



Hospital/Facility Search Result

Molina Healthcare of Texas

22 hospitals/facilities met the preferences you selected

Search Criteria

Facility Type	HOSPITAL
Coverage	Marketplace
Hospital/Facility State	TX
County	BEXAR

Directory Notes

For Medicaid:

The information shown below is gathered from new provider forms or contracts. It can also be gathered during office visits or over the telephone. It is changed if there is new information. The information in this directory is current as of 02/28/2021. The information listed in this directory is subject to change. If you have any questions regarding the status of a particular provider, please contact Molina Healthcare Member Services toll free at (866) 449-6849, TTY at (800) 735-2989 (English) or (800) 662-4954 (Spanish). If you have difficulty in reading or understanding this information, please contact Molina Healthcare Member Services toll free at (866) 449-6849, TTY at (800) 735-2989 (English) or (800) 662-4954 (Spanish) for help. This information can be provided orally in English, or in your primary language. Written translations may be available in certain languages and accommodations will be made for the visually impaired. Molina does not limit your selection of an OB/GYN to your PCP's network. You can go to any OB/GYN provider listed in the provider directory. You have the right to select an OB/GYN without a referral from your PCP. The access to health care services of an OB/GYN includes: One well-woman check-up per year, care related to pregnancy, care for any female medical condition, and referral to a special doctor (specialist) within the network.

ADA:

Members are entitled to full and equal access to covered services, including members with disabilities as required under the federal American with Disability Act of 1990 and Section 504 of the Rehabilitation Act of 1973.

For Medicare:

Molina Healthcare (Molina) complies with all Federal civil rights laws that relate to healthcare services. Molina offers healthcare services to all members without regard to race, color, national origin, age, disability, or sex. Molina does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. This includes gender identity, pregnancy and sex stereotyping.

To help you talk with us, Molina provides services free of charge:

- Aids and services to people with disabilities
 - Skilled sign language interpreters
 - Written material in other formats (large print, audio, accessible electronic formats, Braille)
- Language services to people who speak another language or have limited English skills
 - Skilled interpreters
 - Written material translated in your language
 - Material that is simply written in plain language

If you need these services, contact Molina Member Services at (800) 665-3086; TTY 711, 7 days a week, 8 a.m. - 8 p.m., local time.

If you think that Molina failed to provide these services or treated you differently based on your race, color, national origin, age, disability, or sex, you can file a complaint. You can file a complaint in person, by mail, fax, or email. If you need help writing your complaint, we will help you. Call our Civil Rights Coordinator at (866) 606-3889, or TTY, 711. Mail your complaint to:

Civil Rights Coordinator
200 Oceangate
Long Beach, CA 90802

You can also email your complaint to civil.rights@molinahealthcare.com. Or, fax your complaint to (562) 499-0610.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services,

Office for Civil Rights. Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html> . You can mail it to:
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201

You can also send it to a website through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>.
If you need help, call 1-800-368-1019; TTY 800-537-7697.

English

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-800-665-3086 (TTY: 711).

Spanish

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-665-3086 (TTY: 711).

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 1-800-665-3086 (TTY : 711)。

Tagalog

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-665-3086 (TTY: 711).

French

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-665-3086 (ATS : 711).

Vietnamese

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-665-3086 (TTY: 711).

German

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-800-665-3086 (TTY: 711).

Korean

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-665-3086 (TTY: 711) 번으로 전화해 주십시오.

Russian

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-665-3086 (телетайп: 711).

Arabic

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-800-665-3086 (رقم هاتف الصم والبكم: 711).

Hindi

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-800-665-3086 (TTY: 711) पर कॉल करें।

Italian

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-800-665-3086 (TTY: 711).

Portugués

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-800-665-3086 (TTY: 711).

French Creole

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-800-665-3086 (TTY: 711).

Polish

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-800-665-3086 (TTY: 711).

Japanese

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-800-665-3086（TTY: 711）まで、お電話にてご連絡ください。

Hmong

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 1-800-665-3086 (TTY: 711).

Farsi

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با 1-800-665-3086 (TTY: 711) تماس بگیرید.

Armenian

Հայերեն: Եթե խոսում եք հայերեն, կարող եք օգտագործել մեր անվճար լեզուական օգնությունը: Կոչվե՛ք 1-800-665-3086 (TTY (Հայերեն)՝ 711):

Cambodian

កម្ពុជា: បើសិនជាអ្នកនិយាយ ភាសាខ្មែរ, សេវាជំនួយភាសា ដោយមិនគិតថ្លៃ គឺអាចមានសំរាប់អ្នក។ ទូរស័ព្ទ 1-800-665-3086 (TTY: 711)។

Albanian

KUJDES: Nëse flitni shqip, për ju ka në dispozicion shërbime të asistencës gjuhësore, pa pagesë. Telefononi në 1-800-665-3086 (TTY: 711).

