at Thomas Jefferson University |                                        |                |
| Hospital Affiliations 醫院聯網 | St. Francis Memorial Hospital, Seton Medical Center          |                                        |                |

## CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Neurology 腦科               |                                                    |                                        |                |
|----------------------------|----------------------------------------------------|----------------------------------------|----------------|
| Belfer, Howard, MD         |                                                    | NPI #: 1740206457 CA License #: C41237 |                |
| Primary Care Provider 主診醫生 | No 不是                                              | New Patients 接受新病人                     | Yes 是          |
| Address 地址                 | 101 North El Camino Real #5<br>San Mateo, CA 94401 |                                        |                |
| Phone 電話                   | (650) 342-7604                                     |                                        |                |
| Email 電子郵件                 |                                                    |                                        |                |
| Medical Group(s):          | CCHP, Jade Health Care                             |                                        |                |
| Specialty 專科               | Neurology 腦科                                       |                                        | Board Eligible |
| Other Languages Spoken 語言  |                                                    |                                        |                |
| Education 醫科學院             | John Hopkins University School of Medicine         |                                        |                |
| Hospital Affiliations 醫院聯網 |                                                    |                                        |                |

## CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Nuclear Medicine 核醫學科      |                                             |                                        |                 |
|----------------------------|---------------------------------------------|----------------------------------------|-----------------|
| Gerard, Stephen, MD        |                                             | NPI #: 1417043191 CA License #: G50781 |                 |
| Primary Care Provider 主診醫生 | No 不是                                       | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 1900 Sullivan Avenue<br>Daly City, CA 94015 |                                        |                 |
| Phone 電話                   | (650) 991-6471                              |                                        |                 |
| Email 電子郵件                 | skgnuc@comcast.net                          |                                        |                 |
| Medical Group(s):          | CCHP, Jade Health Care                      |                                        |                 |
| Specialty 專科               | Nuclear Medicine 核醫學科<br>Pathology 病理科      |                                        | Board Certified |
| Other Languages Spoken 語言  | Spanish Español, Tagalog                    |                                        |                 |
| Education 醫科學院             | Vanderbilt University                       |                                        |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center                        |                                        |                 |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Obstetrics & Gynecology 婦產科  |                                                       |                                        |                |
|------------------------------|-------------------------------------------------------|----------------------------------------|----------------|
| <b>Cabrera, Milagros, MD</b> |                                                       | NPI #: 1316026099 CA License #: G78372 |                |
| Primary Care Provider 主診醫生   | No 不是                                                 | New Patients 接受新病人                     | Yes 是          |
| Address 地址                   | 1850 Sullivan Avenue Suite 550<br>Daly City, CA 94015 |                                        |                |
| Phone 電話                     | (650) 756-2404                                        |                                        |                |
| Email 電子郵件                   | office@baogmds.com                                    |                                        |                |
| Medical Group(s):            | Jade Health Care                                      |                                        |                |
| Specialty 專科                 | Obstetrics & Gynecology 婦產科                           |                                        | Board Eligible |
| Other Languages Spoken 語言    | Spanish Español, Cantonese 粵語                         |                                        |                |
| Education 醫科學院               | Rush Medical College                                  |                                        |                |
| Hospital Affiliations 醫院聯網   | Seton Medical Center, Mills-Peninsula Medical Center  |                                        |                |
| <b>Hamilton, Henry, MD</b>   |                                                       | NPI #: 1417927534 CA License #: A39569 |                |
| Primary Care Provider 主診醫生   | No 不是                                                 | New Patients 接受新病人                     | Yes 是          |
| Address 地址                   | 1820 Ogden Drive 2nd Floor<br>Burlingame, CA 94010    |                                        |                |
| Phone 電話                     | (650) 239-5303                                        |                                        |                |
| Email 電子郵件                   |                                                       |                                        |                |
| Medical Group(s):            | Jade Health Care                                      |                                        |                |
| Specialty 專科                 | Obstetrics & Gynecology 婦產科                           |                                        | Board Eligible |
| Other Languages Spoken 語言    |                                                       |                                        |                |
| Education 醫科學院               |                                                       |                                        |                |
| Hospital Affiliations 醫院聯網   | Mills-Peninsula Medical Center                        |                                        |                |
| <b>Hu, Emily, MD</b>         |                                                       | NPI #: 1649358946 CA License #: A76856 |                |
| Primary Care Provider 主診醫生   | No 不是                                                 | New Patients 接受新病人                     | Yes 是          |
| Address 地址                   | 1850 Sullivan Avenue Suite 550<br>Daly City, CA 94015 |                                        |                |
| Phone 電話                     | (650) 756-2404                                        |                                        |                |
| Email 電子郵件                   | office@baogmds.com                                    |                                        |                |
| Medical Group(s):            | Jade Health Care                                      |                                        |                |
| Specialty 專科                 | Obstetrics & Gynecology 婦產科                           |                                        | Board Eligible |
| Other Languages Spoken 語言    | Spanish Español, Mandarin 國語, Cantonese 粵語            |                                        |                |
| Education 醫科學院               | Columbia University                                   |                                        |                |
| Hospital Affiliations 醫院聯網   | Seton Medical Center, CPMC - Pacific Campus           |                                        |                |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Obstetrics & Gynecology 婦產科     |                                                    |                                        |                 |
|---------------------------------|----------------------------------------------------|----------------------------------------|-----------------|
| <b>Margolis, Michael, MD</b>    |                                                    | NPI #: 1467475046 CA License #: G83323 |                 |
| Primary Care Provider 主診醫生      | No 不是                                              | New Patients 接受新病人                     | Yes 是           |
| Address 地址                      | 1820 Ogden Dr 2nd Fl<br>Burlingame, CA 94010       |                                        |                 |
| Phone 電話                        | (650) 375-1644                                     |                                        |                 |
| Email 電子郵件                      |                                                    |                                        |                 |
| Medical Group(s):               | Jade Health Care                                   |                                        |                 |
| Specialty 專科                    | Obstetrics & Gynecology 婦產科                        |                                        | Board Certified |
| Other Languages Spoken 語言       |                                                    |                                        |                 |
| Education 醫科學院                  |                                                    |                                        |                 |
| Hospital Affiliations 醫院聯網      |                                                    |                                        |                 |
| <b>Rittenhouse, Douglas, MD</b> |                                                    | NPI #: 1386717023 CA License #: G67775 |                 |
| Primary Care Provider 主診醫生      | No 不是                                              | New Patients 接受新病人                     | Yes 是           |
| Address 地址                      | 1850 Sullivan Ave. Ste. 550<br>Daly City, CA 94015 |                                        |                 |
| Phone 電話                        | (650) 250-5518                                     |                                        |                 |
| Email 電子郵件                      |                                                    |                                        |                 |
| Medical Group(s):               | Jade Health Care                                   |                                        |                 |
| Specialty 專科                    | Obstetrics & Gynecology 婦產科                        |                                        | Board Eligible  |
| Other Languages Spoken 語言       |                                                    |                                        |                 |
| Education 醫科學院                  |                                                    |                                        |                 |
| Hospital Affiliations 醫院聯網      | Seton Medical Center                               |                                        |                 |
| <b>Serrato, Claire, MD</b>      |                                                    | NPI #: 1275700841 CA License #: G80700 |                 |
| Primary Care Provider 主診醫生      | No 不是                                              | New Patients 接受新病人                     | Yes 是           |
| Address 地址                      | 1820 Ogden Dr 2nd Fl<br>Burlingame, CA 94010       |                                        |                 |
| Phone 電話                        | (650) 239-5303                                     |                                        |                 |
| Email 電子郵件                      |                                                    |                                        |                 |
| Medical Group(s):               | Jade Health Care                                   |                                        |                 |
| Specialty 專科                    | Obstetrics & Gynecology 婦產科                        |                                        | Board Eligible  |
| Other Languages Spoken 語言       |                                                    |                                        |                 |
| Education 醫科學院                  |                                                    |                                        |                 |
| Hospital Affiliations 醫院聯網      |                                                    |                                        |                 |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Obstetrics & Gynecology 婦產科  |                                                       |                                        |                |
|------------------------------|-------------------------------------------------------|----------------------------------------|----------------|
| <b>Shapiro, Katie, MD</b>    |                                                       | NPI #: 1851470454 CA License #: G63009 |                |
| Primary Care Provider 主診醫生   | No 不是                                                 | New Patients 接受新病人                     | Yes 是          |
| Address 地址                   | 1850 Sullivan Avenue Suite 312<br>Daly City, CA 94015 |                                        |                |
| Phone 電話                     | (650) 756-4663                                        |                                        |                |
| Email 電子郵件                   | womenshealthgroupdalycity@gmail                       |                                        |                |
| Medical Group(s):            | CCHP                                                  |                                        |                |
| Specialty 專科                 | Obstetrics & Gynecology 婦產科                           |                                        | Board Eligible |
| Other Languages Spoken 語言    | Spanish Español                                       |                                        |                |
| Education 醫科學院               | Oregon Health Sciences University                     |                                        |                |
| Hospital Affiliations 醫院聯網   | Seton Medical Center, Mills-Peninsula Medical Center  |                                        |                |
| <b>Singleton, Pamela, MD</b> |                                                       | NPI #: 1396860037 CA License #: G72840 |                |
| Primary Care Provider 主診醫生   | No 不是                                                 | New Patients 接受新病人                     | Yes 是          |
| Address 地址                   | 1850 Sullivan Avenue Suite 550<br>Daly City, CA 94015 |                                        |                |
| Phone 電話                     | (650) 756-2404                                        |                                        |                |
| Email 電子郵件                   | office@baogmds.com                                    |                                        |                |
| Medical Group(s):            | Jade Health Care                                      |                                        |                |
| Specialty 專科                 | Obstetrics & Gynecology 婦產科                           |                                        | Board Eligible |
| Other Languages Spoken 語言    | Spanish Español, Cantonese 粵語, Mandarin 國語            |                                        |                |
| Education 醫科學院               | UCSF School of Medicine                               |                                        |                |
| Hospital Affiliations 醫院聯網   | Seton Medical Center, Mills-Peninsula Medical Center  |                                        |                |
| <b>Stodgel, Thomas, MD</b>   |                                                       | NPI #: 1609819630 CA License #: A49612 |                |
| Primary Care Provider 主診醫生   | No 不是                                                 | New Patients 接受新病人                     | Yes 是          |
| Address 地址                   | 1820 Ogden Dr 2nd Fl<br>Burlingame, CA 94010          |                                        |                |
| Phone 電話                     | (650) 239-5303                                        |                                        |                |
| Email 電子郵件                   |                                                       |                                        |                |
| Medical Group(s):            | Jade Health Care                                      |                                        |                |
| Specialty 專科                 | Obstetrics & Gynecology 婦產科                           |                                        | Board Eligible |
| Other Languages Spoken 語言    |                                                       |                                        |                |
| Education 醫科學院               |                                                       |                                        |                |
| Hospital Affiliations 醫院聯網   |                                                       |                                        |                |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Obstetrics & Gynecology 婦產科 |                                                       |                                        |                |
|-----------------------------|-------------------------------------------------------|----------------------------------------|----------------|
| <b>Zeng, Rong Wendy, MD</b> |                                                       | NPI #: 1568661056 CA License #: A96001 |                |
| Primary Care Provider 主診醫生  | No 不是                                                 | New Patients 接受新病人                     | Yes 是          |
| Address 地址                  | 1850 Sullivan Avenue Suite 550<br>Daly City, CA 94015 |                                        |                |
| Phone 電話                    | (650) 756-2404                                        |                                        |                |
| Email 電子郵件                  | office@baogmds.com                                    |                                        |                |
| Medical Group(s):           | Jade Health Care                                      |                                        |                |
| Specialty 專科                | Obstetrics & Gynecology 婦產科                           |                                        | Board Eligible |
| Other Languages Spoken 語言   | Cantonese 粵語, Spanish Español, Mandarin 國語, Tagalog   |                                        |                |
| Education 醫科學院              | Hunan Medical College, China                          |                                        |                |
| Hospital Affiliations 醫院聯網  | Chinese Hospital, Seton Medical Center                |                                        |                |
| <b>Zhou, Ying, MD</b>       |                                                       | NPI #: 1427142330 CA License #: A93795 |                |
| Primary Care Provider 主診醫生  | No 不是                                                 | New Patients 接受新病人                     | Yes 是          |
| Address 地址                  | 1750 El Camino Real #102<br>Burlingame, CA 94010      |                                        |                |
| Phone 電話                    | (650) 692-8080                                        |                                        |                |
| Email 電子郵件                  | joyzhoumd@gmail.com                                   |                                        |                |
| Medical Group(s):           | CCHP, Jade Health Care                                |                                        |                |
| Specialty 專科                | Obstetrics & Gynecology 婦產科                           |                                        | Board Eligible |
| Other Languages Spoken 語言   | Mandarin 國語, Cantonese 粵語                             |                                        |                |
| Education 醫科學院              | Capital Institute of Medical Sciences, Beijing, China |                                        |                |
| Hospital Affiliations 醫院聯網  | Mills-Peninsula Medical Center                        |                                        |                |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Ophthalmology 眼科           |                                                                                             |                                        |                 |
|----------------------------|---------------------------------------------------------------------------------------------|----------------------------------------|-----------------|
| <b>Buckley, Daniel, MD</b> |                                                                                             | NPI #: 1013916733 CA License #: G62652 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                                       | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 1800 Sullivan Avenue Suite 410<br>Daly City, CA 94015                                       |                                        |                 |
| Phone 電話                   | (650) 991-9007                                                                              |                                        |                 |
| Email 電子郵件                 | buckleye@pacbell.net                                                                        |                                        |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                                      |                                        |                 |
| Specialty 專科               | Ophthalmology 眼科                                                                            |                                        | Board Certified |
| Other Languages Spoken 語言  | Spanish Español                                                                             |                                        |                 |
| Education 醫科學院             | Tulane University                                                                           |                                        |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center, St. Mary's Medical Center                                             |                                        |                 |
| <b>Calman, Andrew, MD</b>  |                                                                                             | NPI #: 1447322169 CA License #: G69615 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                                       | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 210 Main St*<br>Half Moon Bay, CA 94019                                                     |                                        |                 |
| Phone 電話                   | (415) 648-3600                                                                              |                                        |                 |
| Email 電子郵件                 |                                                                                             |                                        |                 |
| Medical Group(s):          | Jade Health Care                                                                            |                                        |                 |
| Specialty 專科               | Ophthalmology 眼科                                                                            |                                        | Board Certified |
| Other Languages Spoken 語言  | Spanish Español, Tagalog, French Français                                                   |                                        |                 |
| Education 醫科學院             | University of California, San Francisco                                                     |                                        |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital, CPMC - St. Luke's Campus, St. Mary's Medical Center, Seton Medical Center |                                        |                 |
| <b>Fu, Arthur, MD</b>      |                                                                                             | NPI #: 1609844604 CA License #: A76165 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                                       | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 101 South San Mateo Drive #306*<br>San Mateo, CA 94401                                      |                                        |                 |
| Phone 電話                   | (650) 342-7137                                                                              |                                        |                 |
| Email 電子郵件                 | wcr@westcoastretina.com                                                                     |                                        |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                                      |                                        |                 |
| Specialty 專科               | Ophthalmology 眼科                                                                            |                                        | Board Certified |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語, Spanish Español, Russian Русский, Tagalog,                       |                                        |                 |
| Education 醫科學院             | University of North Carolina School of Medicine                                             |                                        |                 |
| Hospital Affiliations 醫院聯網 | St. Mary's Medical Center, Mills-Peninsula Medical Center                                   |                                        |                 |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

## Ophthalmology 眼科

| Hee, Michael, MD           |                                                                   | NPI #:1801891551   |  | CA License #: A71248  |                 |
|----------------------------|-------------------------------------------------------------------|--------------------|--|-----------------------|-----------------|
| Primary Care Provider 主診醫生 | No 不是                                                             | New Patients 接受新病人 |  | Yes 是                 |                 |
| Address 地址                 | 1850 Sullivan Avenue Suite 540<br>Daly City, CA 94015             |                    |  |                       |                 |
| Phone 電話                   | (650) 755-6900                                                    |                    |  |                       |                 |
| Email 電子郵件                 | lbtopo@yahoo.com                                                  |                    |  |                       |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                            |                    |  |                       |                 |
| Specialty 專科               | Ophthalmology 眼科                                                  |                    |  |                       | Board Certified |
| Other Languages Spoken 語言  | Cantonese 粵語, Spanish EspañolMandarin 國語                          |                    |  |                       |                 |
| Education 醫科學院             | Harvard University                                                |                    |  |                       |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center, St. Mary's Medical Center, Chinese Hospital |                    |  |                       |                 |
| Kirschner, Bruce, MD       |                                                                   | NPI #:1972699015   |  | CA License #: G44283  |                 |
| Primary Care Provider 主診醫生 | No 不是                                                             | New Patients 接受新病人 |  | Yes 是                 |                 |
| Address 地址                 | 1828 El Camino Real Suite 404<br>Burlingame, CA 94010             |                    |  |                       |                 |
| Phone 電話                   | (650) 692-8788                                                    |                    |  |                       |                 |
| Email 電子郵件                 | maceye@aol.com                                                    |                    |  |                       |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                            |                    |  |                       |                 |
| Specialty 專科               | Ophthalmology 眼科                                                  |                    |  |                       | Board Certified |
| Other Languages Spoken 語言  | Spanish Español, Tagalog                                          |                    |  |                       |                 |
| Education 醫科學院             | Georgetown University of Medicine                                 |                    |  |                       |                 |
| Hospital Affiliations 醫院聯網 | Mills-Peninsula Medical Center                                    |                    |  |                       |                 |
| Liu, Ting Ting, MD         |                                                                   | NPI #:1518256130   |  | CA License #: A136354 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                             | New Patients 接受新病人 |  | Yes 是                 |                 |
| Address 地址                 | 1850 Sullivan Avenue Suite 500<br>Daly City, CA 94015             |                    |  |                       |                 |
| Phone 電話                   | (650) 992-9221                                                    |                    |  |                       |                 |
| Email 電子郵件                 |                                                                   |                    |  |                       |                 |
| Medical Group(s):          | Jade Health Care                                                  |                    |  |                       |                 |
| Specialty 專科               | Ophthalmology 眼科                                                  |                    |  |                       | Board Eligible  |
| Other Languages Spoken 語言  | Spanish Español                                                   |                    |  |                       |                 |
| Education 醫科學院             | Jefferson Medical College                                         |                    |  |                       |                 |
| Hospital Affiliations 醫院聯網 |                                                                   |                    |  |                       |                 |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

## Ophthalmology 眼科

| Longar, Susan, MD          |                                                                       | NPI #: 1578506960  |  | CA License #: G75139 |                 |
|----------------------------|-----------------------------------------------------------------------|--------------------|--|----------------------|-----------------|
| Primary Care Provider 主診醫生 | No 不是                                                                 | New Patients 接受新病人 |  | Yes 是                |                 |
| Address 地址                 | 1850 Sullivan Avenue Suite 500<br>Daly City, CA 94015                 |                    |  |                      |                 |
| Phone 電話                   | (650) 992-9221                                                        |                    |  |                      |                 |
| Email 電子郵件                 | susanlongareyemd@gmail.com;                                           |                    |  |                      |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                |                    |  |                      |                 |
| Specialty 專科               | Ophthalmology 眼科                                                      |                    |  |                      | Board Certified |
| Other Languages Spoken 語言  | Spanish Español, Tagalog                                              |                    |  |                      |                 |
| Education 醫科學院             | University of California, Davis                                       |                    |  |                      |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center, CPMC - St. Luke's Campus                        |                    |  |                      |                 |
| McDonald, Henry, MD        |                                                                       | NPI #: 1720056567  |  | CA License #: G45366 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                 | New Patients 接受新病人 |  | Yes 是                |                 |
| Address 地址                 | 101 South San Mateo Drive #306*<br>San Mateo, CA 94401                |                    |  |                      |                 |
| Phone 電話                   | (650) 342-7137                                                        |                    |  |                      |                 |
| Email 電子郵件                 | wcr@westcoastretina.com                                               |                    |  |                      |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                |                    |  |                      |                 |
| Specialty 專科               | Ophthalmology 眼科                                                      |                    |  |                      | Board Eligible  |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語, Spanish Español, Russian Русский, Tagalog, |                    |  |                      |                 |
| Education 醫科學院             | University of California, Los Angeles                                 |                    |  |                      |                 |
| Hospital Affiliations 醫院聯網 |                                                                       |                    |  |                      |                 |
| Seiff, Stuart, MD          |                                                                       | NPI #: 1114928561  |  | CA License #: G45235 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                 | New Patients 接受新病人 |  | Yes 是                |                 |
| Address 地址                 | 1241 East Hillsdale Boulevard #24<br>San Mateo, CA 94404              |                    |  |                      |                 |
| Phone 電話                   | (650) 525-9030                                                        |                    |  |                      |                 |
| Email 電子郵件                 | eyeservices@pacificeye.com                                            |                    |  |                      |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                |                    |  |                      |                 |
| Specialty 專科               | Ophthalmology 眼科                                                      |                    |  |                      | Board Certified |
| Other Languages Spoken 語言  | Spanish Español, Cantonese 粵語, Mandarin 國語, Russian Русский           |                    |  |                      |                 |
| Education 醫科學院             | University of California, San Francisco                               |                    |  |                      |                 |
| Hospital Affiliations 醫院聯網 | Mills-Peninsula Medical Center                                        |                    |  |                      |                 |

## CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Ophthalmology 眼科           |                                                   |                                        |                 |
|----------------------------|---------------------------------------------------|----------------------------------------|-----------------|
| Villanueva, Anthony, MD    |                                                   | NPI #: 1750344636 CA License #: A39828 |                 |
| Primary Care Provider 主診醫生 | No 不是                                             | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 901 Campus Drive Suite 203<br>Daly City, CA 94015 |                                        |                 |
| Phone 電話                   | (650) 992-2010                                    |                                        |                 |
| Email 電子郵件                 | tonyvmd@yahoo.com                                 |                                        |                 |
| Medical Group(s):          | CCHP, Jade Health Care                            |                                        |                 |
| Specialty 專科               | Ophthalmology 眼科                                  |                                        | Board Certified |
| Other Languages Spoken 語言  | Spanish Español, Tagalog                          |                                        |                 |
| Education 醫科學院             | University of Santo Tomas, Philippines            |                                        |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center                              |                                        |                 |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Optometrist                |                                                       |                                            |                |
|----------------------------|-------------------------------------------------------|--------------------------------------------|----------------|
| <b>Kung, Eleanor, OD</b>   |                                                       | NPI #: 1841503018 CA License #: OPT13961TL |                |
| Primary Care Provider 主診醫生 | No 不是                                                 | New Patients 接受新病人                         | Yes 是          |
| Address 地址                 | 386 Gellert Boulevard<br>Daly City, CA 94015          |                                            |                |
| Phone 電話                   | (650) 761-3521                                        |                                            |                |
| Email 電子郵件                 |                                                       |                                            |                |
| Medical Group(s):          | CCHP, Jade Health Care                                |                                            |                |
| Specialty 專科               | Optometrist                                           |                                            | Board Eligible |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語, English                    |                                            |                |
| Education 醫科學院             | University of California Berkeley School of Optometry |                                            |                |
| Hospital Affiliations 醫院聯網 |                                                       |                                            |                |
| <b>Wu, Teresa, OD</b>      |                                                       | NPI #: 1194764340 CA License #: 11540TLG   |                |
| Primary Care Provider 主診醫生 | No 不是                                                 | New Patients 接受新病人                         | Yes 是          |
| Address 地址                 | 386 Gellert Boulevard<br>Daly City, CA 94015          |                                            |                |
| Phone 電話                   | (650) 761-3521                                        |                                            |                |
| Email 電子郵件                 |                                                       |                                            |                |
| Medical Group(s):          | CCHP, Jade Health Care                                |                                            |                |
| Specialty 專科               | Optometrist                                           |                                            | Board Eligible |
| Other Languages Spoken 語言  | Mandarin 國語, Cantonese 粵語                             |                                            |                |
| Education 醫科學院             | Illinois College of Optometry                         |                                            |                |
| Hospital Affiliations 醫院聯網 |                                                       |                                            |                |

## CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Optometry 視光科              |                                              |                                            |                |
|----------------------------|----------------------------------------------|--------------------------------------------|----------------|
| Chu, Chiao-Chiao, OD       |                                              | NPI #: 1215240510 CA License #: OPT13874TL |                |
| Primary Care Provider 主診醫生 | No 不是                                        | New Patients 接受新病人                         | Yes 是          |
| Address 地址                 | 386 Gellert Boulevard<br>Daly City, CA 94015 |                                            |                |
| Phone 電話                   | (650) 761-3500                               |                                            |                |
| Email 電子郵件                 |                                              |                                            |                |
| Medical Group(s):          | CCHP, Jade Health Care                       |                                            |                |
| Specialty 專科               | Optometry 視光科                                |                                            | Board Eligible |
| Other Languages Spoken 語言  | Mandarin 國語, Cantonese 粵語, English           |                                            |                |
| Education 醫科學院             |                                              |                                            |                |
| Hospital Affiliations 醫院聯網 |                                              |                                            |                |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Orthopedic Surgery 骨科       |                                                                 |                                         |                 |
|-----------------------------|-----------------------------------------------------------------|-----------------------------------------|-----------------|
| <b>Abbi, Gaurav, MD</b>     |                                                                 | NPI #: 1700074853 CA License #: A102193 |                 |
| Primary Care Provider 主診醫生  | No 不是                                                           | New Patients 接受新病人                      | Yes 是           |
| Address 地址                  | 2171 Junipero Serra Boulevard #3<br>Daly City, CA 94014         |                                         |                 |
| Phone 電話                    | (650) 993-8349                                                  |                                         |                 |
| Email 電子郵件                  |                                                                 |                                         |                 |
| Medical Group(s):           | Jade Health Care                                                |                                         |                 |
| Specialty 專科                | Orthopedic Surgery 骨科<br>Orthopedic Surgery (Spine) 矯形外科 ( 脊椎 ) |                                         | Board Certified |
| Other Languages Spoken 語言   | Cantonese 粵語, Mandarin 國語, Spanish Español                      |                                         |                 |
| Education 醫科學院              | UCSD                                                            |                                         |                 |
| Hospital Affiliations 醫院聯網  | St. Francis Memorial Hospital, Seton Medical Center             |                                         |                 |
| <b>Barber, Victoria, MD</b> |                                                                 | NPI #: 1962418533 CA License #: G72492  |                 |
| Primary Care Provider 主診醫生  | No 不是                                                           | New Patients 接受新病人                      | Yes 是           |
| Address 地址                  | 1850 Sullivan Avenue Suite 330<br>Daly City, CA 94015           |                                         |                 |
| Phone 電話                    | (650) 756-5630                                                  |                                         |                 |
| Email 電子郵件                  | info@poadocs.com                                                |                                         |                 |
| Medical Group(s):           | CCHP, Jade Health Care                                          |                                         |                 |
| Specialty 專科                | Orthopedic Surgery 骨科                                           |                                         | Board Certified |
| Other Languages Spoken 語言   | Spanish Español, Tagalog, Cantonese 粵語                          |                                         |                 |
| Education 醫科學院              | Yale University                                                 |                                         |                 |
| Hospital Affiliations 醫院聯網  | Seton Medical Center, Mills-Peninsula Medical Center            |                                         |                 |
| <b>Khan, Aman, MD</b>       |                                                                 | NPI #: 1093721672 CA License #: A60839  |                 |
| Primary Care Provider 主診醫生  | No 不是                                                           | New Patients 接受新病人                      | Yes 是           |
| Address 地址                  | 1850 Sullivan Avenue Suite 330<br>Daly City, CA 94015           |                                         |                 |
| Phone 電話                    | (650) 756-5630                                                  |                                         |                 |
| Email 電子郵件                  | info@poadocs.com                                                |                                         |                 |
| Medical Group(s):           | CCHP, Jade Health Care                                          |                                         |                 |
| Specialty 專科                | Orthopedic Surgery 骨科<br>Sports Medicine 運動醫科                   |                                         | Board Certified |
| Other Languages Spoken 語言   | Spanish Español, Tagalog, Cantonese 粵語                          |                                         |                 |
| Education 醫科學院              | University of California, San Francisco                         |                                         |                 |
| Hospital Affiliations 醫院聯網  | Seton Medical Center                                            |                                         |                 |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Orthopedic Surgery 骨科      |                                                           |                                         |                 |
|----------------------------|-----------------------------------------------------------|-----------------------------------------|-----------------|
| <b>Kim, Leslie, MD</b>     |                                                           | NPI #: 1427022482 CA License #: G41605  |                 |
| Primary Care Provider 主診醫生 | No 不是                                                     | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 1850 Sullivan Avenue Suite 330<br>Daly City, CA 94015     |                                         |                 |
| Phone 電話                   | (650) 756-5630                                            |                                         |                 |
| Email 電子郵件                 | info@poadocs.com                                          |                                         |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                    |                                         |                 |
| Specialty 專科               | Orthopedic Surgery 骨科                                     |                                         | Board Certified |
| Other Languages Spoken 語言  | Spanish Español, Tagalog                                  |                                         |                 |
| Education 醫科學院             | Stanford University, School of Medicine                   |                                         |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center, Mills Health Center                 |                                         |                 |
| <b>Lo, Eddie, MD</b>       |                                                           | NPI #: 1376722017 CA License #: A102816 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                     | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 2171 Junipero Serra Boulevard #3<br>Daly City, CA 94014   |                                         |                 |
| Phone 電話                   | (650) 993-8349                                            |                                         |                 |
| Email 電子郵件                 | eddielomd@gmail.com                                       |                                         |                 |
| Medical Group(s):          | Jade Health Care                                          |                                         |                 |
| Specialty 專科               | Orthopedic Surgery 骨科<br>Sports Medicine 運動醫科             |                                         | Board Eligible  |
| Other Languages Spoken 語言  | Mandarin, Chinese, Spanish Español, Cantonese 粵語, Chinese |                                         |                 |
| Education 醫科學院             | Columbia University College of Physicians & Surgeons      |                                         |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital, Seton Medical Center                    |                                         |                 |
| <b>Missirian, John, MD</b> |                                                           | NPI #: 1972569499 CA License #: C37815  |                 |
| Primary Care Provider 主診醫生 | No 不是                                                     | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 1800 Sullivan Avenue Suite 604*<br>Daly City, CA 94015    |                                         |                 |
| Phone 電話                   | (650) 993-8170                                            |                                         |                 |
| Email 電子郵件                 | RHernandez@Ortho88.com                                    |                                         |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                    |                                         |                 |
| Specialty 專科               | Orthopedic Surgery 骨科                                     |                                         | Board Certified |
| Other Languages Spoken 語言  | English, French Français, Armenian, Arabic العربية        |                                         |                 |
| Education 醫科學院             | American University of Beirut, Lebanon                    |                                         |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center, St. Francis Memorial Hospital       |                                         |                 |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Orthopedic Surgery 骨科      |                                                                 |                                        |                 |
|----------------------------|-----------------------------------------------------------------|----------------------------------------|-----------------|
| <b>Okumu, Kris, MD</b>     |                                                                 | NPI #: 1679736300 CA License #: A92195 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                           | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 1800 Sullivan Avenue Suite 602<br>Daly City, CA 94015           |                                        |                 |
| Phone 電話                   | (650) 962-5700                                                  |                                        |                 |
| Email 電子郵件                 |                                                                 |                                        |                 |
| Medical Group(s):          | Jade Health Care                                                |                                        |                 |
| Specialty 專科               | Orthopedic Surgery 骨科<br>Orthopedic Surgery (Spine) 矯形外科 ( 脊椎 ) |                                        | Board Eligible  |
| Other Languages Spoken 語言  | Tongan, Spanish Español, Spanish Español                        |                                        |                 |
| Education 醫科學院             | UC Davis School of Medicine                                     |                                        |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center                                            |                                        |                 |
| <b>Sciaroni, Laura, MD</b> |                                                                 | NPI #: 1649236019 CA License #: A68521 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                           | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 1500 Southgate Avenue Suite 202<br>Daly City, CA 94015          |                                        |                 |
| Phone 電話                   | (650) 351-8299                                                  |                                        |                 |
| Email 電子郵件                 |                                                                 |                                        |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                          |                                        |                 |
| Specialty 專科               | Orthopedic Surgery 骨科<br>Sports Medicine 運動醫科                   |                                        | Board Certified |
| Other Languages Spoken 語言  | Tagalog, Spanish Español                                        |                                        |                 |
| Education 醫科學院             | Medical College of Wisconsin                                    |                                        |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center, St. Francis Memorial Hospital             |                                        |                 |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Orthopedic Surgery (Spine) 矯形外科 ( 脊椎 ) |                                                                 |                                        |                |
|----------------------------------------|-----------------------------------------------------------------|----------------------------------------|----------------|
| <b>Abbi, Gaurav, MD</b>                |                                                                 | NPI #:1700074853 CA License #: A102193 |                |
| Primary Care Provider 主診醫生             | No 不是                                                           | New Patients 接受新病人                     | Yes 是          |
| Address 地址                             | 2171 Junipero Serra Boulevard #3<br>Daly City, CA 94014         |                                        |                |
| Phone 電話                               | (650) 993-8349                                                  |                                        |                |
| Email 電子郵件                             |                                                                 |                                        |                |
| Medical Group(s):                      | Jade Health Care                                                |                                        |                |
| Specialty 專科                           | Orthopedic Surgery (Spine) 矯形外科 ( 脊椎 )<br>Orthopedic Surgery 骨科 |                                        | Board Eligible |
| Other Languages Spoken 語言              | Cantonese 粵語, Mandarin 國語, Spanish Español                      |                                        |                |
| Education 醫科學院                         | UCSD                                                            |                                        |                |
| Hospital Affiliations 醫院聯網             | St. Francis Memorial Hospital, Seton Medical Center             |                                        |                |
| <b>Okumu, Kris, MD</b>                 |                                                                 | NPI #:1679736300 CA License #: A92195  |                |
| Primary Care Provider 主診醫生             | No 不是                                                           | New Patients 接受新病人                     | Yes 是          |
| Address 地址                             | 1800 Sullivan Avenue Suite 602<br>Daly City, CA 94015           |                                        |                |
| Phone 電話                               | (650) 962-5700                                                  |                                        |                |
| Email 電子郵件                             |                                                                 |                                        |                |
| Medical Group(s):                      | Jade Health Care                                                |                                        |                |
| Specialty 專科                           | Orthopedic Surgery (Spine) 矯形外科 ( 脊椎 )<br>Orthopedic Surgery 骨科 |                                        | Board Eligible |
| Other Languages Spoken 語言              | Tongan, Spanish Español, Spanish Español                        |                                        |                |
| Education 醫科學院                         | UC Davis School of Medicine                                     |                                        |                |
| Hospital Affiliations 醫院聯網             | Seton Medical Center                                            |                                        |                |

## CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Otolaryngology 耳鼻喉科        |                                                                              |                                       |       |
|----------------------------|------------------------------------------------------------------------------|---------------------------------------|-------|
| Wu, James, MD              |                                                                              | NPI #:1720070113 CA License #: A91181 |       |
| Primary Care Provider 主診醫生 | No 不是                                                                        | New Patients 接受新病人                    | Yes 是 |
| Address 地址                 | 1800 Sullivan Avenue Suite 411<br>Daly City, CA 94015                        |                                       |       |
| Phone 電話                   | (650) 994-3223                                                               |                                       |       |
| Email 電子郵件                 | facemd@gmail.com                                                             |                                       |       |
| Medical Group(s):          | Jade Health Care                                                             |                                       |       |
| Specialty 專科               | Otolaryngology 耳鼻喉科 Board Certified<br>Plastic & Reconstructive Surgery 整容外科 |                                       |       |
| Other Languages Spoken 語言  | Spanish Español, Portuguese português, Tagalog, Mandarin 國語                  |                                       |       |
| Education 醫科學院             | University of Illinois                                                       |                                       |       |
| Hospital Affiliations 醫院聯網 | Seton Medical Center                                                         |                                       |       |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Pain Management 疼痛管理科        |                                                                                                         |                                         |                |
|------------------------------|---------------------------------------------------------------------------------------------------------|-----------------------------------------|----------------|
| <b>Fujinaka, Michael, MD</b> |                                                                                                         | NPI #: 1598051278 CA License #: A123278 |                |
| Primary Care Provider 主診醫生   | No 不是                                                                                                   | New Patients 接受新病人                      | Yes 是          |
| Address 地址                   | 1241 East Hillsdale Boulevard Suite 333 Gellert Blvd Ste 130<br>San Mateo, CA 94404 Daly City, CA 94015 |                                         |                |
| Phone 電話                     | (650) 667-2322 (650) 667-2322                                                                           |                                         |                |
| Email 電子郵件                   | michaelfujinaka@gmail.com                                                                               |                                         |                |
| Medical Group(s):            | Jade Health Care                                                                                        |                                         |                |
| Specialty 專科                 | Pain Management 疼痛管理科                                                                                   |                                         | Board Eligible |
| Other Languages Spoken 語言    |                                                                                                         |                                         |                |
| Education 醫科學院               | University of California San Diego School of Medicine                                                   |                                         |                |
| Hospital Affiliations 醫院聯網   | Stanford Health Care, Mills Health Center                                                               |                                         |                |
| <b>Jones, Carri, MD</b>      |                                                                                                         | NPI #: 1023114733 CA License #: G89284  |                |
| Primary Care Provider 主診醫生   | No 不是                                                                                                   | New Patients 接受新病人                      | Yes 是          |
| Address 地址                   | 1850 Sullivan Avenue Suite 330<br>Daly City, CA 94015                                                   |                                         |                |
| Phone 電話                     | (650) 756-5630                                                                                          |                                         |                |
| Email 電子郵件                   | INFO@POADOCS.COM                                                                                        |                                         |                |
| Medical Group(s):            | CCHP, Jade Health Care                                                                                  |                                         |                |
| Specialty 專科                 | Pain Management 疼痛管理科<br>Physical Medicine & Rehab 物理及康復治療科                                             |                                         | Board Eligible |
| Other Languages Spoken 語言    | Spanish Español, Tagalog                                                                                |                                         |                |
| Education 醫科學院               | New York Medical College                                                                                |                                         |                |
| Hospital Affiliations 醫院聯網   | Seton Medical Center                                                                                    |                                         |                |
| <b>Sclafani, Joseph, MD</b>  |                                                                                                         | NPI #: 1629364088 CA License #: A125526 |                |
| Primary Care Provider 主診醫生   | No 不是                                                                                                   | New Patients 接受新病人                      | Yes 是          |
| Address 地址                   | 333 Gellert Blvd Ste 130 1241 E Hillsdale Blvd Ste 200<br>Daly City, CA 94015 San Mateo, CA 94404       |                                         |                |
| Phone 電話                     | (650) 667-2322 (650) 667-2322                                                                           |                                         |                |
| Email 電子郵件                   |                                                                                                         |                                         |                |
| Medical Group(s):            | Jade Health Care                                                                                        |                                         |                |
| Specialty 專科                 | Pain Management 疼痛管理科<br>Physical Medicine & Rehab 物理及康復治療科                                             |                                         | Board Eligible |
| Other Languages Spoken 語言    |                                                                                                         |                                         |                |
| Education 醫科學院               | University Of California San Diego Medicine                                                             |                                         |                |
| Hospital Affiliations 醫院聯網   |                                                                                                         |                                         |                |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Pathology 病理科              |                                             |                                        |                 |
|----------------------------|---------------------------------------------|----------------------------------------|-----------------|
| <b>Gerard, Stephen, MD</b> |                                             | NPI #: 1417043191 CA License #: G50781 |                 |
| Primary Care Provider 主診醫生 | No 不是                                       | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 1900 Sullivan Avenue<br>Daly City, CA 94015 |                                        |                 |
| Phone 電話                   | (650) 991-6471                              |                                        |                 |
| Email 電子郵件                 | skgnuc@comcast.net                          |                                        |                 |
| Medical Group(s):          | CCHP, Jade Health Care                      |                                        |                 |
| Specialty 專科               | Pathology 病理科<br>Nuclear Medicine 核醫學科      |                                        | Board Certified |
| Other Languages Spoken 語言  | Spanish Español, Tagalog                    |                                        |                 |
| Education 醫科學院             | Vanderbilt University                       |                                        |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center                        |                                        |                 |
| <b>Jacobs, Don, MD</b>     |                                             | NPI #: 1548354087 CA License #: G40956 |                 |
| Primary Care Provider 主診醫生 | No 不是                                       | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 1900 Sullivan Avenue<br>Daly City, CA 94015 |                                        |                 |
| Phone 電話                   | (650) 991-6471                              |                                        |                 |
| Email 電子郵件                 | donjacobs@Verity.org                        |                                        |                 |
| Medical Group(s):          | CCHP, Jade Health Care                      |                                        |                 |
| Specialty 專科               | Pathology 病理科                               |                                        | Board Eligible  |
| Other Languages Spoken 語言  | Spanish Español, Italian Italiano           |                                        |                 |
| Education 醫科學院             | Indiana University                          |                                        |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center                        |                                        |                 |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Physical Medicine & Rehab 物理及康復治療科 |                                                                   |                                                                        |                |
|------------------------------------|-------------------------------------------------------------------|------------------------------------------------------------------------|----------------|
| <b>Chen, Yung, MD</b>              |                                                                   | NPI #: 1386601623 CA License #: A54788                                 |                |
| Primary Care Provider 主診醫生         | No 不是                                                             | New Patients 接受新病人                                                     | Yes 是          |
| Address 地址                         | 101 South San Mateo Drive #301<br>San Mateo, CA 94401             |                                                                        |                |
| Phone 電話                           | (650) 558-1802                                                    |                                                                        |                |
| Email 電子郵件                         |                                                                   |                                                                        |                |
| Medical Group(s):                  | CCHP                                                              |                                                                        |                |
| Specialty 專科                       | Physical Medicine & Rehab 物理及康復治療科                                |                                                                        | Board Eligible |
| Other Languages Spoken 語言          | Cantonese 粵語, Vietnamese 越南語                                      |                                                                        |                |
| Education 醫科學院                     | Baylor University                                                 |                                                                        |                |
| Hospital Affiliations 醫院聯網         | Seton Medical Center                                              |                                                                        |                |
| <b>Jones, Carri, MD</b>            |                                                                   | NPI #: 1023114733 CA License #: G89284                                 |                |
| Primary Care Provider 主診醫生         | No 不是                                                             | New Patients 接受新病人                                                     | Yes 是          |
| Address 地址                         | 1850 Sullivan Avenue Suite 330<br>Daly City, CA 94015             |                                                                        |                |
| Phone 電話                           | (650) 756-5630                                                    |                                                                        |                |
| Email 電子郵件                         | INFO@POADOCS.COM                                                  |                                                                        |                |
| Medical Group(s):                  | CCHP, Jade Health Care                                            |                                                                        |                |
| Specialty 專科                       | Physical Medicine & Rehab 物理及康復治療科<br>Pain Management 疼痛管理科       |                                                                        | Board Eligible |
| Other Languages Spoken 語言          | Spanish Español, Tagalog                                          |                                                                        |                |
| Education 醫科學院                     | New York Medical College                                          |                                                                        |                |
| Hospital Affiliations 醫院聯網         | Seton Medical Center                                              |                                                                        |                |
| <b>Sclafani, Joseph, MD</b>        |                                                                   | NPI #: 1629364088 CA License #: A125526                                |                |
| Primary Care Provider 主診醫生         | No 不是                                                             | New Patients 接受新病人                                                     | Yes 是          |
| Address 地址                         | 333 Gellert Blvd Ste 130<br>Daly City, CA 94015<br>(650) 667-2322 | 1241 E Hillsdale Blvd Ste 200<br>San Mateo, CA 94404<br>(650) 667-2322 |                |
| Phone 電話                           |                                                                   |                                                                        |                |
| Email 電子郵件                         |                                                                   |                                                                        |                |
| Medical Group(s):                  | Jade Health Care                                                  |                                                                        |                |
| Specialty 專科                       | Physical Medicine & Rehab 物理及康復治療科<br>Pain Management 疼痛管理科       |                                                                        | Board Eligible |
| Other Languages Spoken 語言          |                                                                   |                                                                        |                |
| Education 醫科學院                     | University Of California San Diego Medicine                       |                                                                        |                |
| Hospital Affiliations 醫院聯網         |                                                                   |                                                                        |                |

## CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Physician Assistant 助理醫師   |                                                          |                                       |                |
|----------------------------|----------------------------------------------------------|---------------------------------------|----------------|
| Davis, Lisa, PA-C          |                                                          | NPI #: 1972540599 CA License #: 18325 |                |
| Primary Care Provider 主診醫生 | No 不是                                                    | New Patients 接受新病人                    | Yes 是          |
| Address 地址                 | 2171 Junipero Serra Boulevard Sui<br>Daly City, CA 94014 |                                       |                |
| Phone 電話                   | (650) 993-8349                                           |                                       |                |
| Email 電子郵件                 |                                                          |                                       |                |
| Medical Group(s):          | CCHP, Jade Health Care                                   |                                       |                |
| Specialty 專科               | Physician Assistant 助理醫師                                 |                                       | Board Eligible |
| Other Languages Spoken 語言  |                                                          |                                       |                |
| Education 醫科學院             | Stanford University School of Medicine/Foothill College  |                                       |                |
| Hospital Affiliations 醫院聯網 | Seton Medical Center, Chinese Hospital                   |                                       |                |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Plastic & Reconstructive Surgery 整容外科 |                                                              |                                       |                |
|---------------------------------------|--------------------------------------------------------------|---------------------------------------|----------------|
| Wu, James, MD                         |                                                              | NPI #:1720070113 CA License #: A91181 |                |
| Primary Care Provider 主診醫生            | No 不是                                                        | New Patients 接受新病人                    | Yes 是          |
| Address 地址                            | 1800 Sullivan Avenue Suite 411<br>Daly City, CA 94015        |                                       |                |
| Phone 電話                              | (650) 994-3223                                               |                                       |                |
| Email 電子郵件                            | facemd@gmail.com                                             |                                       |                |
| Medical Group(s):                     | Jade Health Care                                             |                                       |                |
| Specialty 專科                          | Plastic & Reconstructive Surgery 整容外科<br>Otolaryngology 耳鼻喉科 |                                       | Board Eligible |
| Other Languages Spoken 語言             | Spanish Español, Portuguese português, Tagalog, Mandarin 國語  |                                       |                |
| Education 醫科學院                        | University of Illinois                                       |                                       |                |
| Hospital Affiliations 醫院聯網            | Seton Medical Center                                         |                                       |                |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Podiatry 足科                 |                                                       |                                                   |                 |
|-----------------------------|-------------------------------------------------------|---------------------------------------------------|-----------------|
| <b>Cohen, Irwin, DPM</b>    |                                                       | NPI #: 1164515623 CA License #: E1610             |                 |
| Primary Care Provider 主診醫生  | No 不是                                                 | New Patients 接受新病人                                | Yes 是           |
| Address 地址                  | 585 Kelly Street<br>Half Moon Bay, CA 94019           |                                                   |                 |
| Phone 電話                    | (650) 726-3338                                        |                                                   |                 |
| Email 電子郵件                  | dpmhyc@aol.com                                        |                                                   |                 |
| Medical Group(s):           | CCHP, Jade Health Care                                |                                                   |                 |
| Specialty 專科                | Podiatry 足科                                           |                                                   | Board Certified |
| Other Languages Spoken 語言   | Spanish Español                                       |                                                   |                 |
| Education 醫科學院              | Pennsylvania College of Podiatric Medicine            |                                                   |                 |
| Hospital Affiliations 醫院聯網  | Stanford Health Care                                  |                                                   |                 |
| <b>Kelly, Pardis, DPM</b>   |                                                       | NPI #: 1487684189 CA License #: E4158             |                 |
| Primary Care Provider 主診醫生  | No 不是                                                 | New Patients 接受新病人                                | Yes 是           |
| Address 地址                  | 1100 Laurel Street Suite E<br>San Carlos, CA 94070    |                                                   |                 |
| Phone 電話                    | (650) 595-4148                                        |                                                   |                 |
| Email 電子郵件                  | prdiskelly@yahoo.com                                  |                                                   |                 |
| Medical Group(s):           | Jade Health Care                                      |                                                   |                 |
| Specialty 專科                | Podiatry 足科                                           |                                                   | Board Eligible  |
| Other Languages Spoken 語言   | Farsi                                                 |                                                   |                 |
| Education 醫科學院              | California College of Podiatric Medicine              |                                                   |                 |
| Hospital Affiliations 醫院聯網  |                                                       |                                                   |                 |
| <b>Stavosky, James, DPM</b> |                                                       | NPI #: 1871548271 CA License #: E3238             |                 |
| Primary Care Provider 主診醫生  | No 不是                                                 | New Patients 接受新病人                                | Yes 是           |
| Address 地址                  | 1800 Sullivan Avenue Suite 401<br>Daly City, CA 94015 | 150 South Gate Avenue #115<br>Daly City, CA 94015 |                 |
| Phone 電話                    | (650) 755-3338                                        | (650) 991-6780                                    |                 |
| Email 電子郵件                  | naiyap@dcfeet.com                                     |                                                   |                 |
| Medical Group(s):           | CCHP, Jade Health Care                                |                                                   |                 |
| Specialty 專科                | Podiatry 足科                                           |                                                   | Board Certified |
| Other Languages Spoken 語言   | Spanish Español                                       |                                                   |                 |
| Education 醫科學院              | California College of Podiatric Medicine              |                                                   |                 |
| Hospital Affiliations 醫院聯網  | Seton Medical Center                                  |                                                   |                 |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

## Podiatry 足科

| Tarran, William, DPM       |                                                       | NPI #:1952391450   |       | CA License #: E3623 |                 |
|----------------------------|-------------------------------------------------------|--------------------|-------|---------------------|-----------------|
| Primary Care Provider 主診醫生 | No 不是                                                 | New Patients 接受新病人 | Yes 是 |                     |                 |
| Address 地址                 | 1216 Seville Drive Suite A<br>Pacifica, CA 94044      |                    |       |                     |                 |
| Phone 電話                   | (650) 757-3338                                        |                    |       |                     |                 |
| Email 電子郵件                 | wtarran@sbcglobal.net                                 |                    |       |                     |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                |                    |       |                     |                 |
| Specialty 專科               | Podiatry 足科                                           |                    |       |                     | Board Certified |
| Other Languages Spoken 語言  | Spanish Español                                       |                    |       |                     |                 |
| Education 醫科學院             | California College of Podiatric Medicine              |                    |       |                     |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center, Mills-Peninsula Medical Center  |                    |       |                     |                 |
| Valdez, Tomas, DPM         |                                                       | NPI #:1811092687   |       | CA License #: E3922 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                 | New Patients 接受新病人 | Yes 是 |                     |                 |
| Address 地址                 | 1850 Sullivan Avenue Suite 310<br>Daly City, CA 94015 |                    |       |                     |                 |
| Phone 電話                   | (650) 993-4680                                        |                    |       |                     |                 |
| Email 電子郵件                 | tvaldezdp@gmail.com                                   |                    |       |                     |                 |
| Medical Group(s):          | CCHP                                                  |                    |       |                     |                 |
| Specialty 專科               | Podiatry 足科                                           |                    |       |                     | Board Certified |
| Other Languages Spoken 語言  | Tagalog                                               |                    |       |                     |                 |
| Education 醫科學院             | California College of Podiatric Medicine              |                    |       |                     |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center                                  |                    |       |                     |                 |
| Wong, Vincent, DPM 黃育威     |                                                       | NPI #:1417051657   |       | CA License #: E3798 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                 | New Patients 接受新病人 | Yes 是 |                     |                 |
| Address 地址                 | 386 Gellert Boulevard*<br>Daly City, CA 94015         |                    |       |                     |                 |
| Phone 電話                   | (650) 761-3500                                        |                    |       |                     |                 |
| Email 電子郵件                 |                                                       |                    |       |                     |                 |
| Medical Group(s):          | Jade Health Care                                      |                    |       |                     |                 |
| Specialty 專科               | Podiatry 足科                                           |                    |       |                     | Board Eligible  |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語, Vietnamese 越南語             |                    |       |                     |                 |
| Education 醫科學院             | California College of Podiatric Medicine              |                    |       |                     |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital                                      |                    |       |                     |                 |

## CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Pulmonary Disease 胸肺科      |                                                             |                                        |                |
|----------------------------|-------------------------------------------------------------|----------------------------------------|----------------|
| Lim, Melissa, MD           |                                                             | NPI #: 1013910777 CA License #: G74100 |                |
| Primary Care Provider 主診醫生 | No 不是                                                       | New Patients 接受新病人                     | Yes 是          |
| Address 地址                 | 170 Alameda De Las Pulgas<br>Redwood City, CA 94062         |                                        |                |
| Phone 電話                   | (650) 367-5636                                              |                                        |                |
| Email 電子郵件                 |                                                             |                                        |                |
| Medical Group(s):          | Jade Health Care                                            |                                        |                |
| Specialty 專科               | Pulmonary Disease 胸肺科<br>Sleep Medicine 睡眠研究醫學專家            |                                        | Board Eligible |
| Other Languages Spoken 語言  | French Français, Spanish Español, Tagalog                   |                                        |                |
| Education 醫科學院             | Ohio State University College of Medicine and Public Health |                                        |                |
| Hospital Affiliations 醫院聯網 |                                                             |                                        |                |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Radiation Oncology 放射性腫瘤科  |                                                                                |                                        |                 |
|----------------------------|--------------------------------------------------------------------------------|----------------------------------------|-----------------|
| <b>Abendroth, Roy, MD</b>  |                                                                                | NPI #: 1811988421 CA License #: G60844 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                          | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 1900 Sullivan Avenue Suite LI120*<br>Daly City, CA 94015                       |                                        |                 |
| Phone 電話                   | (650) 992-4000                                                                 |                                        |                 |
| Email 電子郵件                 |                                                                                |                                        |                 |
| Medical Group(s):          | CCHP                                                                           |                                        |                 |
| Specialty 專科               | Radiation Oncology 放射性腫瘤科                                                      |                                        | Board Eligible  |
| Other Languages Spoken 語言  |                                                                                |                                        |                 |
| Education 醫科學院             |                                                                                |                                        |                 |
| Hospital Affiliations 醫院聯網 | CPMC - St. Luke's Campus, St. Francis Memorial Hospital                        |                                        |                 |
| <b>Chauser, Barry, MD</b>  |                                                                                | NPI #: 1902897515 CA License #: G12439 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                          | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 1900 Sullivan Avenue LL-120<br>Daly City, CA 94015                             |                                        |                 |
| Phone 電話                   | (650) 991-6728                                                                 |                                        |                 |
| Email 電子郵件                 |                                                                                |                                        |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                         |                                        |                 |
| Specialty 專科               | Radiation Oncology 放射性腫瘤科                                                      |                                        | Board Eligible  |
| Other Languages Spoken 語言  | Spanish Español, Tagalog, Mandarin 國語                                          |                                        |                 |
| Education 醫科學院             | University of Pittsburgh                                                       |                                        |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center, St. Francis Memorial Hospital                            |                                        |                 |
| <b>Wu, Meiwen, MD</b>      |                                                                                | NPI #: 1255312880 CA License #: A73496 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                          | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 1900 Sullivan Avenue LL-120<br>Daly City, CA 94015                             |                                        |                 |
| Phone 電話                   | (650) 991-6728                                                                 |                                        |                 |
| Email 電子郵件                 |                                                                                |                                        |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                         |                                        |                 |
| Specialty 專科               | Radiation Oncology 放射性腫瘤科                                                      |                                        | Board Certified |
| Other Languages Spoken 語言  | Spanish Español, Mandarin, cantonese, Tagalog, Cantonese 粵語                    |                                        |                 |
| Education 醫科學院             | Guangzhou Medical College, China                                               |                                        |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center, St. Francis Memorial Hospital, St. Mary's Medical Center |                                        |                 |

## CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Radiation Oncology 放射性腫瘤科  |                                                     |                                        |                 |
|----------------------------|-----------------------------------------------------|----------------------------------------|-----------------|
| Young, Clarence, MD        |                                                     | NPI #: 1649261371 CA License #: A68208 |                 |
| Primary Care Provider 主診醫生 | No 不是                                               | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 170 Alameda De Las Pulgas<br>Redwood City, CA 94062 |                                        |                 |
| Phone 電話                   | (650) 367-5591                                      |                                        |                 |
| Email 電子郵件                 | cdaleyoung@gmail.com                                |                                        |                 |
| Medical Group(s):          | Jade Health Care                                    |                                        |                 |
| Specialty 專科               | Radiation Oncology 放射性腫瘤科                           |                                        | Board Certified |
| Other Languages Spoken 語言  | Spanish Español                                     |                                        |                 |
| Education 醫科學院             | University of Florida College of Medicine           |                                        |                 |
| Hospital Affiliations 醫院聯網 |                                                     |                                        |                 |

## CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Rheumatology 風濕科           |                                                                             |                                        |                |
|----------------------------|-----------------------------------------------------------------------------|----------------------------------------|----------------|
| Chan, Michael, MD 陳國樑      |                                                                             | NPI #: 1063413714 CA License #: G29657 |                |
| Primary Care Provider 主診醫生 | Yes 是                                                                       | New Patients 接受新病人                     | Yes 是          |
| Address 地址                 | 1828 El Camino Real Suite 406*<br>Burlingame, CA 94010                      |                                        |                |
| Phone 電話                   | (650) 697-2490                                                              |                                        |                |
| Email 電子郵件                 |                                                                             |                                        |                |
| Medical Group(s):          | Jade Health Care                                                            |                                        |                |
| Specialty 專科               | Rheumatology 風濕科                                                            |                                        | Board Eligible |
| Other Languages Spoken 語言  | Cantonese 粵語, Mandarin 國語                                                   |                                        |                |
| Education 醫科學院             | Creighton University                                                        |                                        |                |
| Hospital Affiliations 醫院聯網 | Chinese Hospital, St. Mary's Medical Center, Mills-Peninsula Medical Center |                                        |                |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Sleep Medicine 睡眠研究醫學專家    |                                                             |                                        |                |
|----------------------------|-------------------------------------------------------------|----------------------------------------|----------------|
| Lim, Melissa, MD           |                                                             | NPI #: 1013910777 CA License #: G74100 |                |
| Primary Care Provider 主診醫生 | No 不是                                                       | New Patients 接受新病人                     | Yes 是          |
| Address 地址                 | 170 Alameda De Las Pulgas<br>Redwood City, CA 94062         |                                        |                |
| Phone 電話                   | (650) 367-5636                                              |                                        |                |
| Email 電子郵件                 |                                                             |                                        |                |
| Medical Group(s):          | Jade Health Care                                            |                                        |                |
| Specialty 專科               | Sleep Medicine 睡眠研究醫學專家<br>Pulmonary Disease 胸肺科            |                                        | Board Eligible |
| Other Languages Spoken 語言  | French Français, Spanish Español, Tagalog                   |                                        |                |
| Education 醫科學院             | Ohio State University College of Medicine and Public Health |                                        |                |
| Hospital Affiliations 醫院聯網 |                                                             |                                        |                |

## CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Speech Pathology 言語治療科     |                               |                                         |                |
|----------------------------|-------------------------------|-----------------------------------------|----------------|
| Kong, Shannon, SLP         |                               | NPI #: 1083796601 CA License #: SP10617 |                |
| Primary Care Provider 主診醫生 | No 不是                         | New Patients 接受新病人                      | Yes 是          |
| Address 地址                 | 2015 Pioneer Courte Suite P2* |                                         |                |
| Phone 電話                   | San Mateo, CA 94403           |                                         |                |
| Email 電子郵件                 | (510) 639-2929                |                                         |                |
| Medical Group(s):          | Jade Health Care              |                                         |                |
| Specialty 專科               | Speech Pathology 言語治療科        |                                         | Board Eligible |
| Other Languages Spoken 語言  |                               |                                         |                |
| Education 醫科學院             |                               |                                         |                |
| Hospital Affiliations 醫院聯網 |                               |                                         |                |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Sports Medicine 運動醫科       |                                                            |                                         |                 |
|----------------------------|------------------------------------------------------------|-----------------------------------------|-----------------|
| <b>Jones, Carri, MD</b>    |                                                            | NPI #: 1023114733 CA License #: G89284  |                 |
| Primary Care Provider 主診醫生 | No 不是                                                      | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 1850 Sullivan Avenue Suite 330<br>Daly City, CA 94015      |                                         |                 |
| Phone 電話                   | (650) 756-5630                                             |                                         |                 |
| Email 電子郵件                 | INFO@POADOCS.COM                                           |                                         |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                     |                                         |                 |
| Specialty 專科               | Sports Medicine 運動醫科<br>Physical Medicine & Rehab 物理及康復治療科 |                                         | Board Eligible  |
| Other Languages Spoken 語言  | Spanish Español, Tagalog                                   |                                         |                 |
| Education 醫科學院             | New York Medical College                                   |                                         |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center                                       |                                         |                 |
| <b>Khan, Aman, MD</b>      |                                                            | NPI #: 1093721672 CA License #: A60839  |                 |
| Primary Care Provider 主診醫生 | No 不是                                                      | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 1850 Sullivan Avenue Suite 330<br>Daly City, CA 94015      |                                         |                 |
| Phone 電話                   | (650) 756-5630                                             |                                         |                 |
| Email 電子郵件                 | info@poadocs.com                                           |                                         |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                     |                                         |                 |
| Specialty 專科               | Sports Medicine 運動醫科<br>Orthopedic Surgery 骨科              |                                         | Board Certified |
| Other Languages Spoken 語言  | Spanish Español, Tagalog, Cantonese 粵語                     |                                         |                 |
| Education 醫科學院             | University of California, San Francisco                    |                                         |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center                                       |                                         |                 |
| <b>Lo, Eddie, MD</b>       |                                                            | NPI #: 1376722017 CA License #: A102816 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                      | New Patients 接受新病人                      | Yes 是           |
| Address 地址                 | 2171 Junipero Serra Boulevard #3<br>Daly City, CA 94014    |                                         |                 |
| Phone 電話                   | (650) 993-8349                                             |                                         |                 |
| Email 電子郵件                 | eddielomd@gmail.com                                        |                                         |                 |
| Medical Group(s):          | Jade Health Care                                           |                                         |                 |
| Specialty 專科               | Sports Medicine 運動醫科<br>Orthopedic Surgery 骨科              |                                         | Board Eligible  |
| Other Languages Spoken 語言  | Mandarin, Chinese, Spanish Español, Cantonese 粵語, Chinese  |                                         |                 |
| Education 醫科學院             | Columbia University College of Physicians & Surgeons       |                                         |                 |
| Hospital Affiliations 醫院聯網 | Chinese Hospital, Seton Medical Center                     |                                         |                 |

## CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Sports Medicine 運動醫科       |                                                        |                                        |                |
|----------------------------|--------------------------------------------------------|----------------------------------------|----------------|
| Sciaroni, Laura, MD        |                                                        | NPI #: 1649236019 CA License #: A68521 |                |
| Primary Care Provider 主診醫生 | No 不是                                                  | New Patients 接受新病人                     | Yes 是          |
| Address 地址                 | 1500 Southgate Avenue Suite 202<br>Daly City, CA 94015 |                                        |                |
| Phone 電話                   | (650) 351-8299                                         |                                        |                |
| Email 電子郵件                 |                                                        |                                        |                |
| Medical Group(s):          | CCHP, Jade Health Care                                 |                                        |                |
| Specialty 專科               | Sports Medicine 運動醫科<br>Orthopedic Surgery 骨科          |                                        | Board Eligible |
| Other Languages Spoken 語言  | Tagalog, Spanish Español                               |                                        |                |
| Education 醫科學院             | Medical College of Wisconsin                           |                                        |                |
| Hospital Affiliations 醫院聯網 | Seton Medical Center, St. Francis Memorial Hospital    |                                        |                |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Thoracic Surgery 胸腔外科         |                                                                   |                                        |                |
|-------------------------------|-------------------------------------------------------------------|----------------------------------------|----------------|
| <b>Baladi, Naoum, MD</b>      |                                                                   | NPI #: 1295740173 CA License #: A43839 |                |
| Primary Care Provider 主診醫生    | No 不是                                                             | New Patients 接受新病人                     | Yes 是          |
| Address 地址                    | 1500 Southgate Avenue Suite 209<br>Daly City, CA 94015            |                                        |                |
| Phone 電話                      | (650) 991-2662                                                    |                                        |                |
| Email 電子郵件                    |                                                                   |                                        |                |
| Medical Group(s):             | Jade Health Care                                                  |                                        |                |
| Specialty 專科                  | Thoracic Surgery 胸腔外科<br>CardioThoracic Surgery 心臟外科              |                                        | Board Eligible |
| Other Languages Spoken 語言     | English                                                           |                                        |                |
| Education 醫科學院                | University of Aleppo Faculty of Medicine                          |                                        |                |
| Hospital Affiliations 醫院聯網    | Seton Medical Center, St. Mary's Medical Center                   |                                        |                |
| <b>Yap, Alexander, MD 葉燕山</b> |                                                                   | NPI #: 1346254463 CA License #: A37855 |                |
| Primary Care Provider 主診醫生    | No 不是                                                             | New Patients 接受新病人                     | Yes 是          |
| Address 地址                    | 1500 Southgate Avenue Suite 209<br>Daly City, CA 94015            |                                        |                |
| Phone 電話                      | (650) 991-2662                                                    |                                        |                |
| Email 電子郵件                    |                                                                   |                                        |                |
| Medical Group(s):             | CCHP, Jade Health Care                                            |                                        |                |
| Specialty 專科                  | Thoracic Surgery 胸腔外科                                             |                                        | Board Eligible |
| Other Languages Spoken 語言     | Mandarin 國語                                                       |                                        |                |
| Education 醫科學院                | University of Santo Tomas, Philippines                            |                                        |                |
| Hospital Affiliations 醫院聯網    | St. Mary's Medical Center, Chinese Hospital, Seton Medical Center |                                        |                |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Urology 泌尿科                |                                                                                                                                                         |                                        |                 |
|----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-----------------|
| <b>Grady, Brian, MD</b>    |                                                                                                                                                         | NPI #: 1417018813 CA License #: A60523 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                                                                                                   | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 1800 Sullivan Avenue #408 1850 Sullivan Ave Ste 300*<br>Daly City, CA 94015 Daly City, CA 94015<br>Phone 電話 (415) 861-0600 (415) 861-0600<br>Email 電子郵件 |                                        |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                                                                                                  |                                        |                 |
| Specialty 專科               | Urology 泌尿科                                                                                                                                             |                                        | Board Certified |
| Other Languages Spoken 語言  | Spanish Español, Tagalog                                                                                                                                |                                        |                 |
| Education 醫科學院             | Dartmouth College                                                                                                                                       |                                        |                 |
| Hospital Affiliations 醫院聯網 | St. Mary's Medical Center, Seton Medical Center                                                                                                         |                                        |                 |
| <b>Hernandez, Raul, MD</b> |                                                                                                                                                         | NPI #: 1487721833 CA License #: G67342 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                                                                                                   | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 1800 Sullivan Ave Ste 408<br>Daly City, CA 94015<br>Phone 電話 (650) 991-3064<br>Email 電子郵件                                                               |                                        |                 |
| Medical Group(s):          | CCHP, Jade Health Care                                                                                                                                  |                                        |                 |
| Specialty 專科               | Urology 泌尿科                                                                                                                                             |                                        | Board Certified |
| Other Languages Spoken 語言  | Spanish Español, Tagalog                                                                                                                                |                                        |                 |
| Education 醫科學院             | University of Puerto Rico School of Medicine                                                                                                            |                                        |                 |
| Hospital Affiliations 醫院聯網 | Seton Medical Center, St. Mary's Medical Center, CPMC - St. Luke's Campus, St. Francis Memorial Hospital                                                |                                        |                 |
| <b>Melamud, Ori, MD</b>    |                                                                                                                                                         | NPI #: 1851447965 CA License #: A84986 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                                                                                                                   | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 1828 El Camino Real Suite 605<br>Burlingame, CA 94010<br>Phone 電話 (650) 692-1300<br>Email 電子郵件 debbie.melamud@gmail.com                                 |                                        |                 |
| Medical Group(s):          | CCHP                                                                                                                                                    |                                        |                 |
| Specialty 專科               | Urology 泌尿科                                                                                                                                             |                                        | Board Certified |
| Other Languages Spoken 語言  | Spanish Español                                                                                                                                         |                                        |                 |
| Education 醫科學院             | University of California, Irvine                                                                                                                        |                                        |                 |
| Hospital Affiliations 醫院聯網 | Mills-Peninsula Medical Center, Seton Medical Center                                                                                                    |                                        |                 |

# CCHP/Jade San Mateo County Specialists - 聖馬刁縣專科醫生

| Vascular Surgery 血管系外科      |                                                                                |                                        |                |
|-----------------------------|--------------------------------------------------------------------------------|----------------------------------------|----------------|
| <b>Aquino, Melinda, MD</b>  |                                                                                | NPI #: 1033190970 CA License #: A94731 |                |
| Primary Care Provider 主診醫生  | No 不是                                                                          | New Patients 接受新病人                     | Yes 是          |
| Address 地址                  | 1850 Sullivan Avenue Suite 300*<br>Daly City, CA 94015                         |                                        |                |
| Phone 電話                    | (650) 991-1122                                                                 |                                        |                |
| Email 電子郵件                  | info@sfveincenter.com                                                          |                                        |                |
| Medical Group(s):           | CCHP, Jade Health Care                                                         |                                        |                |
| Specialty 專科                | Vascular Surgery 血管系外科<br>General Surgery 普通外科                                 |                                        | Board Eligible |
| Other Languages Spoken 語言   | Spanish Español, English                                                       |                                        |                |
| Education 醫科學院              | Indiana University School of Medicine                                          |                                        |                |
| Hospital Affiliations 醫院聯網  | Seton Medical Center, St. Mary's Medical Center, St. Francis Memorial Hospital |                                        |                |
| <b>Scribner, Robert, MD</b> |                                                                                | NPI #: 1336150572 CA License #: G24490 |                |
| Primary Care Provider 主診醫生  | No 不是                                                                          | New Patients 接受新病人                     | Yes 是          |
| Address 地址                  | 1800 Sullivan Avenue Suite 308<br>Daly City, CA 94015                          |                                        |                |
| Phone 電話                    | (650) 755-1132                                                                 |                                        |                |
| Email 電子郵件                  | rscribner08@gmail.com                                                          |                                        |                |
| Medical Group(s):           | CCHP, Jade Health Care                                                         |                                        |                |
| Specialty 專科                | Vascular Surgery 血管系外科<br>General Surgery 普通外科                                 |                                        | Board Eligible |
| Other Languages Spoken 語言   | Tagalog                                                                        |                                        |                |
| Education 醫科學院              | University of Colorado                                                         |                                        |                |
| Hospital Affiliations 醫院聯網  | Seton Medical Center, St. Francis Memorial Hospital                            |                                        |                |

## Other Available Specialists (May Require Prior Authorization) :

其他可選專科醫生（可能需要事先申請）：

UCSF Medical Group Specialists / UCSF Medical Group Specialists 專科醫生

Sutter Pacific Medical Foundation Specialists / Sutter Pacific Medical Foundation Specialis 專科醫生

Stanford Medical Group Specialists / Stanford Medical Group Specialists 專科醫生

# San Mateo County Outpatient Mental Health - 聖馬刁縣精神健康門診醫生

| Licensed Professional Clinical Counselor 持牌專業臨床顧問 |                                                                                                                                                                       |                                     |       |
|---------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------|
| Wang, Minjun, LPCC, CHT                           |                                                                                                                                                                       | NPI #:1023461720 CA License #: 2970 |       |
| Primary Care Provider 主診醫生                        | No 不是                                                                                                                                                                 | New Patients 接受新病人                  | Yes 是 |
| Address 地址                                        | 1838 El Camino Real #230 11 Airport Boulevard Suite 204<br>Burlingame, CA 94010 South San Francisco, CA 94080<br>Phone 電話 (415) 429-6130 (415) 429-6130<br>Email 電子郵件 |                                     |       |
| Medical Group(s):                                 | Jade Health Care                                                                                                                                                      |                                     |       |
| Specialty 專科                                      | Licensed Professional Clinical Counselor 持牌專業臨床顧問 Board Eligible                                                                                                      |                                     |       |
| Other Languages Spoken 語言                         | Cantonese 粵語, Mandarin 國語                                                                                                                                             |                                     |       |
| Education 醫科學院                                    | Hunter College, City University of New York                                                                                                                           |                                     |       |
| Hospital Affiliations 醫院聯網                        |                                                                                                                                                                       |                                     |       |

# San Mateo County Outpatient Mental Health - 聖馬刁縣精神健康門診醫生

| Marriage and Family Therapist 婚姻及家庭治療師 |                                          |                                      |                |
|----------------------------------------|------------------------------------------|--------------------------------------|----------------|
| Poon, Henry, PhD, LMFT                 |                                          | NPI #:1427269422 CA License #: 35772 |                |
| Primary Care Provider 主診醫生             | No 不是                                    | New Patients 接受新病人                   | Yes 是          |
| Address 地址                             | 386 Gellert Boulevard*                   |                                      |                |
| Phone 電話                               | Daly City, CA 94015                      |                                      |                |
| Email 電子郵件                             | (650) 761-3500                           |                                      |                |
| Medical Group(s):                      | CCHP, Jade Health Care                   |                                      |                |
| Specialty 專科                           | Marriage and Family Therapist 婚姻及家庭治療師   |                                      | Board Eligible |
| Other Languages Spoken 語言              |                                          |                                      |                |
| Education 醫科學院                         | California Institute of Integral Studies |                                      |                |
| Hospital Affiliations 醫院聯網             |                                          |                                      |                |

# San Mateo County Outpatient Mental Health - 聖馬刁縣精神健康門診醫生

| Psychiatry 精神科                            |                                                        |                                                   |                 |
|-------------------------------------------|--------------------------------------------------------|---------------------------------------------------|-----------------|
| <b>Amin, Farzana, MD</b>                  |                                                        | NPI #:1669525911 CA License #: A95033             |                 |
| Primary Care Provider 主診醫生                | No 不是                                                  | New Patients 接受新病人                                | Yes 是           |
| Address 地址                                | 1710 South Amphett Boulevard #3<br>San Mateo, CA 94402 |                                                   |                 |
| Phone 電話                                  | (650) 273-4082                                         |                                                   |                 |
| Email 電子郵件                                |                                                        |                                                   |                 |
| Medical Group(s):                         | CCHP, Jade Health Care                                 |                                                   |                 |
| Specialty 專科                              | Psychiatry 精神科                                         |                                                   | Board Certified |
| Other Languages Spoken 語言                 | Hindi                                                  |                                                   |                 |
| Education 醫科學院                            | King Edward Medical College                            |                                                   |                 |
| Hospital Affiliations 醫院聯網                |                                                        |                                                   |                 |
| <b>Auza, Michael, MD</b>                  |                                                        | NPI #:1649560673 CA License #: A114483            |                 |
| Primary Care Provider 主診醫生                | No 不是                                                  | New Patients 接受新病人                                | Yes 是           |
| Address 地址                                | 455 Hickey Boulevard #414<br>Daly City, CA 94015       |                                                   |                 |
| Phone 電話                                  | (650) 301-4960                                         |                                                   |                 |
| Email 電子郵件                                |                                                        |                                                   |                 |
| Medical Group(s):                         | CCHP, Jade Health Care                                 |                                                   |                 |
| Specialty 專科                              | Psychiatry 精神科                                         |                                                   | Board Certified |
| Other Languages Spoken 語言                 |                                                        |                                                   |                 |
| Education 醫科學院                            | University of Virginia School of Medicine              |                                                   |                 |
| Hospital Affiliations 醫院聯網                |                                                        |                                                   |                 |
| <b>Comprehensive Psychiatric Services</b> |                                                        | NPI #:1184785834 CA License #: 2688               |                 |
| Primary Care Provider 主診醫生                | No 不是                                                  | New Patients 接受新病人                                | Yes 是           |
| Address 地址                                | 455 Hickey Boulevard, #414<br>Daly City, CA 94015      | 3 Waters Park Drive, #224*<br>San Mateo, CA 94403 |                 |
| Phone 電話                                  | (650) 301-4960                                         | (650) 393-4205                                    |                 |
| Email 電子郵件                                |                                                        |                                                   |                 |
| Medical Group(s):                         | CCHP, Jade Health Care                                 |                                                   |                 |
| Specialty 專科                              | Psychiatry 精神科                                         |                                                   | Board Eligible  |
| Other Languages Spoken 語言                 |                                                        |                                                   |                 |
| Education 醫科學院                            |                                                        |                                                   |                 |
| Hospital Affiliations 醫院聯網                |                                                        |                                                   |                 |

# San Mateo County Outpatient Mental Health - 聖馬刁縣精神健康門診醫生

| Psychiatry 精神科             |                                                      |                                        |                 |
|----------------------------|------------------------------------------------------|----------------------------------------|-----------------|
| <b>Gaw, Albert, MD</b>     |                                                      | NPI #:1376965277 CA License #: A37104  |                 |
| Primary Care Provider 主診醫生 | No 不是                                                | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 386 Gellert Boulevard*<br>Daly City, CA 94015        |                                        |                 |
| Phone 電話                   | (650) 761-3500                                       |                                        |                 |
| Email 電子郵件                 |                                                      |                                        |                 |
| Medical Group(s):          | CCHP, Jade Health Care                               |                                        |                 |
| Specialty 專科               | Psychiatry 精神科                                       |                                        | Board Certified |
| Other Languages Spoken 語言  |                                                      |                                        |                 |
| Education 醫科學院             | University of East, Magsaysay College                |                                        |                 |
| Hospital Affiliations 醫院聯網 |                                                      |                                        |                 |
| <b>Man, Wenyan, MD</b>     |                                                      | NPI #:1932455854 CA License #: A126714 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 455 Hickey Boulevard #414*<br>Daly City, CA 94015    |                                        |                 |
| Phone 電話                   | (650) 301-4960                                       |                                        |                 |
| Email 電子郵件                 |                                                      |                                        |                 |
| Medical Group(s):          | CCHP, Jade Health Care                               |                                        |                 |
| Specialty 專科               | Psychiatry 精神科                                       |                                        | Board Eligible  |
| Other Languages Spoken 語言  |                                                      |                                        |                 |
| Education 醫科學院             | UC San Diego                                         |                                        |                 |
| Hospital Affiliations 醫院聯網 |                                                      |                                        |                 |
| <b>Salmo, Samer, MD</b>    |                                                      | NPI #:1326277567 CA License #: A118488 |                 |
| Primary Care Provider 主診醫生 | No 不是                                                | New Patients 接受新病人                     | Yes 是           |
| Address 地址                 | 3 Waters Park Drive Suite 224<br>San Mateo, CA 94403 |                                        |                 |
| Phone 電話                   | (650) 393-4205                                       |                                        |                 |
| Email 電子郵件                 |                                                      |                                        |                 |
| Medical Group(s):          | CCHP, Jade Health Care                               |                                        |                 |
| Specialty 專科               | Psychiatry 精神科                                       |                                        | Board Eligible  |
| Other Languages Spoken 語言  |                                                      |                                        |                 |
| Education 醫科學院             | University of Aleppo Faculty of Medicine             |                                        |                 |
| Hospital Affiliations 醫院聯網 |                                                      |                                        |                 |

# San Mateo County Outpatient Mental Health - 聖馬刁縣精神健康門診醫生

| Psychiatry 精神科               |                                                       |                                        |                 |
|------------------------------|-------------------------------------------------------|----------------------------------------|-----------------|
| <b>Tran, Andrew, MD</b>      |                                                       | NPI #:1689732687 CA License #: C150320 |                 |
| Primary Care Provider 主診醫生   | No 不是                                                 | New Patients 接受新病人                     | Yes 是           |
| Address 地址                   | 3 Waters Park Drive, #224 #224<br>San Mateo, CA 94403 |                                        |                 |
| Phone 電話                     | (650) 393-4205                                        |                                        |                 |
| Email 電子郵件                   |                                                       |                                        |                 |
| Medical Group(s):            | CCHP                                                  |                                        |                 |
| Specialty 專科                 | Psychiatry 精神科                                        |                                        | Board Certified |
| Other Languages Spoken 語言    |                                                       |                                        |                 |
| Education 醫科學院               | Indiana University School of Medicine                 |                                        |                 |
| Hospital Affiliations 醫院聯網   |                                                       |                                        |                 |
| <b>Treskovich, Jacob, MD</b> |                                                       | NPI #:1376709444 CA License #: A127490 |                 |
| Primary Care Provider 主診醫生   | No 不是                                                 | New Patients 接受新病人                     | Yes 是           |
| Address 地址                   | 455 Hickey Boulevard #414<br>Daly City, CA 94015      |                                        |                 |
| Phone 電話                     | (650) 301-4960                                        |                                        |                 |
| Email 電子郵件                   |                                                       |                                        |                 |
| Medical Group(s):            | CCHP, Jade Health Care                                |                                        |                 |
| Specialty 專科                 | Psychiatry 精神科                                        |                                        | Board Certified |
| Other Languages Spoken 語言    |                                                       |                                        |                 |
| Education 醫科學院               | Temple University School of Medicine                  |                                        |                 |
| Hospital Affiliations 醫院聯網   |                                                       |                                        |                 |
| <b>Zuberi, Mansoor, MD</b>   |                                                       | NPI #:1972666568 CA License #: A72551  |                 |
| Primary Care Provider 主診醫生   | No 不是                                                 | New Patients 接受新病人                     | Yes 是           |
| Address 地址                   | 455 Hickey Boulevard #414*<br>Daly City, CA 94015     |                                        |                 |
| Phone 電話                     | (650) 301-4960                                        |                                        |                 |
| Email 電子郵件                   |                                                       |                                        |                 |
| Medical Group(s):            | CCHP                                                  |                                        |                 |
| Specialty 專科                 | Psychiatry 精神科                                        |                                        | Board Certified |
| Other Languages Spoken 語言    |                                                       |                                        |                 |
| Education 醫科學院               | Sindit Medical College                                |                                        |                 |
| Hospital Affiliations 醫院聯網   |                                                       |                                        |                 |

