



## Urgent Care Search Result

Molina Healthcare of Texas

31 Urgent Care met the preferences you selected

### Search Criteria

Facility Type	URGENT CARE
Distance	5
Coverage	Marketplace
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](mailto: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 լեզվաբանական օգնությունը: Կոչվե՛ք 1-800-665-3086 (TTY (Հայերեն)՝ 711):

**Cambodian**

កម្ពុជា: បើសិនជាអ្នកនិយាយ ភាសាខ្មែរ, សេវាជំនួយផ្នែកភាសា 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`bɛín 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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- Written material in other formats (large print, audio, accessible electronic formats, Braille)

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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](mailto: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.

### **Language Assistance Services:**

#### **English**

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-866-856-8699 (TTY: 711).

#### **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**

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-866-856-8699 (TTY: 711).

#### **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**

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8699 (TTY: 711) 번으로 전화해 주십시오.

### Russian

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### 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

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-866-856-8699 (TTY: 711).

### 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

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### 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**

MEDPOST WEST HILDEBRAND  
CLINIC/CENTER - URGENT CARE  
MEDPOST WEST HILDEBRAND,115  
ANGELES DR STE 103,  
SAN ANTONIO, TX, 78201  
210-664-0962  
Program : MOLINA MARKETPLACE  
PROGRAM

LITTLE SPURS PEDIATRIC URGENT  
CARE PLLC  
CLINIC/CENTER - URGENT CARE  
LITTLE SPURS PEDIATRIC URGENT  
CARE PLLC,2039 E HOUSTON ST,  
SAN ANTONIO, TX, 78202  
210-281-8815  
Program : MOLINA MARKETPLACE  
PROGRAM

LITTLE SPURS PEDIATRIC URGENT  
CARE PLLC  
CLINIC/CENTER - URGENT CARE  
LITTLE SPURS PEDIATRIC URGENT  
CARE PLLC,1248 AUSTIN HWY STE 220,  
SAN ANTONIO, TX, 78209  
210-543-7334  
Program : MOLINA MARKETPLACE  
PROGRAM

NEXTCARE URGENT CARE  
CLINIC/CENTER - URGENT CARE  
1211 AUSTIN HWY STE 110,  
SAN ANTONIO, TX, 782094980  
210-774-5010  
Program : MOLINA MARKETPLACE  
PROGRAM

CONCENTRA URGENT CARE  
CLINIC/CENTER - URGENT CARE  
CONCENTRA URGENT CARE,400 E  
QUINCY ST,  
SAN ANTONIO, TX, 78215  
866-944-6046  
Program : MOLINA MARKETPLACE  
PROGRAM

CONCENTRA URGENT CARE  
CLINIC/CENTER - URGENT CARE  
CONCENTRA URGENT CARE,10200 N  
BROADWAY ST STE 200,  
SAN ANTONIO, TX, 78217  
866-944-6046  
Program : MOLINA MARKETPLACE  
PROGRAM

AMERICAN CURRENT CARE PA  
CLINIC/CENTER - URGENT CARE  
AMERICAN CURRENT CARE,3453 N  
HIGHWAY 35 STE 110,  
SAN ANTONIO, TX, 782192333  
866-944-0646  
Program : MOLINA MARKETPLACE  
PROGRAM

LITTLE SPURS PEDIATRIC URGENT  
CARE PLLC  
CLINIC/CENTER - URGENT CARE  
LITTLE SPURS PEDIATRIC URGENT  
CARE PLLC,2302 SE MILITARY DR STE  
107,  
SAN ANTONIO, TX, 78223  
210-981-1902  
Program : MOLINA MARKETPLACE  
PROGRAM

ALAMO CITY URGENT CARE LLC  
CLINIC/CENTER - URGENT CARE  
ALAMO CITY URGENT CARE LLC,8223  
MARBACH RD STE 102,  
SAN ANTONIO, TX, 78227  
210-941-2282  
Program : MOLINA MARKETPLACE  
PROGRAM

CONCENTRA URGENT CARE  
CLINIC/CENTER - URGENT CARE  
CONCENTRA URGENT CARE,12651  
VANCE JACKSON RD STE 114,  
SAN ANTONIO, TX, 78230  
866-944-6046  
Program : MOLINA MARKETPLACE  
PROGRAM