Amharic

ማስታወሻ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያገዝዎት ተዘጋጅተዋል። ወደ ሚከተለው ቁጥር ይደውሉ- 1-800-665-3086 (መስማት ለተሳናቸው፡ 711)።

Bengali

লক্ষ্য করুন: যদি আপনি বাংলা, কথা বলতে পারেন, তাহলে নি:খরচায় ভাষা সহায়তা পরিষেবা উপলব্ধ আছে। ফোন করুন ১-৮০০-৬৬৫-৩০৮৬ (TTY: 711)।

Cushite (Oromo language)

XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa 1-800-665-3086 (TTY: 711).

Dutch

AANDACHT: Als u nederlands spreekt, kunt u gratis gebruikmaken van de taalkundige diensten. Bel 1-800-665-3086 (TTY: 711).

Greek

ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε 1-800-665-3086 (TTY: 711).

Gujarati

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-800-665-3086 (TTY: 711).

Kru(Bassa language)

Dè dɛ nià kɛ dyédé gbo: ɔ jũ ké m`[Bàsɔ́ɔ̀-wùdù-po-nyɔ] jũ ní, níí, à wuɖu kà kò dò po-poo`béín m`

ADA:

Members are entitled to full and equal access to covered services, including members with disabilities as required under the federal American with Disability Act of 1990 and Section 504 of the Rehabilitation Act of 1973.

For Marketplace:

[Molina Marketplace](#)

ADA:

Members are entitled to full and equal access to covered services, including members with disabilities as required under the federal American with Disability Act of 1990 and Section 504 of the Rehabilitation Act of 1973.

For Molina Dual Options STAR+PLUS MMP

All providers have access to language line interpreters.

Molina Dual Options STAR+PLUS MMP is a health plan that contracts with both Medicare and Texas Medicaid to provide benefits of both programs to enrollees.

You can ask that we always send you information in the language or format you need. This is called a standing request. We will keep track of your standing request so you do not need to make separate requests each time we send you information. To get this document in a language other than English, please contact the State at (800) 252-8263, TTY: 711, Monday - Friday, 8 a.m. to 5 p.m., local time to update your record with the preferred language. To get this document in an alternate format, please contact Member Services at (866) 856-8699, TTY: 711, Monday - Friday, 8 a.m. to 8 p.m., local time. A representative can help you make or change a standing request. You can also contact your Service Coordinator for help with standing requests.

If you speak English, language assistance services, free of charge, are available to you. Call (866) 856-8699, TTY: 711, Monday - Friday, 8 a.m. to 8 p.m., local time. The call is free.

Si usted habla español, los servicios de asistencia del idioma, sin costo, están disponibles para usted. Llame al (866) 856-8699, servicio TTY al 711, de lunes a viernes, de 8:00 a. m. a 8:00 p. m., hora local. La llamada es gratuita.

Notice of Non-Discrimination:

Molina Healthcare of Texas (Molina) complies with all Federal civil rights laws that relate to healthcare services. Molina offers healthcare services to all members without regard to race, color, national origin, age, disability, or sex. Molina does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. This includes gender identity, pregnancy and sex stereotyping.

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- Skilled sign language interpreters
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Civil Rights Coordinator
200 OceanGate
Long Beach, CA 90802

You can also email your complaint to civil.rights@molinahealthcare.com. Or, fax your complaint to (562) 499-0610.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights. Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>. You can mail it to:

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200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201

You can also send it to a website through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>. If you need help, call 1-800-368-1019; TTY 800-537-7697.

Language Assistance Services:

English

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Spanish

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-866-856-8699 (TTY: 711).

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 1-866-856-8699 (TTY: 711)。

Tagalog

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French

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-866-856-8699 (ATS : 711).

Vietnamese

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-866-856-8699 (TTY: 711).

German

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-866-856-8699 (TTY: 711).

Korean

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-866-856-

8699 (TTY: 711) 번으로 전화해 주십시오.

Russian

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-866-856-8699 (телетайп: 711).

Arabic

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Hindi

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-866-856-8699 (TTY: 711) पर कॉल करें।

Italian

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Portugués

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-866-856-8699 (TTY: 711).

French Creole

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-866-856-8699 (TTY: 711).

Polish

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-866-856-8699 (TTY: 711).

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。1-866-856-8699（TTY: 711）まで、お電話にてご連絡ください。

Farsi

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با 1-866-856-8699 (TTY: 711) تماس بگیرید.