# San Francisco County Hospitals - 三藩市縣醫院

| Hospital 醫院                                                        | Location 地址                                                           |
|--------------------------------------------------------------------|-----------------------------------------------------------------------|
| <b>General Acute Care Hospital 醫院</b>                              |                                                                       |
| <b>Chinese Hospital 東華醫院</b>                                       | 845 Jackson Street<br>San Francisco, CA 94133<br>(415) 982-2400       |
| <b>CPMC - California West Campus 加州太平洋醫療中心 - California Campus</b> | 3700 California Street<br>San Francisco, CA 94118<br>(415) 600-6000   |
| <b>CPMC - Davies Campus 加州太平洋醫療中心 - Davies Campus</b>              | 601 Duboce Street<br>San Francisco, CA 94117<br>(415) 600-6000        |
| <b>CPMC - Mission Bernal Campus 加州太平洋醫療中心 - St. Luke's Campus</b>  | 3555 Cesar Chavez Street<br>San Francisco, CA 94110<br>(415) 647-8600 |
| <b>CPMC - Pacific Campus 加州太平洋醫療中心 - Pacific Campus</b>            | 2333 Buchanan Street<br>San Francisco, CA 94115<br>(415) 600-6000     |
| <b>CPMC - Van Ness Campus</b>                                      | 1101 Van Ness Ave<br>San Francisco, CA 94109<br>(415) 600-6000        |
| <b>St. Francis Memorial Hospital 聖法蘭西斯醫院</b>                       | 900 Hyde Street<br>San Francisco, CA 94109<br>(415) 353-6000          |
| <b>St. Mary's Medical Center 聖瑪麗醫院</b>                             | 450 Stanyan Street<br>San Francisco, CA 94117<br>(415) 668-1000       |

## San Francisco County Skilled Nursing Facilities - 三藩市縣特技專業

| Provider 醫務人員                                     | Location 地址                                                    |
|---------------------------------------------------|----------------------------------------------------------------|
| Skilled Nursing Facility 護理院                      |                                                                |
| Jewish Home of San Francisco                      | 302 Silver Avenue<br>San Francisco, CA 94112<br>(415) 562-2511 |
| Kindred - Golden Gate Healthcare Center           | 2707 Pine Street<br>San Francisco, CA 94115<br>(415) 563-7600  |
| Kindred - Lawton Healthcare Center                | 1575 7th Avenue<br>San Francisco, CA 94122<br>(415) 566-1200   |
| Kindred - Nineteenth Avenue Healthcare Center     | 2043 19th Avenue<br>San Francisco, CA 94116<br>(415) 661-8787  |
| Kindred - Tunnell Center for Rehab and Healthcare | 1359 Pine Street<br>San Francisco, CA 94109<br>(415) 673-8405  |
| Kindred - Victorian Healthcare Center             | 2121 Pine Street<br>San Francisco, CA 94115<br>(415) 922-5085  |
| San Francisco Health Care                         | 1477 Grove Street<br>San Francisco, CA 94117<br>(415) 563-0565 |

## San Mateo County Hospitals - 聖馬刁縣醫院

| Hospital 醫院                             | Location 地址                                                    |
|-----------------------------------------|----------------------------------------------------------------|
| <b>General Acute Care Hospital 醫院</b>   |                                                                |
| <b>Mills-Peninsula Medical Center</b>   | 1501 Trousdale Drive<br>Burlingame, CA 94010<br>(650) 696-5270 |
| <b>Seton Coastside 醫療中心 - Coastside</b> | 600 Marine Boulevard<br>Moss Beach, CA 94038<br>(650) 563-7100 |
| <b>Seton Medical Center 醫療中心</b>        | 1900 Sullivan Avenue<br>Daly City, CA 94015<br>(650) 992-4000  |

## San Mateo County Skilled Nursing Facilities - 聖馬刁縣特技專業

| Provider 醫務人員                             | Location 地址                                               |
|-------------------------------------------|-----------------------------------------------------------|
| Skilled Nursing Facility 護理院              |                                                           |
| St. Francis Convalescent Pavilion         | 99 Escuela Drive<br>Daly City, CA 94015<br>(650) 994-3200 |
| St. Francis Heights Convalescent Hospital | 35 Escuela Drive<br>Daly City, CA 94015<br>(650) 755-9515 |

## **CCHP Senior Program (HMO)**

### **2020 Pharmacy Directory**

This pharmacy directory was updated on 10/2019. For more recent information or other questions, please contact Chinese Community Health Plan, at 1-888-775-7888 or, for TTY users, 1-877-681-8898, seven days a week, 8:00 a.m. to 8:00 p.m., or visit [www.cchphealthplan.com/medicare](http://www.cchphealthplan.com/medicare).

Changes to our pharmacy network may occur during the benefit year. An updated Pharmacy Directory is located on our website at [www.cchphealthplan.com/medicare](http://www.cchphealthplan.com/medicare). You may also call Member Services for updated provider.

CCHP's pharmacy network includes limited lower-cost, preferred pharmacies in San Francisco and San Mateo County. The lower costs advertised in our plan materials for these pharmacies may not be available at the pharmacy you use. For up-to-date information about our network pharmacies, including whether there are any lower-cost preferred pharmacies in your area, please call 1-888-775-7888 or consult the online pharmacy directory at [www.cchphealthplan.com/medicare](http://www.cchphealthplan.com/medicare).

## 東華耆英（HMO）計劃

### 2020 藥房手冊

此網絡藥房手冊在2019年10月更新。關於我們的網絡藥房的最新訊息或有疑問，請每週七天，上午 8 時至晚上 8 時致電1-888-775-7888 聯絡華人保健計劃（聽力殘障人士請電 TTY1-877-681-8898）或瀏覽網址：[www.CCHPHealthPlan.com/medicare](http://www.CCHPHealthPlan.com/medicare) 查閱網上藥房手冊。

藥房手冊在一年之中會有轉變。您可在我們的網址：[www.CCHPHealthPlan.com/medicare](http://www.CCHPHealthPlan.com/medicare) 參閱更新的藥房手冊亦可致電會員服務部得到最新資料。

華人保健計劃在三藩市及聖馬刁縣的網絡藥房提供了有限的首選分擔費用藥房。在我們的計劃資料中提及較低收費的首選分擔費用藥房，不一定是您正在使用的藥房。關於我們的網絡藥房的最新訊息，包括首選分擔費用藥房，請致電1-888-775-7888，或瀏覽網址：[www.CCHPHealthPlan.com/medicare](http://www.CCHPHealthPlan.com/medicare) 查閱網上藥房手冊。

### **Section 3: Introduction – Network Pharmacies**

This section provides a list of CCHP Senior Program (HMO)’s network pharmacies. To get a complete description of your prescription coverage, including how to fill your prescriptions, please review the Evidence of Coverage and CCHP Senior Program (HMO)’s formulary.

We call the pharmacies on this list our “network pharmacies” because we have made arrangements with them to provide prescription drugs to Plan members. In most cases, your prescriptions are covered under CCHP Senior Program (HMO) only if they are filled at a network pharmacy or through our mail order pharmacy service. Once you go to one pharmacy, you are not required to continue going to the same pharmacy to fill your prescription but can switch to any other of our network pharmacies. We will fill prescriptions at non-network pharmacies under certain circumstances as described in your Evidence of Coverage.

All network pharmacies may not be listed in this directory. Pharmacies may have been added or removed from the list after this directory was printed. This means the pharmacies listed here may no longer be in our network, or there may be newer pharmacies in our network that are not listed. This list is current as of 10/2019. For the most current list, please contact us. Our contact information appears on the front and back cover pages.

You can go to all the pharmacies on this list, but your costs for some drugs may be less at pharmacies in this list that offer preferred cost-sharing. We have marked these pharmacies with “+”, to distinguish them from other pharmacies in our network that offer standard cost-sharing.

You can get prescription drugs shipped to your home through our network mail order delivery program. For more information, please contact us or see the mail order section of this pharmacy directory.

This directory is for San Francisco and San Mateo County which includes the area in which you live. However, we cover a larger service area, and there are more pharmacies where your prescriptions may be covered by our Plan. For information on more pharmacies in our plan network not listed in this directory, please call 1-888-775-7888.

If you have questions about any of the above, please see the first and last cover pages of this directory for information on how to contact us.

### Section 3: 簡介 - 網絡藥房名單

本手冊提供CCHP東華耆英(HMO)計劃的網絡藥房名單。想索取您處方藥保障的完整描述，包括如何補充您的處方藥，請審閱保障說明書及CCHP東華耆英(HMO)計劃的藥物表。

本名錄內的藥房稱為“網絡藥房”，我們彼此簽有合約為本計劃的會員提供處方藥物。多數情況下，在網絡內的藥房或郵遞服務購買的處方藥物都受到東華耆英(HMO)計劃的保障。您是不需要一直使用同一間藥房購買處方藥。您可以到任何一間網絡藥房購買。某些情況下，我們會批准去網絡外的藥房購買處方藥，詳情參閱保障說明書。

本名錄不能記錄所有網絡內的藥房。一些藥房可能已在此名錄印刷後被添加或刪除。本名錄是2019年10月修定本。查詢東華耆英(HMO)計劃網絡內藥房的最新資訊，請與我們聯絡。我們的聯絡資料連同最近更新藥物表的日期會列在本冊的封面頁及封底頁。

您可以在本冊所列的任何一間藥房配購處方藥物，但在收取首選費用分攤藥房配藥，費用會比其他藥房便宜。首選藥房是帶有“+”的標記。請參閱保障簡要，以了解首選費用分攤藥房的資料。

您可使用網絡內的郵寄服務將藥物寄到您的住處。如欲了解詳情，請與我們聯絡或參閱本冊的郵寄服務部分。

本名錄列出在三藩市及聖馬刁縣的網絡藥房。但是我們覆蓋較大的服務範圍，可能有更多網絡藥房以方便閣下配購藥物。了解更多其他網絡藥房資料，請致電1-888-775-7888。

如果您對上述任何問題有任何疑問，請參閱本名錄的第一頁及最後一頁封面，了解如何與我們聯繫。

| San Francisco Community/Retail Pharmacies/三藩市縣的門市藥房 |                           |               |       |             |                |
|-----------------------------------------------------|---------------------------|---------------|-------|-------------|----------------|
| Pharmacy Name                                       | Address                   | City          | State | Postal Code | Phone Number   |
| AHF PHARMACY                                        | 4071 18TH ST              | SAN FRANCISCO | CA    | 94114-0000  | (415) 255-2720 |
| ALTO PHARMACY                                       | 1400 TENNESSEE ST UNIT 2  | SAN FRANCISCO | CA    | 94107-0000  | (800) 874-5881 |
| CENTRAL DRUG STORE                                  | 4494 MISSION ST           | SAN FRANCISCO | CA    | 94112-0000  | (415) 585-0111 |
| CHARLIE'S PHARMACY                                  | 1101 FILLMORE ST          | SAN FRANCISCO | CA    | 94115-4711  | (415) 567-0771 |
| CHINESE HOSPITAL PHARMACY +                         | 845 JACKSON ST            | SAN FRANCISCO | CA    | 94133-4899  | (415) 677-2430 |
| CLAY MEDICAL PHARMACY                               | 929 CLAY ST               | SAN FRANCISCO | CA    | 94108-1556  | (415) 956-5456 |
| COMMUNITY, A WALGREENS #15296                       | 2262 MARKET ST            | SAN FRANCISCO | CA    | 94114-1508  | (415) 255-0101 |
| COSTCO PHARMACY #144 +                              | 450 10TH ST               | SAN FRANCISCO | CA    | 94103-4304  | (415) 626-4341 |
| CVS PHARMACY #01983                                 | 701 PORTOLA DR            | SAN FRANCISCO | CA    | 94127-1209  | (415) 504-6043 |
| CVS PHARMACY #02708                                 | 445 CASTRO ST             | SAN FRANCISCO | CA    | 94114-0000  | (415) 864-7030 |
| CVS PHARMACY #02852                                 | 731 MARKET ST             | SAN FRANCISCO | CA    | 94103-2002  | (415) 243-0273 |
| CVS PHARMACY #04675                                 | 377 32ND AVE              | SAN FRANCISCO | CA    | 94121-1738  | (415) 666-3153 |
| CVS PHARMACY #04770                                 | 1101 MARKET ST            | SAN FRANCISCO | CA    | 94103-1513  | (415) 558-1538 |
| CVS PHARMACY #05131                                 | 1900 19TH AVE             | SAN FRANCISCO | CA    | 94116-1250  | (415) 664-1834 |
| CVS PHARMACY #07657                                 | 351 CALIFORNIA ST         | SAN FRANCISCO | CA    | 94104-0000  | (415) 398-2578 |
| CVS PHARMACY #07955                                 | 2025 VAN NESS AVE         | SAN FRANCISCO | CA    | 94109-0000  | (415) 353-5705 |
| CVS PHARMACY #10035                                 | 581 MARKET ST             | SAN FRANCISCO | CA    | 94105-2847  | (415) 777-1654 |
| CVS PHARMACY #10080                                 | 1059 HYDE ST              | SAN FRANCISCO | CA    | 94109-4916  | (415) 346-6100 |
| CVS PHARMACY #10164                                 | 601 MISSION ST            | SAN FRANCISCO | CA    | 94105-3503  | (415) 442-4737 |
| CVS PHARMACY #10188                                 | 499 HAIGHT ST             | SAN FRANCISCO | CA    | 94117-3505  | (415) 503-0722 |
| CVS PHARMACY #10330                                 | 3600 GEARY BLVD           | SAN FRANCISCO | CA    | 94118-3215  | (415) 668-6083 |
| CVS PHARMACY #10368                                 | 400 SUTTER ST             | SAN FRANCISCO | CA    | 94108-3918  | (415) 398-2175 |
| CVS PHARMACY #10492                                 | 500 PINE ST               | SAN FRANCISCO | CA    | 94108-3207  | (415) 362-6318 |
| CVS PHARMACY #10495                                 | 399 GEARY ST              | SAN FRANCISCO | CA    | 94102-1801  | (415) 268-9949 |
| CVS PHARMACY #11004                                 | 799 BEACH ST              | SAN FRANCISCO | CA    | 94109-1218  | (415) 561-0984 |
| CVS PHARMACY #11107                                 | 701 VAN NESS AVE          | SAN FRANCISCO | CA    | 94102-3229  | (415) 848-1088 |
| CVS PHARMACY #17623                                 | 789 MISSION ST            | SAN FRANCISCO | CA    | 94103-0000  | (415) 343-6273 |
| CVS PHARMACY #17625                                 | 2675 GEARY BLVD           | SAN FRANCISCO | CA    | 94118-0000  | (415) 796-5281 |
| CVS PHARMACY #17672                                 | 225 BUSH ST. #100         | SAN FRANCISCO | CA    | 94104-0000  | (415) 365-0835 |
| CVS PHARMACY #17674                                 | 1830 OCEAN AVE            | SAN FRANCISCO | CA    | 94112-0000  | (415) 840-0524 |
| CVS PHARMACY #17709                                 | 233 WINSTON DR            | SAN FRANCISCO | CA    | 94132-1901  | (415) 664-1436 |
| CVS PHARMACY #17757                                 | 1690 FOLSOM ST            | SAN FRANCISCO | CA    | 94103-3723  | (401) 765-1500 |
| DANIELS PHARMACY                                    | 943 GENEVA AVE            | SAN FRANCISCO | CA    | 94112-3402  | (415) 584-2210 |
| GOLDEN GATE PHARMACY                                | 1836 NORIEGA ST           | SAN FRANCISCO | CA    | 94122-0000  | (415) 661-0790 |
| JOES PHARMACY                                       | 5199 GEARY BLVD           | SAN FRANCISCO | CA    | 94118-2815  | (415) 751-2326 |
| LUCKY PHARMACY                                      | 1515 SLOAT BLVD           | SAN FRANCISCO | CA    | 94132-0000  | (415) 681-4136 |
| LUCKY PHARMACY                                      | 1750 FULTON ST            | SAN FRANCISCO | CA    | 94117-0000  | (415) 923-6789 |
| MISSION WELLNESS PHARMACY                           | 350 PARNASSUS AVE STE 505 | SAN FRANCISCO | CA    | 94117-3628  | (415) 926-6270 |
| MISSION WELLNESS PHARMACY                           | 2424 MISSION ST           | SAN FRANCISCO | CA    | 94110-0000  | (415) 826-3484 |

| Pharmacy Name                   | Address                   | City          | State | Postal Code | Phone Number   |
|---------------------------------|---------------------------|---------------|-------|-------------|----------------|
| PARNASSUS HEIGHTS PHARMACY      | 350 PARNASSUS AVE STE 100 | SAN FRANCISCO | CA    | 94117-3608  | (415) 564-9191 |
| PHARMACA INTEGRATIVE PHARMACY   | 925 COLE STREET           | SAN FRANCISCO | CA    | 94117-0000  | (415) 661-3003 |
| RELIABLE REXALL SUNSET PHARMACY | 801 IRVING ST             | SAN FRANCISCO | CA    | 94122-0000  | (415) 664-8800 |
| SAFEWAY PHARMACY #0785          | 850 LA PLAYA ST           | SAN FRANCISCO | CA    | 94121-0000  | (415) 387-0481 |
| SAFEWAY PHARMACY #0909          | 730 TARAVAL ST            | SAN FRANCISCO | CA    | 94116-0000  | (415) 665-0119 |
| SAFEWAY PHARMACY #0964          | 4950 MISSION ST           | SAN FRANCISCO | CA    | 94112-0000  | (415) 239-8010 |
| SAFEWAY PHARMACY #0985          | 2350 NORIEGA ST           | SAN FRANCISCO | CA    | 94122-0000  | (415) 665-8456 |
| SAFEWAY PHARMACY #0995          | 1335 WEBSTER ST           | SAN FRANCISCO | CA    | 94115-0000  | (415) 921-5502 |
| SAFEWAY PHARMACY #1490          | 2300 16TH ST              | SAN FRANCISCO | CA    | 94103-0000  | (415) 575-1130 |
| SAFEWAY PHARMACY #1507          | 2020 MARKET STREET        | SAN FRANCISCO | CA    | 94114-0000  | (415) 436-9032 |
| SAFEWAY PHARMACY #1711          | 15 MARINA BLVD            | SAN FRANCISCO | CA    | 94123-0000  | (415) 563-8681 |
| SAFEWAY PHARMACY #2606          | 298 KING STREET           | SAN FRANCISCO | CA    | 94107-0000  | (415) 633-1020 |
| SAFEWAY PHARMACY #2646          | 735 7TH AVE               | SAN FRANCISCO | CA    | 94118-0000  | (415) 683-4074 |
| SCRIPTSITE PHARMACY             | 870 MARKET ST STE 1028    | SAN FRANCISCO | CA    | 94102-2914  | (415) 800-8060 |
| SFSU, STUDENT HEALTH SERVICES   | 1600 HOLLOWAY AVE         | SAN FRANCISCO | CA    | 94132-4200  | (415) 338-1710 |
| SUTTER PROFESSIONAL PHARMACY    | 2300 SUTTER ST SUITE 101  | SAN FRANCISCO | CA    | 94115-3029  | (415) 567-3223 |
| TORGSYN DISCOUNT PHARMACY       | 5614 GEARY BLVD           | SAN FRANCISCO | CA    | 94121-0000  | (415) 752-3737 |
| UCSF AMBULATORY CARE CENTER     | 505 PARNASSUS AVE M39     | SAN FRANCISCO | CA    | 94143-0312  | (415) 353-1544 |
| VISITACION VALLEY PHARMACY      | 100 LELAND AVE            | SAN FRANCISCO | CA    | 94134-2806  | (415) 239-5811 |
| WALGREENS                       | 1344 STOCKTON STREET      | SAN FRANCISCO | CA    | 94133-3807  | (415) 981-6274 |
| WALGREENS #10044                | 45 CASTRO ST              | SAN FRANCISCO | CA    | 94114-1039  | (415) 565-0991 |
| WALGREENS #1054                 | 3398 MISSION ST           | SAN FRANCISCO | CA    | 94110-5009  | (415) 824-6886 |
| WALGREENS #1109                 | 5260 DIAMOND HEIGHTS BLVD | SAN FRANCISCO | CA    | 94131-2118  | (415) 695-2808 |
| WALGREENS #1120                 | 4645 MISSION ST           | SAN FRANCISCO | CA    | 94112-2605  | (415) 585-6900 |
| WALGREENS #1126                 | 1979 MISSION ST           | SAN FRANCISCO | CA    | 94103-3404  | (415) 558-8749 |
| WALGREENS #11385                | 1580 VALENCIA ST          | SAN FRANCISCO | CA    | 94110-4420  | (415) 970-8001 |
| WALGREENS #1241                 | 1201 TARAVAL ST           | SAN FRANCISCO | CA    | 94116-2442  | (415) 753-1305 |
| WALGREENS #1283                 | 500 GEARY ST              | SAN FRANCISCO | CA    | 94102-1641  | (415) 673-8413 |
| WALGREENS #1297                 | 670 4TH ST                | SAN FRANCISCO | CA    | 94107-1618  | (415) 856-0543 |
| WALGREENS #1327                 | 498 CASTRO STREET         | SAN FRANCISCO | CA    | 94114-2020  | (415) 861-3136 |
| WALGREENS #13666                | 1300 BUSH ST              | SAN FRANCISCO | CA    | 94109-5612  | (415) 771-3303 |
| WALGREENS #13667                | 5280 GEARY BLVD           | SAN FRANCISCO | CA    | 94118-2818  | (415) 668-2041 |
| WALGREENS #13668                | 1496 MARKET ST            | SAN FRANCISCO | CA    | 94102-6004  | (415) 626-9972 |
| WALGREENS #13670                | 200 W PORTAL AVE          | SAN FRANCISCO | CA    | 94127-1423  | (415) 665-1008 |
| WALGREENS #1393                 | 1630 OCEAN AVE            | SAN FRANCISCO | CA    | 94112-1718  | (415) 239-0804 |
| WALGREENS #1403                 | 3201 DIVISADERO ST        | SAN FRANCISCO | CA    | 94123-2501  | (415) 931-6417 |
| WALGREENS #15127                | 1175 COLUMBUS AVE         | SAN FRANCISCO | CA    | 94133-1729  | (415) 345-1079 |
| WALGREENS #15331                | 500 PARNASSUS AVE J LEVEL | SAN FRANCISCO | CA    | 94143-2203  | (415) 681-3394 |
| WALGREENS #1626                 | 2494 SAN BRUNO AVE        | SAN FRANCISCO | CA    | 94134-1526  | (415) 468-4274 |
| WALGREENS #16373                | 550 16TH ST ROOM 1200     | SAN FRANCISCO | CA    | 94158-2549  | (415) 365-0512 |