HAYA HEALTHCARE PLLC  
CLINIC/CENTER - URGENT CARE  
HAYA HEALTHCARE PLLC,11703  
HUEBNER RD STE 104,  
SAN ANTONIO, TX, 78230  
210-667-4100  
Program : MOLINA MARKETPLACE  
PROGRAM

LITTLE SPURS PEDIATRIC URGENT  
CARE PLLC  
CLINIC/CENTER - URGENT CARE  
LITTLE SPURS PEDIATRIC URGENT  
CARE PLLC,14100 SAN PEDRO AVE,  
SAN ANTONIO, TX, 78232  
281-281-8669  
Program : MOLINA MARKETPLACE  
PROGRAM

CONCENTRA URGENT CARE  
CLINIC/CENTER - URGENT CARE  
CONCENTRA URGENT CARE,12702  
TOEPPERWEIN RD STE 120,  
SAN ANTONIO, TX, 782333278  
866-944-6046  
Program : MOLINA MARKETPLACE  
PROGRAM

LITTLE SPURS PEDIATRIC URGENT  
CARE PLLC  
CLINIC/CENTER - URGENT CARE  
LITTLE SPURS PEDIATRIC URGENT  
CARE,810 S GENERAL MCMULLEN DR  
STE 101,  
SAN ANTONIO, TX, 78237  
210-543-7334  
Program : MOLINA MARKETPLACE  
PROGRAM

METHODIST CARENOW URGENT CARE  
PLLC  
CLINIC/CENTER - URGENT CARE  
METHODIST CARENOW URGENT CARE  
PLLC,5755 NW LOOP 410,  
SAN ANTONIO, TX, 78238  
210-963-8445  
Program : MOLINA MARKETPLACE  
PROGRAM

NEXTCARE URGENT CARE  
CLINIC/CENTER - URGENT CARE  
7110 FM 78 STE 110,  
SAN ANTONIO, TX, 782441765  
210-310-2273  
Program : MOLINA MARKETPLACE  
PROGRAM

CONCENTRA URGENT CARE  
CLINIC/CENTER - URGENT CARE  
CONCENTRA URGENT CARE,7555 NW  
LOOP 410 STE 114,  
SAN ANTONIO, TX, 782452148  
866-944-6046  
Program : MOLINA MARKETPLACE  
PROGRAM

MEDPOST URGENT CARE SAN  
ANTONIO THOUSAND OAKS  
CLINIC/CENTER - URGENT CARE  
MEDPOST URGENT CARE,2951  
THOUSAND OAKS DR STE 104,  
SAN ANTONIO, TX, 78247  
210-494-2324  
Program : MOLINA MARKETPLACE  
PROGRAM

METHODIST CARENOW URGENT CARE  
PLLC  
CLINIC/CENTER - URGENT CARE  
METHODIST CARENOW URGENT CARE  
PLLC,17122 BLVDERDE RD STE 104,  
SAN ANTONIO, TX, 78247  
210-783-0170  
Program : MOLINA MARKETPLACE  
PROGRAM

MEDPOST URGENT CARE DEERFIELD  
CLINIC/CENTER - URGENT CARE  
MEDPOST URGENT CARE,16601  
HUEBNER RD,  
SAN ANTONIO, TX, 78248  
210-492-1365  
Program : MOLINA MARKETPLACE  
PROGRAM

NEXTCARE URGENT CARE  
CLINIC/CENTER - URGENT CARE  
16755 HUEBNER RD,  
SAN ANTONIO, TX, 782482342  
210-493-4357  
Program : MOLINA MARKETPLACE  
PROGRAM

METHODIST CARENOW URGENT CARE  
PLLC  
CLINIC/CENTER - URGENT CARE  
METHODIST CARENOW URGENT CARE  
PLLC,12840 W INTERSTATE 10 STE 101,  
SAN ANTONIO, TX, 78249  
210-817-8490  
Program : MOLINA MARKETPLACE  
PROGRAM