Gujarati

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-866-856-8699 (TTY: 711).

Laotian

ສູນຂ່າວ: ສູນຂ່າວ ສູນຂ່າວສູນຂ່າວສູນຂ່າວ, ສູນຂ່າວສູນຂ່າວສູນຂ່າວສູນຂ່າວ, ສູນຂ່າວສູນຂ່າວ, ສູນຂ່າວສູນຂ່າວສູນຂ່າວ. ສູນຂ່າວ 1-866-856-8699 (TTY: 711).

Urdu

خبردار: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں۔ کال کریں 1-866-856-8699 (TTY: 711) ADA:

Members are entitled to full and equal access to covered services, including members with disabilities as required under the federal American with Disability Act of 1990 and Section 504 of the Rehabilitation Act of 1973.

BEXAR

-SAN ANTONIO

BAPTIST HEALTH SYSTEM - MEDICAL CENTER

HOSPITAL - GENERAL ACUTE CARE

BAPTIST HEALTH SYSTEM,111 DALLAS ST,
SAN ANTONIO, TX, 78205

210-297-7000

Program : MOLINA MARKETPLACE PROGRAM

KINDRED HOSPITAL SAN ANTONIO HOSPITAL - LONG TERM CARE

KINDRED HOSPITAL SAN ANTONIO,111 DALLAS ST,
SAN ANTONIO, TX, 78205

210-297-7195

Program : MOLINA MARKETPLACE PROGRAM

BAPTIST HEALTH SYSTEM

HOSPITAL - GENERAL ACUTE CARE

BAPTIST HEALTH SYSTEM,215 E QUICY, STE 200,
SAN ANTONIO, TX, 78215

210-297-1000

Program : MOLINA MARKETPLACE PROGRAM

BAPTIST HEALTH SYSTEM - NORTHEAST

HOSPITAL - GENERAL ACUTE CARE

BAPTIST HEALTH SYSTEM,8811 VILLAGE DR,
SAN ANTONIO, TX, 78217

210-297-2000

Program : MOLINA MARKETPLACE PROGRAM

BAPTIST HEALTH SYSTEM - SOUTHEAST HOSPITAL - GENERAL ACUTE CARE

BAPTIST HEALTH SYSTEM,4214 E SOUTHCROSS BLVD,
SAN ANTONIO, TX, 78222

210-297-3000

Program : MOLINA MARKETPLACE PROGRAM

BAPTIST EMERGENCY HOSPITAL

HOSPITAL - GENERAL ACUTE CARE

BAPTIST EMERGENCY HOSPITAL THOUSAND OAKS,7719 INTERSTATE 35 S,
SAN ANTONIO, TX, 78224

Program : MOLINA MARKETPLACE PROGRAM

SOUTHWEST GENERAL HOSPITAL HOSPITAL - GENERAL ACUTE CARE

SOUTHWEST GENERAL HOSPITAL,7400 BARLITE BLVD,
SAN ANTONIO, TX, 78224

210-921-2000

Program : MOLINA MARKETPLACE PROGRAM

BAPTIST HEALTH SYSTEM - ST LUKES HOSPITAL - GENERAL ACUTE CARE

BAPTIST HEALTH SYSTEM,7930 FLOYD CURL DR,
SAN ANTONIO, TX, 78229

210-297-5000

Program : MOLINA MARKETPLACE PROGRAM

KINDRED HOSPITAL SAN ANTONIO HOSPITAL - LONG TERM CARE

KINDRED HOSPITAL SAN ANTONIO,3636 MEDICAL DR,
SAN ANTONIO, TX, 78229

210-616-0616

Program : MOLINA MARKETPLACE PROGRAM

UNIVERSITY HEALTH SYSTEM HOSPITAL - GENERAL ACUTE CARE

UT HEALTH PHYSICIANS,4502 MEDICAL DR,
SAN ANTONIO, TX, 78229

210-743-2100

Program : MOLINA MARKETPLACE PROGRAM

BAPTIST EMERGENCY HOSPITAL HOSPITAL - GENERAL ACUTE CARE

BAPTIST EMERGENCY HOSPITAL,16088 SAN PEDRO AVE,
SAN ANTONIO, TX, 78232

210-402-4092

Program : MOLINA MARKETPLACE PROGRAM

BAPTIST HEALTH SYSTEM - MISSION TRAIL

HOSPITAL - GENERAL ACUTE CARE

BAPTIST HEALTH SYSTEM,3333 RESEARCH PLZ,
SAN ANTONIO, TX, 78235

210-297-1281

Program : MOLINA MARKETPLACE PROGRAM

BAPTIST EMERGENCY HOSPITAL
ZARZAMORA
HOSPITAL - GENERAL ACUTE CARE
BAPTIST EMERGENCY HOSPITAL
ZARZAMORA,7719 IH 35 S,
SAN ANTONIO, TX, 78239
210-572-2955
Program : MOLINA MARKETPLACE
PROGRAM