| Pharmacy Name    | Address                 | City          | State | Postal Code | Phone Number   |
|------------------|-------------------------|---------------|-------|-------------|----------------|
| WALGREENS #16533 | 1100 VAN NESS AVE STE C | SAN FRANCISCO | CA    | 94109-6920  | (415) 783-1909 |
| WALGREENS #2005  | 2550 OCEAN AVENUE       | SAN FRANCISCO | CA    | 94132-1614  | (415) 587-9000 |
| WALGREENS #2088  | 1333 CASTRO STREET      | SAN FRANCISCO | CA    | 94114-3620  | (415) 826-8533 |
| WALGREENS #2125  | 320 BAY STREET          | SAN FRANCISCO | CA    | 94133-1902  | (415) 296-0521 |
| WALGREENS #2152  | 1899 FILLMORE ST        | SAN FRANCISCO | CA    | 94115-3125  | (415) 771-4603 |
| WALGREENS #2153  | 790 VAN NESS AVE        | SAN FRANCISCO | CA    | 94102-3218  | (415) 292-6155 |
| WALGREENS #2521  | 300 MONTGOMERY ST       | SAN FRANCISCO | CA    | 94104-1902  | (415) 788-2984 |
| WALGREENS #2705  | 2050 IRVING STREET      | SAN FRANCISCO | CA    | 94122-1716  | (415) 664-4215 |
| WALGREENS #2866  | 1363 DIVISADERO ST      | SAN FRANCISCO | CA    | 94115-3912  | (415) 931-9974 |
| WALGREENS #3185  | 825 MARKET STREET       | SAN FRANCISCO | CA    | 94103-1901  | (415) 543-9502 |
| WALGREENS #3358  | 1301 FRANKLIN STREET    | SAN FRANCISCO | CA    | 94109-5413  | (415) 775-6706 |
| WALGREENS #3383  | 141 KEARNY STREET       | SAN FRANCISCO | CA    | 94108-4801  | (415) 834-0356 |
| WALGREENS #3475  | 25 POINT LOBOS AVE      | SAN FRANCISCO | CA    | 94121-1530  | (415) 386-0736 |
| WALGREENS #3624  | 275 SACRAMENTO ST       | SAN FRANCISCO | CA    | 94111-3810  | (415) 362-5227 |
| WALGREENS #3707  | 2100 WEBSTER ST         | SAN FRANCISCO | CA    | 94115-2374  | (415) 441-5742 |
| WALGREENS #3711  | 1189 POTRERO AVENUE     | SAN FRANCISCO | CA    | 94110-3520  | (415) 647-1397 |
| WALGREENS #3849  | 745 CLEMENT ST          | SAN FRANCISCO | CA    | 94118-2216  | (415) 668-5250 |
| WALGREENS #3869  | 1750 NORIEGA STREET     | SAN FRANCISCO | CA    | 94122-4308  | (415) 664-5543 |
| WALGREENS #4231  | 2690 MISSION            | SAN FRANCISCO | CA    | 94110-3102  | (415) 285-1576 |
| WALGREENS #4259  | 2145 MARKET ST          | SAN FRANCISCO | CA    | 94114-1321  | (415) 355-0800 |
| WALGREENS #4275  | 456 MISSION ST          | SAN FRANCISCO | CA    | 94105-2502  | (415) 348-9600 |
| WALGREENS #4318  | 4129 18TH ST            | SAN FRANCISCO | CA    | 94114-2407  | (415) 551-7837 |
| WALGREENS #4492  | 33 DRUMM ST             | SAN FRANCISCO | CA    | 94111-4805  | (415) 989-6116 |
| WALGREENS #4558  | 300 GOUGH ST            | SAN FRANCISCO | CA    | 94102-5104  | (415) 581-0600 |
| WALGREENS #4570  | 3001 TARAVAL ST         | SAN FRANCISCO | CA    | 94116-2106  | (415) 759-0572 |
| WALGREENS #4609  | 1301 MARKET ST          | SAN FRANCISCO | CA    | 94103-1307  | (415) 861-4010 |
| WALGREENS #4680  | 730 MARKET ST           | SAN FRANCISCO | CA    | 94102-2502  | (415) 397-4800 |
| WALGREENS #5487  | 5300 3RD ST             | SAN FRANCISCO | CA    | 94124-2604  | (415) 671-0841 |
| WALGREENS #5599  | 2120 POLK ST            | SAN FRANCISCO | CA    | 94109-2507  | (415) 474-9752 |
| WALGREENS #6291  | 116 NEW MONTGOMERY ST   | SAN FRANCISCO | CA    | 94105-3607  | (415) 344-0891 |
| WALGREENS #6557  | 199 PARNASSUS AVE       | SAN FRANCISCO | CA    | 94117-4260  | (415) 661-5287 |
| WALGREENS #6625  | 2141 CHESTNUT STREET    | SAN FRANCISCO | CA    | 94123-2708  | (415) 567-9320 |
| WALGREENS #7043  | 459 POWELL ST           | SAN FRANCISCO | CA    | 94102-1503  | (415) 984-0793 |
| WALGREENS #7044  | 88 SPEAR ST             | SAN FRANCISCO | CA    | 94105-1550  | (415) 856-0733 |
| WALGREENS #7150  | 965 GENEVA AVE          | SAN FRANCISCO | CA    | 94112-3423  | (415) 841-0507 |
| WALGREENS #887   | 1524 POLK STREET        | SAN FRANCISCO | CA    | 94109-3607  | (415) 673-4701 |
| WALGREENS #890   | 135 POWELL              | SAN FRANCISCO | CA    | 94102-2203  | (415) 391-7222 |
| WALGREENS #896   | 3601 CALIFORNIA ST      | SAN FRANCISCO | CA    | 94118-1701  | (415) 668-5202 |
| WALGREENS #9886  | 3400 CESAR CHAVEZ       | SAN FRANCISCO | CA    | 94110-4508  | (415) 285-0802 |

| San Mateo Community/Retail Pharmacies/聖馬刁縣的門市藥房 |                              |                  |       |             |                |
|-------------------------------------------------|------------------------------|------------------|-------|-------------|----------------|
| Pharmacy Name                                   | Address                      | City             | State | Postal Code | Phone Number   |
| 1750 MEDICAL CENTER PHARMACY                    | 1750 EL CAMINO REAL STE 101  | BURLINGAME       | CA    | 94010-3208  | (650) 692-1686 |
| A & O PENINSULA PHARMACY                        | 1828 EL CAMINO REAL STE 104  | BURLINGAME       | CA    | 94010-3103  | (650) 692-6569 |
| ALPHASCRIPT                                     | 420 INDUSTRIAL RD            | SAN CARLOS       | CA    | 94070-6286  | (800) 780-3584 |
| ANCHOR DRUGS III                                | 161 SOUTH SPRUCE AVE         | S. SAN FRANCISCO | CA    | 94080-0000  | (650) 360-5300 |
| CARE4U HEALTH MART PHARMACY                     | 901 CAMPUS DRIVE, SUITE 206  | DALY CITY        | CA    | 94015-4900  | (650) 226-8002 |
| CHINESE HOSPITAL PHARMACY +                     | 386 GELLERT BLVD SUITE A     | DALY CITY        | CA    | 94015-0000  | (650) 761-3560 |
| COSTCO PHARMACY #1042 +                         | 2300 MIDDLEFIELD RD          | REDWOOD CITY     | CA    | 94063-2854  | (650) 365-1703 |
| COSTCO PHARMACY #147 +                          | 1001 METRO CENTER BLVD       | FOSTER CITY      | CA    | 94404-2177  | (650) 286-0759 |
| COSTCO PHARMACY #422 +                          | 451 S AIRPORT BLVD           | S. SAN FRANCISCO | CA    | 94080-6909  | (650) 872-0637 |
| COSTCO PHARMACY #475 +                          | 1600 EL CAMINO REAL          | S. SAN FRANCISCO | CA    | 94080-1206  | (650) 757-3002 |
| CVS PHARMACY #00550                             | 1324 SAN CARLOS AVE          | SAN CARLOS       | CA    | 94070-0000  | (650) 591-7659 |
| CVS PHARMACY #09172                             | 11 EL CAMINO REAL            | SAN CARLOS       | CA    | 94070-0000  | (650) 595-8511 |
| CVS PHARMACY #09216                             | 60 N CABRILLO HWY            | HALF MOON BAY    | CA    | 94019-0000  | (650) 726-6684 |
| CVS PHARMACY #09329                             | 1039 EL CAMINO REAL          | REDWOOD CITY     | CA    | 94063-0000  | (650) 780-9910 |
| CVS PHARMACY #09330                             | 325 SHARON PARK DR           | MENLO PARK       | CA    | 94025-0000  | (650) 854-4636 |
| CVS PHARMACY #09554                             | 77 BOVET RD                  | SAN MATEO        | CA    | 94402-0000  | (650) 349-6303 |
| CVS PHARMACY #09690                             | 1301 BROADWAY                | REDWOOD CITY     | CA    | 94063-0000  | (650) 364-2111 |
| CVS PHARMACY #09752                             | 375 GELLERT BLVD             | DALY CITY        | CA    | 94015-0000  | (650) 994-0752 |
| CVS PHARMACY #09807                             | 10 BAYHILL SHOPPING CENTER   | SAN BRUNO        | CA    | 94066-0000  | (650) 873-9522 |
| CVS PHARMACY #09811                             | 1871 EL CAMINO REAL          | BURLINGAME       | CA    | 94010-0000  | (650) 692-5065 |
| CVS PHARMACY #09833                             | 4242 S EL CAMINO REAL        | SAN MATEO        | CA    | 94403-0000  | (650) 573-5401 |
| CVS PHARMACY #09879                             | 987 E HILLSDALE BLVD         | FOSTER CITY      | CA    | 94404-0000  | (650) 570-4693 |
| CVS PHARMACY #09940                             | 872 N DELAWARE               | SAN MATEO        | CA    | 94401-0000  | (650) 342-7448 |
| CVS PHARMACY #09977                             | 124 DE ANZA BLVD             | SAN MATEO        | CA    | 94402-0000  | (650) 572-2514 |
| CVS PHARMACY #10165                             | 135 PIERCE ST                | DALY CITY        | CA    | 94015-1934  | (650) 992-2521 |
| CVS PHARMACY #10240                             | 700 EL CAMINO REAL           | MENLO PARK       | CA    | 94025-4847  | (650) 566-1405 |
| CVS PHARMACY #16111                             | 5001 JUNIPERO SERRA BLVD     | COLMA            | CA    | 94014-0000  | (415) 570-0011 |
| CVS PHARMACY #16112                             | 2485 EL CAMINO REAL          | REDWOOD CITY     | CA    | 94063-0000  | (650) 549-0000 |
| CVS PHARMACY #16439                             | 1150 EL CAMINO REAL          | SAN BRUNO        | CA    | 94066-0000  | (650) 825-2115 |
| CVS PHARMACY #16490                             | 2220 BRIDGEPOINTE PKWY       | SAN MATEO        | CA    | 94404-0000  | (650) 393-2126 |
| CVS PHARMACY #16746                             | 133 SERRAMONTE CTR           | DALY CITY        | CA    | 94015-0000  | (650) 755-4668 |
| FAIR OAKS COMMUNITY PHARMACY                    | 2710 MIDDLEFIELD RD, STE 125 | REDWOOD CITY     | CA    | 94063-0000  | (650) 480-6040 |
| HALF MOON BAY PHARMACY                          | 40 STONE PINE RD STE I       | HALF MOON BAY    | CA    | 94019-0000  | (650) 726-5542 |
| LUCKY CALIFORNIA PHARMACY                       | 6843 MISSION BLVD            | DALY CITY        | CA    | 94015-0000  | (650) 992-9463 |
| LUCKY PHARMACY                                  | 1133 OLD COUNTY ROAD         | SAN CARLOS       | CA    | 94070-0000  | (650) 637-1788 |
| LUCKY PHARMACY                                  | 1322 EL CAMINO REAL          | SAN BRUNO        | CA    | 94066-0000  | (650) 742-9737 |
| LUCKY PHARMACY                                  | 919 EDGEWATER BLVD           | FOSTER CITY      | CA    | 94404-0000  | (650) 572-1167 |
| NOB HILL PHARMACY #628                          | 270 REDWOOD SHORES PARKWAY   | REDWOOD CITY     | CA    | 94065-0000  | (650) 631-1685 |

| Pharmacy Name                   | Address                          | City             | State | Postal Code | Phone Number   |
|---------------------------------|----------------------------------|------------------|-------|-------------|----------------|
| PHARMACA INTEGRATIVE PHARMACY   | 871 SANTA CRUZ AVE               | MENLO PARK       | CA    | 94025-4629  | (650) 618-6310 |
| RITE AID PHARMACY 05885         | 170 SAN MATEO RD HALF MOON BAY   | HALF MOON BAY    | CA    | 94019-1706  | (650) 726-2511 |
| RITE AID PHARMACY 05890         | 1400 LINDA MAR BOULEVARD         | PACIFICA         | CA    | 94044-4327  | (650) 359-6691 |
| RITE AID PHARMACY 05891         | 200 FAIRMONT SHOPPING CENTER     | PACIFICA         | CA    | 94044-1240  | (650) 355-5810 |
| RITE AID PHARMACY 05892         | 340 WOODSIDE PLAZA               | REDWOOD CITY     | CA    | 94061-3259  | (650) 368-7008 |
| RITE AID PHARMACY 05893         | 2150 ROOSEVELT AVENUE            | REDWOOD CITY     | CA    | 94061-1304  | (650) 369-2071 |
| RITE AID PHARMACY 05902         | 666 CONCAR DRIVE                 | SAN MATEO        | CA    | 94402-2696  | (650) 573-8551 |
| RITE AID PHARMACY 05903         | 1320 W HILLSDALE BLVD LAURELWOOD | SAN MATEO        | CA    | 94403-3125  | (650) 570-6094 |
| SAFEWAY PHARMACY #0305          | 1071 EL CAMINO REAL              | REDWOOD CITY     | CA    | 94063-0000  | (650) 306-1902 |
| SAFEWAY PHARMACY #0747          | 850 WOODSIDE RD                  | REDWOOD CITY     | CA    | 94061-0000  | (650) 365-3682 |
| SAFEWAY PHARMACY #0970          | 1655 EL CAMINO REAL              | SAN MATEO        | CA    | 94402-0000  | (650) 341-3305 |
| SAFEWAY PHARMACY #1138          | 1100 EL CAMINO REAL              | BELMONT          | CA    | 94002-0000  | (650) 596-1735 |
| SAFEWAY PHARMACY #1547          | 1450 HOWARD AVENUE               | BURLINGAME       | CA    | 94010-0000  | (650) 343-3932 |
| SAFEWAY PHARMACY #2719          | 525 EL CAMINO REAL               | MENLO PARK       | CA    | 94025-0000  | (650) 847-2905 |
| SAFEWAY PHARMACY #2878          | 525 EL CAMINO REAL               | MILLBRAE         | CA    | 94030-0000  | (650) 652-3477 |
| SAN MATEO MEDICAL CENTER        | 222 W 39TH AVE #121              | SAN MATEO        | CA    | 94403-0000  | (650) 573-2366 |
| SAN MATEO NEIGHBORHOOD PHARMACY | 9 37TH AVE                       | SAN MATEO        | CA    | 94403-4404  | (650) 827-5277 |
| SUNSHINE CENTER PHARMACY        | 1166 OLD MISSION RD              | S. SAN FRANCISCO | CA    | 94080-0000  | (650) 589-4133 |
| TEDS VILLAGE PHARMACY INC       | 29 W 25TH AVE                    | SAN MATEO        | CA    | 94403-2236  | (650) 349-1373 |
| WALGREENS #11261                | 520 PALMETTO AVE                 | PACIFICA         | CA    | 94044-1842  | (650) 355-9901 |
| WALGREENS #12257                | 260 EL CAMINO REAL               | BURLINGAME       | CA    | 94010-5120  | (650) 342-2977 |
| WALGREENS #15397                | 2238 WESTBOROUGH BLVD            | S. SAN FRANCISCO | CA    | 94080-5405  | (650) 873-0551 |
| WALGREENS #1807                 | 22 SAN PEDRO ROAD                | DALY CITY        | CA    | 94014-2528  | (650) 756-3412 |
| WALGREENS #2126                 | 1414 EL CAMINO REAL              | SAN CARLOS       | CA    | 94070-5102  | (650) 637-9777 |
| WALGREENS #2939                 | 333 EL CAMINO REAL               | SAN BRUNO        | CA    | 94066-4839  | (650) 737-5735 |
| WALGREENS #324                  | 216 WESTLAKE CENTER              | DALY CITY        | CA    | 94015-1430  | (650) 756-4535 |
| WALGREENS #3296                 | 191 EAST 3RD AVENUE              | SAN MATEO        | CA    | 94401-4012  | (650) 342-2723 |
| WALGREENS #3346                 | 399 EL CAMINO REAL               | S. SAN FRANCISCO | CA    | 94080-5923  | (650) 583-8685 |
| WALGREENS #5006                 | 4070 S EL CAMINO REAL            | SAN MATEO        | CA    | 94403-4537  | (650) 212-4600 |
| WALGREENS #625                  | 615 BROADWAY                     | MILLBRAE         | CA    | 94030-1909  | (650) 697-0166 |
| WALGREENS #63                   | 900 RALSTON                      | BELMONT          | CA    | 94002-2208  | (650) 592-7224 |
| WALGREENS #6655                 | 1160 BROADWAY                    | BURLINGAME       | CA    | 94010-3422  | (650) 347-3026 |
| WALGREENS #7087                 | 643 SANTA CRUZ AVE               | MENLO PARK       | CA    | 94025-4502  | (650) 321-1530 |
| WALGREENS #7970                 | 45 S EL CAMINO REAL              | MILLBRAE         | CA    | 94030-3124  | (650) 697-3970 |

| Mail Order Pharmacies/郵購藥房 |                         |         |       |             |                |
|----------------------------|-------------------------|---------|-------|-------------|----------------|
| Pharmacy Name              | Address                 | City    | State | Postal Code | Phone Number   |
| COSTCO PHARMACY #581 +     | 802 134TH ST SW STE 140 | EVERETT | WA    | 98204-7314  | (800) 607-6861 |
| COSTCO PHARMACY #562 +     | 215 DEININGER CIR       | CORONA  | CA    | 92880-1707  | (800) 607-6861 |

You can get prescription drugs shipped to your home through our network mail order delivery program.

For refills of your mail order prescriptions, please contact us 14 days before you think the drugs you have on hand will run out to make sure your next order is shipped to you in time.

Typically, you should expect to receive your prescription drugs within 14 days from the time that the mail order pharmacy receives the order. If you do not receive your prescription drug(s) within this time, please contact Chinese Community Health Plan Member Services at 1-888-775-7888 or, for TTY users, 1-877-681-8898, seven days a week from 8:00 a.m. to 8:00 p.m.