TEXAN URGENT CARE PLLC  
CLINIC/CENTER - URGENT CARE  
TEXAN URGENT CARE PLLC,9234 N.  
LOOP 1604 W STE 110,  
SAN ANTONIO, TX, 78249  
210-257-0736  
Program : MOLINA MARKETPLACE  
PROGRAM

METHODIST CARENOW URGENT CARE  
PLLC  
CLINIC/CENTER - URGENT CARE  
METHODIST CARENOW URGENT CARE  
PLLC,10538 POTRANCO RD BLDG 1,  
SAN ANTONIO, TX, 78251  
210-890-2640  
Program : MOLINA MARKETPLACE  
PROGRAM

NEXTCARE URGENT CARE  
CLINIC/CENTER - URGENT CARE  
11282 CULEBRA RD STE 115,  
SAN ANTONIO, TX, 782537329  
210-802-2660  
Program : MOLINA MARKETPLACE  
PROGRAM

ALAMO CITY URGENT CARE LLC  
CLINIC/CENTER - URGENT CARE  
ALAMO CITY URGENT CARE LLC,8110 W  
LOOP 1604 N STE 102,  
SAN ANTONIO, TX, 78254  
210-957-4321  
Program : MOLINA MARKETPLACE  
PROGRAM

SOUTH TEXAS NURSE PRACTITIONER  
SERVICES PLLC  
CLINIC/CENTER - URGENT CARE  
SOUTH TEXAS NURSE PRACTITIONER  
SERVICES PLLC,9910 W LOOP 1604 N  
STE 128,  
SAN ANTONIO, TX, 78254  
210-455-6253  
Program : MOLINA MARKETPLACE  
PROGRAM

MEDPOST URGENT CARE STONE OAK  
PKWY  
CLINIC/CENTER - URGENT CARE  
MEDPOST URGENT CARE,20210 STONE  
OAK PKWY STE 101,  
SAN ANTONIO, TX, 78258  
210-481-9804  
Program : MOLINA MARKETPLACE  
PROGRAM

NEXTCARE URGENT CARE  
CLINIC/CENTER - URGENT CARE  
22906 US HIGHWAY 281 N STE 108,  
SAN ANTONIO, TX, 782587632  
210-774-5018  
Program : MOLINA MARKETPLACE  
PROGRAM

METHODIST CARENOW URGENT CARE  
PLL  
CLINIC/CENTER - URGENT CARE  
METHODIST CARENOW URGENT CARE  
PLL,20780 US HWY 281 N,  
SAN ANTONIO, TX, 78259  
210-963-8455  
Program : MOLINA MARKETPLACE  
PROGRAM

## **BEXAR -SELMA**

LITTLE SPURS PEDIATRIC URGENT  
CARE PLLC  
CLINIC/CENTER - URGENT CARE  
LITTLE SPURS PEDIATRIC URGENT  
CARE PLLC,15069 INTERSTATE 35 N STE  
116,  
SELMA, TX, 78154  
210-543-7334  
Program : MOLINA MARKETPLACE  
PROGRAM

## Definitions

<b>Accept New Patient</b>	Yes means that the doctor's office will take new patients. No means that the doctor's office will not take new patients.
<b>Provider Type</b>	Click on one of the Provider Types in the drop down box for a description.
<b>Specialty</b>	This is the provider's area of training. Please visit the Consumer section at <a href="http://www.abms.org/">http://www.abms.org/</a> for the meanings.
<b>Language</b>	Choose a language from the drop down box. The offices where the doctor or the office staff speak that language will be displayed.
<b>Program</b>	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.
<b>Distance Within</b>	Enter a zip code to use this function
<b>Medical Group Name</b>	If you know the name of the Medical Group your provider belongs to, please type it here to do a search.
<b>Gender Restriction</b>	This doctor only sees the gender listed.
<b>Hospital Name</b>	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.
<b>Accredited By</b>	The hospital has passed a special safety and quality inspection by the company listed.
<b>Distance (in miles)</b>	This is the distance from the zip code you entered above (if one was entered)
<b>Certification Board</b>	For a description of Certification Board, please click on <a href="http://abms.org">http://abms.org</a> . Click on the "About Board Certification" section.