LIFECARE HOSPITALS OF SAN ANTONIO
HOSPITAL - LONG TERM CARE
LIFECARE HOSPITALS OF SAN
ANTONIO,8902 FLOYD CURL DR,
SAN ANTONIO, TX, 78240
210-690-7000
Program : MOLINA MARKETPLACE
PROGRAM

PAM SPECIALTY HOSPITAL OF SAN
ANTONIO
HOSPITAL - LONG TERM CARE
PAM SPECIALTY HOSPITAL OF SAN
ANTONIO,5418 N LOOP 1604 W,
SAN ANTONIO, TX, 78249
210-921-3550
Program : MOLINA MARKETPLACE
PROGRAM

BAPTIST EMERGENCY HOSPITAL
WESTOVER HILLS
HOSPITAL - GENERAL ACUTE CARE
BAPTIST EMERGENCY HOSPITAL
WESTOVER HILLS,10811 TOWN CENTER
DR,
SAN ANTONIO, TX, 78251
210-572-0911
Program : MOLINA MARKETPLACE
PROGRAM

BAPTIST EMERGENCY HOSPITAL
HAUSMAN
HOSPITAL - GENERAL ACUTE CARE
BAPTIST EMERGENCY HOSPITAL
HAUSMAN,8230 N 1604 W,
SAN ANTONIO, TX, 78258
210-572-8885
Program : MOLINA MARKETPLACE
PROGRAM

BAPTIST EMERGENCY HOSPITAL
OVERLOOK
HOSPITAL - GENERAL ACUTE CARE
BAPTIST EMERGENCY HOSPITAL
OVERLOOK,25615 US HIGHWAY 281 N,
SAN ANTONIO, TX, 78258
713-637-1044
Program : MOLINA MARKETPLACE
PROGRAM

BAPTIST EMERGENCY HOSPITAL
OVERLOOK
HOSPITAL - GENERAL ACUTE CARE
BAPTIST EMERGENCY HOSPITAL
OVERLOOK,25615 US HIGHWAY 281 N,
SAN ANTONIO, TX, 78258
713-637-1044
Program : MOLINA MARKETPLACE
PROGRAM

BAPTIST EMERGENCY HOSPITAL
WESTOVER HILLS
HOSPITAL - GENERAL ACUTE CARE
BAPTIST EMERGENCY HOSPITAL
WESTOVER HILLS,25615 US HIGHWAY
281 N,
SAN ANTONIO, TX, 78258
210-572-2911
Program : MOLINA MARKETPLACE
PROGRAM

BAPTIST HEALTH SYSTEM - MEDICAL
CENTER
HOSPITAL - GENERAL ACUTE CARE
BAPTIST HEALTH SYSTEM,525 OAK
CENTRE DR STE 450,
SAN ANTONIO, TX, 78258
210-297-4525
Program : MOLINA MARKETPLACE
PROGRAM

BAPTIST HEALTH SYSTEM - NORTH
CENTRAL
HOSPITAL - GENERAL ACUTE CARE
BAPTIST HEALTH SYSTEM,520 MADISON
OAK DR,
SAN ANTONIO, TX, 78258
210-297-4000
Program : MOLINA MARKETPLACE
PROGRAM

Definitions

Accept New Patient	Yes means that the doctor's office will take new patients. No means that the doctor's office will not take new patients.
Provider Type	Click on one of the Provider Types in the drop down box for a description.
Specialty	This is the provider's area of training. Please visit the Consumer section at http://www.abms.org/ for the meanings.
Language	Choose a language from the drop down box. The offices where the doctor or the office staff speak that language will be displayed.
Program	A program is a plan that covers health services for people. Refer to your ID card to see what program you are assigned to. Choose the program from the drop-down box.
Distance Within	Enter a zip code to use this function
Medical Group Name	If you know the name of the Medical Group your provider belongs to, please type it here to do a search.
Gender Restriction	This doctor only sees the gender listed.
Hospital Name	If you want to know which doctors may send you to a certain hospital for non-emergency care, please type the hospital name here to do a search. If you have an emergency, call 911 or go to the nearest hospital.
Accredited By	The hospital has passed a special safety and quality inspection by the company listed.
Distance (in miles)	This is the distance from the zip code you entered above (if one was entered)
Certification Board	For a description of Certification Board, please click on http://abms.org . Click on the "About Board Certification" section.