您可使用網絡內的郵寄服務將藥物寄到您的住處。

要使用郵寄服務配購您的處方藥物，請於您現有的藥物耗盡前的 14 天與我們聯絡，以確保您的訂單準時寄到您的住處。

通常，您應該會在郵購藥房收到訂購處方藥物訂單的 14 天內，收到您的處方藥物。如果你沒有這個時間內收到您的處方藥物，請致電 1-888-775-7888 聯絡我們，聽力殘障人士電話 TTY 1-877-681-8898。

| Specialty Pharmacies/特殊藥物藥房 |                          |               |       |             |                |
|-----------------------------|--------------------------|---------------|-------|-------------|----------------|
| Pharmacy Name               | Address                  | City          | State | Postal Code | Phone Number   |
| CHINESE HOSPITAL PHARMACY   | 845 JACKSON ST           | SAN FRANCISCO | CA    | 94133-4899  | (415) 677-2430 |
| CHINESE HOSPITAL PHARMACY   | 386 GELLERT BLVD SUITE A | DALY CITY     | CA    | 94015-0000  | (650) 761-3560 |
| MEDIMPACT DIRECT SPECIALTY  | 8150 S. KYRENE ROAD      | TEMPE         | AZ    | 85284-0000  | (877) 391-1103 |

| Long Term Care Pharmacies/長期護理藥房 |                            |                  |       |             |                |
|----------------------------------|----------------------------|------------------|-------|-------------|----------------|
| Pharmacy Name                    | Address                    | City             | State | Postal Code | Phone Number   |
| ALPHASCRIP                       | 420 INDUSTRIAL RD          | SAN CARLOS       | CA    | 94070-6286  | (800) 780-3584 |
| ANCHOR DRUGS III                 | 161 SOUTH SPRUCE AVE       | S. SAN FRANCISCO | CA    | 94080-0000  | (650) 360-5300 |
| BERKSHIRE PHARMACY               | 11 BERKSHIRE AVE           | REDWOOD CITY     | CA    | 94063-3632  | (650) 216-9800 |
| CAREKINESIS                      | 401 S CANAL ST             | S. SAN FRANCISCO | CA    | 94080-4606  | (415) 387-3231 |
| CENTRAL DRUG STORE               | 4494 MISSION ST            | SAN FRANCISCO    | CA    | 94112-0000  | (415) 585-0111 |
| CHOICECARE PHARMACY INC.         | 90 SOUTH SPRUCE AVE. STE W | S. SAN FRANCISCO | CA    | 94080-0000  | (650) 872-2261 |
| DANIELS PHARMACY                 | 943 GENEVA AVE             | SAN FRANCISCO    | CA    | 94112-3402  | (415) 584-2210 |
| HALF MOON BAY PHARMACY           | 40 STONE PINE RD STE I     | HALF MOON BAY    | CA    | 94019-0000  | (650) 726-5542 |
| PMC PHARMACY                     | 843 MALCOLM RD             | BURLINGAME       | CA    | 94010-1406  | (650) 239-5282 |
| TEDS VILLAGE PHARMACY INC        | 29 W 25TH AVE              | SAN MATEO        | CA    | 94403-2236  | (650) 349-1373 |
| THOUSAND CRANES PHARMACY         | 1832 BUCHANAN ST SUITE 203 | SAN FRANCISCO    | CA    | 94115-0000  | (415) 409-4357 |

Residents of a long-term care facility may access their prescription drugs covered under CCHP Senior Program (HMO) through the facility's long-term care pharmacy or another network long-term care pharmacy.

居住在長期護理院人士可從網絡內的藥房配取東華耆英 (HMO) 計劃保障的處方藥。

| Home Infusion Pharmacies/家中注射藥物藥房 |                               |              |       |             |                |
|-----------------------------------|-------------------------------|--------------|-------|-------------|----------------|
| Pharmacy Name                     | Address                       | City         | State | Postal Code | Phone Number   |
| ACCESS MYRX PHARMACY, LLC         | 9632 EMERALD OAK DRIVE, STE G | ELK GROVE    | CA    | 95624-0000  | (916) 509-9834 |
| BRIOVARX INFUSION SERVICES 401    | 4610 NORTHGATE BLVD STE 130   | SACRAMENTO   | CA    | 95834-1154  | (916) 648-0124 |
| BRIOVARX INFUSION SERVICES 403    | 170 PROFESSIONAL CTR DR STE C | ROHNERT PARK | CA    | 94928-0000  | (707) 588-8894 |
| CORAM CVS/SPECIALTY INFUSION      | 3160 CORPORATE PL             | HAYWARD      | CA    | 94545-0000  | (510) 732-8800 |
| CORAM CVS/SPECIALTY INFUSION      | 9332 TECH CENTER DR STE 100   | SACRAMENTO   | CA    | 95826-0000  | (916) 565-7233 |
| CRESCENT HEALTHCARE INC           | 25901 INDUSTRIAL BLVD BLDG E  | HAYWARD      | CA    | 94545-0000  | (510) 264-5454 |
| OPTION CARE                       | 4867 COLT ST.                 | VENTURA      | CA    | 93003-0000  | (805) 639-0917 |
| OPTION CARE                       | 3301 C ST STE 450             | SACRAMENTO   | CA    | 95816-3393  | (916) 454-0444 |
| SUTTER INFUSION PHARMACY          | 8318 FERGUSON AVE             | SACRAMENTO   | CA    | 95828-0902  | (888) 395-2200 |
| SUTTER INFUSION PHARMACY          | 1105 ATLANTIC AVE STE 102     | ALAMEDA      | CA    | 94501-1184  | (510) 450-8900 |

CCHP Senior Program (HMO) will cover home infusion therapy if:

- Your prescription drug is on the CCHP Senior Program (HMO) formulary or you have a formulary exception;
- CCHP Senior Program (HMO) has approved your prescription drug for home infusion therapy;
- Your prescription is written by an authorized prescriber.

CCHP Senior Program (HMO) will coordinate authorization for the above services with home infusion companies that are a part of our network. At the time of the authorization, we will notify you of the company name and the telephone number. If you need additional information, please contact Member Services at 1-888-775-7888 or, for TTY users, 1-877-681-8898, seven days a week, 8:00 a.m. to 8:00 p.m.

在下列情況，東華耆英 (HMO) 計劃會提供家中注射治療：

- 您的處方藥列在東華耆英 (HMO) 計劃藥物表上或您的處方藥是屬於額外處理；
- 東華耆英 (HMO) 計劃批准的家注射處方藥；
- 您的藥物是由授權的人士處方。

東華耆英 (HMO) 計劃會協助向網絡內的家注射處方藥公司取得授權。授權時同一時間，我們會通知您該公司的名稱和電話。如您需要更多資料，請致電 1-888-775-7888 與會員服務中心聯絡 (聽力殘障人士請電 TTY1-877-681-8898)，每週 7 天，上午 8 時至晚上 8 時。

| Indian Health Service/Tribal/Urban (I/T/U)/ 印第安人健康服務/部落/印第安人城市健康衛生計劃 (I / T / U) 藥房 |                           |               |       |             |                |
|-------------------------------------------------------------------------------------|---------------------------|---------------|-------|-------------|----------------|
| Pharmacy Name                                                                       | Address                   | City          | State | Postal Code | Phone Number   |
| CHAPA-DE INDIAN HEALTH                                                              | 11670 ATWOOD RD           | AUBURN        | CA    | 95603-9522  | (530) 887-2836 |
| FORT YUMA INDIAN HEALTH CENTER                                                      | ONE INDIAN HILL ROAD      | WINTERHAVEN   | CA    | 92283-0000  | (760) 572-4120 |
| KIMAW MEDICAL CENTER PHARMACY                                                       | 535 AIRPORT RD, SUITE 104 | HOOPA         | CA    | 95546-1288  | (530) 625-4114 |
| LASSEN INDIAN HEALTH CENTER                                                         | 795 JOAQUIN ST            | SUSANVILLE    | CA    | 96130-0000  | (530) 257-2542 |
| MORONGO INDIAN CLINIC PHARMACY                                                      | 11555 1/2 POTRERO RD      | BANNING       | CA    | 92220-0000  | (951) 849-4761 |
| NORTH LAKE MEDICAL PHARMACY #2                                                      | 347 LAKEPORT BLVD         | LAKEPORT      | CA    | 95453-0000  | (707) 263-1328 |
| REDDING RANCHERIA INDIAN HEALTH                                                     | 1441 LIBERTY ST           | REDDING       | CA    | 96001-0848  | (530) 224-2700 |
| SAN MANUEL INDIAN HEALTH CLINIC                                                     | 11980 MOUNT VERNON AVE    | GRAND TERRACE | CA    | 92313-5172  | (909) 864-1097 |
| SOBOBA INDIAN HEALTH CLINIC                                                         | 607 DONNA WAY             | SAN JACINTO   | CA    | 92583-0000  | (951) 654-0803 |
| SOUTHERN INDIAN HEALTH COUNCIL                                                      | 36350 CHURCH RD           | CAMPO         | CA    | 91906-0000  | (619) 478-2225 |
| SOUTHERN INDIAN HEALTH COUNCIL                                                      | 4058 WILLOWS RD           | ALPINE        | CA    | 91901-0000  | (619) 445-1188 |
| SYCUAN MEDICAL DENTAL PHARMACY                                                      | 5442 SYCUAN RD            | EL CAJON      | CA    | 92019-1816  | (619) 445-3518 |
| TUOLUMNE ME-WUK INDIAN HEALTH                                                       | 18880 CHERRY VALLEY BLVD  | TUOLUMNE      | CA    | 95379-0000  | (209) 928-5407 |
| UNITED INDIAN HEALTH SERVICES                                                       | 1600 WEEOT WAY            | ARCATA        | CA    | 95521-0000  | (707) 825-5020 |
| YOUR DRUG STORE                                                                     | 2303 NILES POINT          | BAKERSFIELD   | CA    | 93306-4021  | (661) 325-2487 |

Only Native Americans and Alaska Natives have access to Indian Health Service / Tribal / Urban Indian Health Program (I/T/U) Pharmacies through CCHP Senior Program (HMO)'s pharmacy network. Those other than Native Americans and Alaskan Natives may be able to access these pharmacies under limited circumstances (e.g., emergencies).

只有美國原住民和阿拉斯加原住民可以通過 CCHP 東華耆英 (HMO) 計劃的網絡藥房得到印第安人健康醫療服務/部落/印第安人城市健康衛生計劃 (I / T / U) 藥房的服務。其他人仕(美國原住民和阿拉斯加原住民以外)只可以在有限制的情況下(如緊急情況)才可使用這些藥房。

# Specialty Index - 專科目錄

|                                                         |                           |
|---------------------------------------------------------|---------------------------|
| Acupuncture 針灸 .....                                    | 17, 18, 19, 105, 106, 107 |
| Adult-Gerontology Nurse Practitioner .....              | 20                        |
| Allergy & Immunology 敏感科 .....                          | 21, 108                   |
| Anesthesiology 麻醉科 .....                                | 22, 23, 24, 109, 110      |
| Audiology 聽覺科 .....                                     | 25                        |
| Board Certified Behavior Analyst .....                  | 26                        |
| CardioThoracic Surgery 心臟外科 .....                       | 111                       |
| Cardiovascular Disease 心臟科 .....                        | 27, 28, 112, 113          |
| Chiropractic 脊椎神經治療 .....                               | 29, 30, 114               |
| Clinical Psychology 精神 / 心理(臨床科) .....                  | 87                        |
| Colon & Rectal Surgery 結直腸外科 .....                      | 31                        |
| Critical Care Medicine 重症監護科 .....                      | 32                        |
| Dental 牙科 .....                                         | 33                        |
| Dermatology 皮膚科 .....                                   | 34                        |
| Diagnostic Radiology 放射科 - 診斷 .....                     | 35, 115                   |
| Dietitian .....                                         | 36                        |
| Endocrinology 內分泌科 .....                                | 37, 116                   |
| Facial Plastic & Reconstructive Surgery 面部整形及重建外科 ..... | 38                        |
| Gastroenterology 腸胃科 .....                              | 39, 117, 118, 119         |
| General Surgery 普通外科 .....                              | 40, 41, 120               |
| Gynecologic Oncology 婦女腫瘤科 .....                        | 42                        |
| Hand Surgery (Plastic) 手外科 (整形) .....                   | 44                        |
| Hand Surgery 手外科 .....                                  | 43                        |
| Hepatology 肝臟科 .....                                    | 121                       |
| Licensed Clinical Social Worker 心理輔導 .....              | 88, 89                    |

|                                                         |                                    |
|---------------------------------------------------------|------------------------------------|
| Licensed Professional Clinical Counselor 持牌專業臨床顧問 ..... | 160                                |
| Marriage and Family Therapist 婚姻及家庭治療師 .....            | 90, 161                            |
| Medical Oncology 腫瘤科 .....                              | 45                                 |
| Mental Health 精神健康 .....                                | 91, 92, 93                         |
| Nephrology 腎科 .....                                     | 46, 47, 122, 123                   |
| Neurological Surgery 神經外科 .....                         | 48, 124                            |
| Neurology 腦科 .....                                      | 49, 125                            |
| Nuclear Medicine 核醫學科 .....                             | 126                                |
| Nurse Practitioner 執業護理師 .....                          | 50                                 |
| Obstetrics & Gynecology 婦產科 .....                       | 51, 52, 127, 128, 129, 130         |
| Ophthalmology (Retina) 眼科 (視網膜) .....                   | 57                                 |
| Ophthalmology 眼科 .....                                  | 53, 54, 55, 56, 131, 132, 133, 134 |
| Optometrist .....                                       | 58, 135                            |
| Optometry 視光科 .....                                     | 59, 60, 61, 136                    |
| Orthopedic Surgery (Spine) 矯形外科 (脊椎) .....              | 66, 140                            |
| Orthopedic Surgery 骨科 .....                             | 62, 63, 64, 65, 137, 138, 139      |
| Otolaryngology 耳鼻喉科 .....                               | 67, 141                            |
| Pain Management 疼痛管理科 .....                             | 68, 142                            |
| Pathology 病理科 .....                                     | 143                                |
| Physical Medicine & Rehab 物理及康復治療科 .....                | 69, 144                            |
| Physical Therapy 物理治療科 .....                            | 70                                 |
| Physician Assistant 助理醫師 .....                          | 145                                |
| Plastic & Reconstructive Surgery 整容外科 .....             | 71, 146                            |
| Plastic Surgery 整形外科 .....                              | 72                                 |
| Podiatry 足科 .....                                       | 73, 74, 75, 76, 147, 148           |
| Psychiatry 精神病科 .....                                   | 94, 95, 162, 163, 164              |

|                                |                  |
|--------------------------------|------------------|
| Psychologist 精神 / 心理 .....     | 96, 97, 98       |
| Pulmonary Disease 胸肺科 .....    | 149              |
| Radiation Oncology 放射性腫瘤科..... | 77, 78, 150, 151 |
| Rheumatology 風濕科 .....         | 79, 152          |
| Sleep Medicine 睡眠研究醫學專家 .....  | 80, 153          |
| Speech Pathology 言語治療科 .....   | 81, 154          |
| Speech-Language Pathology..... | 82               |
| Sports Medicine 運動醫科.....      | 83, 84, 155, 156 |
| Thoracic Surgery 胸腔外科 .....    | 157              |
| Urology 泌尿科 .....              | 85, 158          |
| Vascular Surgery 血管系外科 .....   | 86, 159          |

## Physician Index - 醫生目錄

|                                                          |                  |
|----------------------------------------------------------|------------------|
| Abbi, Gaurav, MD .....                                   | 62, 66, 137, 140 |
| Abedon, Stephen, MD .....                                | 115              |
| Abendroth, Roy, MD .....                                 | 77, 150          |
| Aditi, Anupam, MD .....                                  | 117              |
| Agarwal, Anita, MD .....                                 | 53               |
| Amin, Farzana, MD .....                                  | 162              |
| Andrews, Brian, MD .....                                 | 48, 124          |
| Aquino, Melinda, MD .....                                | 40, 86, 120, 159 |
| Arcilla, Angelo, MD .....                                | 99               |
| Asian American Recovery Services - HealthRight 360 ..... | 91               |
| Asian Family Institute - RAMS .....                      | 91               |
| Auza, Michael, MD .....                                  | 162              |
| Baladi, Naoum, MD .....                                  | 111, 157         |
| Balch, Dennis, DC .....                                  | 114              |
| Barber, Victoria, MD .....                               | 137              |
| Belfer, Howard, MD .....                                 | 125              |
| Berta, Scott, MD .....                                   | 124              |
| Bircher, Anja, PsyD .....                                | 87               |
| Bonacini, Maurizio, MD .....                             | 39               |
| Buckley, Daniel, MD .....                                | 131              |
| Cabrera, Milagros, MD .....                              | 127              |
| Calman, Andrew, MD .....                                 | 53, 131          |
| Carrillo, Lornalyn, MD .....                             | 99               |
| Cavero, Patricia, MD .....                               | 27, 112          |
| Celis, Edgar, MD .....                                   | 22, 109          |
| Cerra, Micheline, PT .....                               | 70               |
| Chan, Flora, PsyD .....                                  | 96               |
| Chan, Ka Kam, MD 陳嘉淦 .....                               | 8                |
| Chan, Michael, MD 陳國樑 .....                              | 79, 152          |
| Chang, Bradford, OD 鄭善述 .....                            | 59               |

|                                          |         |
|------------------------------------------|---------|
| Chang, Kristoffer, MD 張寧 .....           | 71      |
| Chang, Warren, MD 張華倫 .....              | 46, 122 |
| Chauser, Barry, MD.....                  | 150     |
| Chen, Esther, Lac .....                  | 17, 105 |
| Chen, Frank, MD .....                    | 8       |
| Chen, Judy, MD.....                      | 57      |
| Chen, Yung, MD .....                     | 144     |
| Cheung, Catherine, DPM 張向欣 .....         | 73      |
| Cheung, Tina, OD .....                   | 58      |
| Chew, Theresa, OD 趙黛娥 .....              | 59      |
| Chiang, Yi, DO .....                     | 109     |
| Chin, Stefan, MD.....                    | 117     |
| Choe, Susan, DPM.....                    | 73      |
| Chong, Melody, DPM 張秀英.....              | 73      |
| Chow, Irwin, MD .....                    | 22      |
| Choy, Robert, DPM 蔡英材 .....              | 74      |
| Chu, Chiao-Chiao, OD .....               | 136     |
| Chu, Paul, MD 朱鐵發 .....                  | 8       |
| Chun, James, MD 陳偉勳 .....                | 27      |
| Churnin, Jon, MD .....                   | 109     |
| Cohen, Irwin, DPM.....                   | 147     |
| Comprehensive Psychiatric Services ..... | 94, 162 |
| Craighead, Kenneth, LCSW .....           | 88      |
| Cruz, Christian, MD .....                | 46, 122 |
| Davis, Lisa, PA-C.....                   | 145     |
| De La Cerna, Felice, PsyD.....           | 87      |
| Dery, Molyan, CRNA .....                 | 22, 110 |
| Dressel, Donald, LCSW.....               | 88      |
| Eng, Anderson, DO.....                   | 9       |
| Eng, Roger, MD 吳子銘 .....                 | 35, 115 |

|                                                               |          |
|---------------------------------------------------------------|----------|
| Estrin, William, MD .....                                     | 49       |
| Excelsior Health Services 外米慎區華康醫務中心 .....                    | 9        |
| Fan, Yuan-Da, MD 范淵達 .....                                    | 51       |
| Feeney, James, MD .....                                       | 112      |
| Feeney, Thomas, MD .....                                      | 112      |
| Fong, David, DPM 方光祥 .....                                    | 74       |
| Fong, Kenton, MD .....                                        | 72       |
| Fong, Vernon, MD .....                                        | 62       |
| Friedenthal, Roger, MD .....                                  | 72       |
| Fu, Arthur, MD .....                                          | 53, 131  |
| Fujinaka, Michael, MD .....                                   | 142      |
| Garcia-Chuapoco, Rowena, MD .....                             | 117      |
| Gaw, Albert, MD .....                                         | 94, 163  |
| Gee, Harry, MD .....                                          | 9        |
| Gellert Health Services Gellert 華康醫務中心 .....                  | 99       |
| Geng, Alexander, MD .....                                     | 77       |
| Gerard, Stephen, MD .....                                     | 126, 143 |
| Gordon, Joshua, MD .....                                      | 43, 62   |
| Gordon, Leonard, MD .....                                     | 63       |
| Grady, Brian, MD .....                                        | 85, 158  |
| Guo, Hong, PsyD .....                                         | 87       |
| Haight Ashbury Integrated Care Center - HealthRight 360 ..... | 91       |
| Haight Ashbury Medical Clinic - HealthRight 360 .....         | 92       |
| Hamby, Dennis, MD .....                                       | 118      |
| Hamilton, Henry, MD .....                                     | 127      |
| Hasanuddin, Harrison, DO .....                                | 10       |
| Hee, Michael, MD .....                                        | 132      |
| Hernandez, Raul, MD .....                                     | 85, 158  |
| Heuklom, Shannon, NP .....                                    | 20       |
| Ho, Dominic, MD .....                                         | 100      |
| Ho, Gustin, MD 何明聖 .....                                      | 10, 27   |

|                               |               |
|-------------------------------|---------------|
| Ho, Kevin Ki-Hong 何其康 .....   | 67            |
| Hoang, Robert, MD .....       | 85            |
| Hu, Emily, MD .....           | 127           |
| Huang, Scott, DO 黃昱儒 .....    | 10            |
| Huey, Sabine, LAC .....       | 17, 105       |
| Huynh, Thanh, MD .....        | 100           |
| Isero, Eric, DC .....         | 114           |
| Jacobs, Don, MD .....         | 143           |
| Jain, Rashmi, MD .....        | 100, 122      |
| Johnson, Robert, MD .....     | 57            |
| Jones, Carri, MD .....        | 142, 144, 155 |
| Jumper, James, MD .....       | 54            |
| Kanen, Nani, MD .....         | 101           |
| Kanzaria, Kantilal, MD .....  | 23            |
| Kao, Albert, MD .....         | 46, 123       |
| Kao, Roger, MD .....          | 118, 121      |
| Kardassakis, Dean, MD .....   | 108           |
| Kay, Lynda, MD 李玉珠 .....      | 101           |
| Kelly, Pardis, DPM .....      | 147           |
| Khan, Aman, MD .....          | 137, 155      |
| Kharrazi, Michelle, SLP ..... | 82            |
| Kim, Leslie, MD .....         | 138           |
| Kini, Divya, MD .....         | 101           |
| Kir, Chun-Pang, DDS 賈振鵬 ..... | 33            |
| Kir, Ryan, DDS .....          | 33            |
| Kirschner, Bruce, MD .....    | 132           |
| Ko, Edward, MD 高景行 .....      | 11, 102       |
| Koenig, Jessica, MD .....     | 94            |
| Kong, Shannon, SLP .....      | 81, 154       |
| Kornguth, David, MD .....     | 77            |
| Kung, Eleanor, OD .....       | 135           |

|                                   |          |
|-----------------------------------|----------|
| Kwok, Shiu, MD 郭兆源.....           | 54       |
| Kwong, Avon, OD 鄺韋綺娜.....         | 60       |
| Lai, David, PhD.....              | 96       |
| Lam, Diana, MD.....               | 28       |
| Lam, Gary, DPM.....               | 74       |
| Lan, Josephine, SLP.....          | 82       |
| Lareau-Meredith, Bennett, NP..... | 50       |
| Lau, Andrew, DC 劉俊英.....          | 29       |
| Lau, Francis, DC 劉俊雄.....         | 29       |
| Lau, Gary, DC 劉俊賢.....            | 29       |
| Lau, Helen, MD.....               | 37       |
| Law, Lisa, MD 羅麗莎.....            | 11       |
| Lee, Charles, MD.....             | 44, 71   |
| Lee, Diana, DO.....               | 23, 110  |
| Lee, Ding Ding, MD.....           | 51       |
| Lee, Eugene, MD.....              | 118      |
| Lee, John, MD 李威達.....            | 78       |
| Lee, Michael, OD 李漫谷.....         | 60       |
| Leichtling, Jonathan, MD.....     | 31, 40   |
| Leung, Cecilia, LAc.....          | 17, 105  |
| Leung, Pui Fung, AuD.....         | 25       |
| Levenson, Scott, MD.....          | 119, 121 |
| Lewis, Pamela, MD.....            | 41       |
| Li, Ho-Yin, MD 李浩然.....           | 23, 32   |
| Li, Sareen, NP.....               | 50       |
| Li, Suzanne, MD.....              | 54       |
| Lim, Melissa, MD.....             | 149, 153 |
| Lin, Danny, MD 林宜宏.....           | 55       |
| Liu, Siwei, NP.....               | 11       |
| Liu, Ting Ting, MD.....           | 132      |

|                                                    |                  |
|----------------------------------------------------|------------------|
| Lo, Eddie, MD.....                                 | 63, 83, 138, 155 |
| Longar, Susan, MD .....                            | 133              |
| Lyon Martin Health Services - HealthRight 360..... | 92               |
| Ma, Wai-Man, MD 馬惠民 .....                          | 12               |
| Mak, Stella, LMFT .....                            | 90               |
| Man, Wenyan, MD.....                               | 95, 163          |
| Margolis, Michael, MD .....                        | 128              |
| Maung, Aung Kyaw, MD .....                         | 12               |
| McDonald, Henry, MD .....                          | 55, 133          |
| McKell, Bernadette, DO .....                       | 102              |
| Melamud, Ori, MD .....                             | 158              |
| Meng, Joy, MD .....                                | 49, 80           |
| Meyer, John, MD .....                              | 78               |
| Millhouse, Felix, MD .....                         | 28, 113          |
| Million, Carolyn, MD .....                         | 31, 41           |
| Missirian, John, MD .....                          | 63, 138          |
| Mo, Yim Ping, NP .....                             | 12               |
| Moon, Jin, MD 文真光 .....                            | 51               |
| Moskowitz, Richard, MD.....                        | 103              |
| Nathanson, Daniel, MD .....                        | 86               |
| Ng, Catherine, LAC.....                            | 18, 106          |
| Ng, Judy, MD 伍穎喬.....                              | 34               |
| Ngai, Yi Lin, NP .....                             | 13               |
| Nguyen, Mindie, MD.....                            | 121              |
| Okumu, Kris, MD.....                               | 64, 66, 139, 140 |
| O'Neill, Daniel, MD .....                          | 113              |
| Onuma, Edward, MD .....                            | 119              |
| Orgel, Ling, PhD 陳琳 .....                          | 96               |
| Patel, Divyang, DPM .....                          | 75               |
| Perez, Robert, MD .....                            | 120              |
| Poon, Henry, PhD, LMFT .....                       | 90, 161          |
| Qin, Kelly, NP-C.....                              | 13, 103          |

|                                                   |                  |
|---------------------------------------------------|------------------|
| Rena, Diokson, MD .....                           | 68, 69, 83       |
| Reyzelman, Alexander, DPM .....                   | 75               |
| Rittenhouse, Douglas, MD .....                    | 128              |
| Roache, Paul, MD.....                             | 64, 83           |
| Saldana, Sharlette, OD.....                       | 60               |
| Salmo, Samer, MD .....                            | 163              |
| Sampson, Joshua, MD.....                          | 84               |
| Sanjorjo, Josephus, MD .....                      | 123              |
| Sciaroni, Laura, MD.....                          | 65, 84, 139, 156 |
| Sclafani, Joseph, MD .....                        | 142, 144         |
| Scribner, Robert, MD .....                        | 120, 159         |
| Seiff, Stuart, MD .....                           | 55, 133          |
| Serrato, Claire, MD .....                         | 128              |
| Shapiro, Katie, MD.....                           | 129              |
| Shen, Dennis, MD 沈大年 .....                        | 39               |
| Shen, Jenta, MD 沈仁達.....                          | 42, 52           |
| Shen, Rong, MD 沈嶸 .....                           | 13               |
| Simpson, James, RPT .....                         | 70               |
| Singleton, Pamela, MD .....                       | 129              |
| So, Kenneth, DC 蘇志雄 .....                         | 30               |
| So, Scott, MD .....                               | 56               |
| Stavosky, James, DPM .....                        | 147              |
| Stodgel, Thomas, MD .....                         | 129              |
| Sun, Yang, MD.....                                | 24               |
| Sunset Health Services 日落區華康醫務中心.....             | 14               |
| Support Health Services 健康服務中心 .....              | 14               |
| Tan, Ho, MD 譚纘豪 .....                             | 68               |
| Tang, Sai Ying, NP .....                          | 14               |
| Tarran, William, DPM .....                        | 148              |
| Tenderloin Health Services - HealthRight 360..... | 92               |
| Teng, Peter, MD.....                              | 28               |

|                                      |          |
|--------------------------------------|----------|
| Tong, Senoch, OD 唐寶泰 .....           | 61       |
| Tran, Andrew, MD .....               | 164      |
| Tran, David, DPM .....               | 75       |
| Tran, Jennifer, NP .....             | 103      |
| Tran, Loan, MD .....                 | 78       |
| Tran, Thanh, MD .....                | 15, 49   |
| Treskovich, Jacob, MD .....          | 164      |
| Tseng, Robert, MD 曾瑞年 .....          | 47, 123  |
| Tsuchiyose, Mark, MD .....           | 119      |
| Tsui, Karen, RD .....                | 36       |
| Tuan, Cheng-Yang, MD 段正揚 .....       | 37       |
| Tuffanelli, Lucia, MD .....          | 34       |
| Valdez, Amelia, MD .....             | 104      |
| Valdez, Tomas, DPM .....             | 148      |
| Vaughan, David, MD .....             | 113      |
| Villanueva, Anthony, MD .....        | 134      |
| Wai, Christine, PsyD .....           | 97       |
| Walden House - HealthRight 360 ..... | 93       |
| Wang, Eric, MD 王俊杰 .....             | 35       |
| Wang, Minjun, LPCC, CHt .....        | 160      |
| Wang, Roger, DO 汪嶸卿 .....            | 21, 79   |
| Wang, Wei, MD .....                  | 45       |
| Washington, Vickie, LAc .....        | 18       |
| Willott, Sara, LCSW .....            | 88       |
| Wingfield, Kristin, MD .....         | 84       |
| Wong, Denise, MD .....               | 38, 67   |
| Wong, Diana, PsyD, LMFT .....        | 90, 97   |
| Wong, Judi, DO .....                 | 104      |
| Wong, Robin, RPT .....               | 70       |
| Wong, Vincent, DPM 黃育威 .....         | 76, 148  |
| Wu, James, MD .....                  | 141, 146 |

|                               |         |
|-------------------------------|---------|
| Wu, John, MD 吳鴻恩 .....        | 15      |
| Wu, Meiwen, MD.....           | 150     |
| Wu, Rufina, LCSW .....        | 89      |
| Wu, Teresa, OD.....           | 135     |
| Wyant, Rachele, SLP .....     | 82      |
| Xu, Chengyu, MD .....         | 37, 116 |
| Yan, Alice, MD.....           | 104     |
| Yang, Jon, MD 楊仲伦 .....       | 56      |
| Yap, Alexander, MD 葉燕山 .....  | 157     |
| Ye, Maian, DO 葉脈安 .....       | 15, 47  |
| Yee, David, MD 余純光 .....      | 56      |
| Yost, Margaret, BCBA .....    | 26      |
| Young, Clarence, MD .....     | 151     |
| Yu, Bella, PSYD .....         | 97      |
| Yu, Dove, LAc .....           | 106     |
| Yuen, Emiliy, L.Ac.....       | 18, 107 |
| Zeng, Rong Wendy, MD .....    | 130     |
| Zhang, Jianghui, MD 张江晖 ..... | 65, 66  |
| Zheng, Weiwen, MD 鄭衛文 .....   | 16      |
| Zhou, Vincent, LAc .....      | 19, 107 |
| Zhou, Ying, MD .....          | 130     |
| Zozulinsky, Anna, PHD .....   | 98      |
| Zuberi, Mansoor, MD.....      | 95, 164 |



## Discrimination is Against the Law

---

Chinese Community Health Plan (CCHP) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. CCHP does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Chinese Community Health Plan:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
  - o Qualified sign language interpreters
  - o Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
  - o Qualified interpreters
  - o Information written in other languages

If you need these services, contact CCHP Member Services.

If you believe that CCHP has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with us in person, by phone, by mail, or by fax at:

CCHP Member Services  
445 Grant Ave, Suite 700, San Francisco, CA 94108  
1-888-775-7888, TTY 1-877-681-8898  
Fax 1-415-397-2129

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services  
200 Independence Avenue SW.  
Room 509F, HHH Building  
Washington, DC 20201,  
1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

---

華人保健計劃 (CCHP) 遵守適用的聯邦民權法律規定，不因種族、膚色、民族血統、年齡、殘障或性別而歧視任何人。華人保健計劃 (CCHP) 不因種族、膚色、民族血統、年齡、殘障或性別而排斥任何人或以不同的方式對待他們。

華人保健計劃 (CCHP) :

- 向殘障人士免費提供各種援助和服務，以幫助他們與我們進行有效溝通，如：
  - o 合格的手語翻譯員
  - o 以其他格式提供的書面資訊 (大號字體、音訊、無障礙電子格式、其他格式)
- 向母語非英語的人員免費提供各種語言服務，如：
  - o 合格的翻譯員
  - o 以其他語言書寫的資訊

如果您需要此類服務，請聯絡華人保健計劃 (CCHP)

如果您認為華人保健計劃 (CCHP) 未能提供此類服務或者因種族、膚色、民族血統、年齡、殘障或性別而透過其他方式歧視您，您可以親自提交投訴，或者以郵寄、傳真或電郵的方式向我們提交投訴：

CCHP Member Services  
445 Grant Ave, Suite 700, San Francisco, CA 94108  
1-888-775-7888, 聽力殘障人士電話 1-877-681-8898  
傳真 1-415-397-2129

您還可以向 U.S. Department of Health and Human Services (美國衛生及公共服務部) 的 Office for Civil Rights (民權辦公室) 提交民權投訴, 透過 Office for Civil Rights Complaint Portal 以電子方式投訴:

<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, 或者透過郵寄或電話的方式投訴:

U.S. Department of Health and Human Services  
200 Independence Avenue, SW  
Room 509F, HHH Building  
Washington, D.C. 20201  
1-800-368-1019, 800-537-7697 (TDD) (聾人用電信設備)

登入 <http://www.hhs.gov/ocr/office/file/index.html> 可獲得投訴表格。

---

Chinese Community Health Plan (CCHP) cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo. Chinese Community Health Plan no excluye a las personas ni las trata de forma diferente debido a su origen étnico, color, nacionalidad, edad, discapacidad o sexo.

Chinese Community Health Plan:

- Proporciona asistencia y servicios gratuitos a las personas con discapacidades para que se comuniquen de manera eficaz con nosotros, como los siguientes:
  - o Intérpretes de lenguaje de señas capacitados.
  - o Información escrita en otros formatos (letra grande, audio, formatos electrónicos accesibles, otros formatos).
- Proporciona servicios lingüísticos gratuitos a personas cuya lengua materna no es el inglés, como los siguientes:
  - o Intérpretes capacitados.
  - o Información escrita en otros idiomas.

Si necesita recibir estos servicios, comuníquese con CCHP Member Services.

Si considera que CCHP no le proporcionó estos servicios o lo discriminó de otra manera por motivos de origen étnico, color, nacionalidad, edad, discapacidad o sexo, puede presentar un reclamo a la siguiente persona:

CCHP Member Services  
445 Grant Ave, Suite 700, San Francisco, CA 94108  
1-888-775-7888, TTY 1-877-681-889  
Fax 1-415-397-2129.

También puede presentar un reclamo de derechos civiles ante la Office for Civil Rights (Oficina de Derechos Civiles) del Department of Health and Human Services (Departamento de Salud y Servicios Humanos) de EE. UU. de manera electrónica a través de Office for Civil Rights Complaint Portal, disponible en <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, o bien, por correo postal a la siguiente dirección o por teléfono a los números que figuran a continuación:

U.S. Department of Health and Human Services  
200 Independence Avenue, SW  
Room 509F, HHH Building  
Washington, D.C. 20201  
1-800-368-1019, 800-537-7697 (TDD)

Puede obtener los formularios de reclamo en el sitio web <http://www.hhs.gov/ocr/office/file/index.html>.

---

## Multi-language Interpreter Services

**English:** ATTENTION: If you speak another language, language assistance services, free of charge, are available to you. Call 1-888-775-7888 (TTY: 1-877-681-8898).

**Spanish:** ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-888-775-7888 (TTY: 1-877-681-8898).

**Chinese:** 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電1-888-775-7888 (TTY: 1-877-681-8898)。

**Tagalog:** PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-888-775-7888 (TTY: 1-877-681-8898).

**Vietnamese:** CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-888-775-7888 (TTY: 1-877-681-8898).

**Korean:** 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-888-775-7888 (TTY: 1-877-681-8898) 번으로 전화해 주십시오.

**Russian:** ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-888-775-7888 (телетайп: 1-877-681-8898)

**Arabic:**

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-888-775-7888 (رقم هاتف الصم والبكم: 1-877-681-8898).

**Hindi:** ध्यान दः यद आप हद बोलते ह तो आपके लिए मुफ्त म भाषा सहायता सेवाएं उपलब्ध ह। 1-888-775-7888 (TTY: 1-877-681-8898) पर कॉल कर।

**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。1-888-775-7888 (TTY: 1-877-681-8898) まで、お電話にてご連絡ください。

**Armenian:** Ուշադրութեամբ խոսակցելու համար հայերեն, արաբական և անգլիական լեզուներով անվճար լեզվափոխարկումներ կատարվում են։ Զանգահարեք 1-888-775-7888 (TTY: 1-877-681-8898)։

**Punjabi:** ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਸਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹੈ। 1-888-775 7888 (TTY: 1-877-681-8898) 'ਤੇ ਕਾਲ ਕਰੋ।

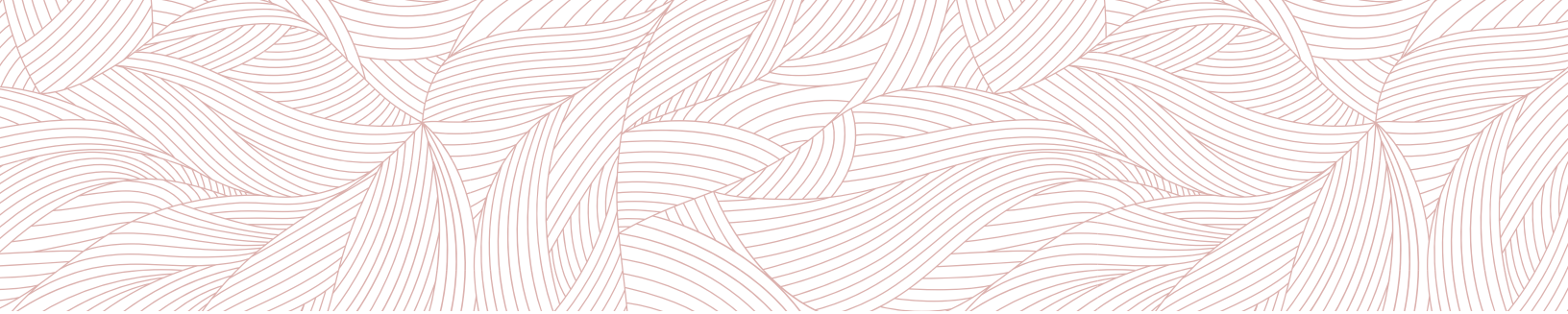
**Cambodian:** ប្រយ័ត្ន: បើសិនជាអ្នកនិយាយភាសាខ្មែរ, សេវាជំនួយផ្នែកភាសា ដោយមិនគិតល្មើស គឺអាចមានសំរាប់អ្នក។ ចូរ ទូរស័ព្ទ 1-888-775 7888 (TTY: 1-877-681-8898)។

**Hmong:** LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 1-888-775 7888 (TTY: 1-877-681-8898).

**Thai:** เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร 1-888-775 7888 (TTY: 1-877-681-8898).

**Persian (Farsi):**

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با 1-888-775-7888 (TTY: 1-877-681-8898) تماس بگیرید.



This directory was updated on 10/2019. For more recent information or other questions, please contact Chinese Community Health Plan, at 1-888-775-7888 or, for TTY users, 1-877-681-8898, seven days a week, 8:00 a.m. to 8:00 p.m., or visit [www.cchphealthplan.com/medicare](http://www.cchphealthplan.com/medicare)

Changes to our provider network may occur during the benefit year. An updated Provider/Pharmacy Directory is located on our website at [www.cchphealthplan.com/medicare](http://www.cchphealthplan.com/medicare). You may also call Member Services for updated information.

本名錄是2019年10月修定本。如欲了解最新詳情或有疑問，請致電1-888-775-7888 與華人保健計劃聯絡（聽力殘障人士請電TTY1-877-681-8898），每週7天，上午8時至晚上8時，或瀏覽網址 [www.CCHPHealthPlan.com/medicare](http://www.CCHPHealthPlan.com/medicare)。

我們的醫生名錄及藥房網絡可能會在保障年度中產生變化。更新的醫生名錄及藥房網絡可由我們的網站索取：[www.CCHPHealthPlan.com/medicare](http://www.CCHPHealthPlan.com/medicare)。您也可致電會員服務部獲取更新信息。

