Physician Profile Information

Description Company											
Non-Principle Non-Principl		Does your board									
AB				License issue	License renewal	License	Medical	Practice	Medicare	Medicaid	Languages
A			License number	date			education	location(s)			
AB	AK	Yes	X	X	Х	X					
AB		Vas	_			v	v				
1.25 1.25							Α	Y			
AGE Yes X					X		X				
CAMB											
CO		Yes	Х	Х		Х					X
Tuest											X
C	со	Yes	Х	X		X	X	X			
C	CT	Vas	V	V		V	v				v
FLAM	DC				Y						^
FL-M Ves X X X X X X X X X X X X X X X X X X X					^		^	^			
FLO Yes X X X X X X X X X X X X X X X X X X X											
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FLO Yes X X X X X X X X X X X X X X X X X X X		.,	.,	.,		.,	.,			.,	
GA	FL-M	Yes	X	X		X	X	X		X	X
GA											
GA											
GA											
GA	FL-O	Yes	X	X		X	Х	Х		X	X
H	GA	Yes	X	X		Х			X		
A											
D					.,		.,				
					Х		X				
N	טו	res	X	X		X		X			
N	IL	Yes	х	х	х	X	х	x	X	X	
KS							, ,		, , , , , , , , , , , , , , , , , , ,		
KY	KS			Х		X					
MA	KY	Yes	Х	X		Х		Х			
MB	LA	Yes	X	X		X					
MB		V	· ·			· ·				· ·	v
ME-M Yes X X X X X X X X X X X X X X X X X X X	MA	Yes	X	X		X	X	X		X	X
ME-M Yes X X X X X X X X X X X X X X X X X X X											
ME-M Yes X X X X X X X X X X X X X X X X X X X	MD	Yes	X	X		x	X	x		X	
ME-O Yes X X X X X X X X X X X X X X X X X X X					Х						
MHO		Yes	Х	X							
MN											
MO Yes X X X X X X X X X X X X X X X X X X X											
MS											
NC				^		^					
NC				Х		X	^				
NE		100									
NE					X				X	X	X
NH								X			
NJ											
NM									Y	Y	У
NV-M										^	^
NY-O											
NY								X		<u> </u>	
DK.M	NY	Yes	Х	Х	X (BM)	X (BM)	X		X (PMC)	X (PMC)	X (PMC)
OK-O Yes X <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>.,</td> <td></td> <td>.,</td> <td>.,</td> <td></td>							.,		.,	.,	
DR									X	X	
PA-M Yes X <td></td> <td></td> <td></td> <td></td> <td>Y</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>					Y						
PA-O Yes X <td></td> <td>^</td>											^
PR Yes X											
RI Yes X X X X X X X X X X X X X X X X X X X						X	X				
SD		Yes	X	Х		Х	Х				
TN-M Yes X X X X X X X X X X X X X X X X X X X			X	Х			X	Х			
TN-O Yes X X X X X X X X X X X X X X X X X X X								\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	V		V
TX Yes X											
UT-M	0	163	^			^	^	^	^	^	^
UT-M	TX	Yes	X	Х	Х	X	Х	Х		X	X
UT-0	UT-M	Yes	X	Х		Х	X	Х			
VI Yes X VT-M Yes X		Yes	X	Х		Х	Χ	X			
VT-M Yes X <td></td> <td></td> <td>X</td> <td>Х</td> <td></td> <td>X</td> <td></td> <td>Х</td> <td>Х</td> <td>Х</td> <td>X</td>			X	Х		X		Х	Х	Х	X
VT-0 Yes X X X WA-M Yes X X X WA-O Yes X X X WI Yes X X X WV-M Yes X X X WV-O Yes X X X				V	,	V		V		V	
WA-M Yes X X WA-O Yes X X WI Yes X X WV-M Yes X X WV-O Yes X X X X X X <td></td> <td></td> <td></td> <td></td> <td>X</td> <td></td> <td>X</td> <td></td> <td></td> <td>X</td> <td>X</td>					X		X			X	X
WA-O Yes X X WI Yes X X X WV-M Yes X X X X WV-O Yes X X X X X								Α			
WI Yes X X X WV-M Yes X X X X WV-O Yes X X X X X											
WV-M Yes X X X X X WV-O Yes X X X X X								Х			
WV-O Yes X X X X X X X X											
WV-0 Yes X X X X X X WY Yes X X X X X	WV-M			X							
WY 165 X X X X X X				X	X		X				
	WY	Yes	X	X		X		X			



Physician Profile Information

SMB	Specialty board certifications	Board actions	Board actions in other states	Hospital disciplinary actions	Criminal convictions	Medical malpractice	Other Data Collected
AK	ceremeations	X	other states	detions	CONTRCTIONS	matpractice	
ļ.,		V					ACSC/QACSC number, date issued, date of expiration; Collaborative
AL AR		X					registrations and supervisory registrations with CRNPs and PAs Self Designated Specialty
AZ-M		X			Х	X	Sett Designated Speciatry
AZ-O	X	X					
CA-M	X	X	Х	X	Х	X	
CA-O	X	X	X	X	X	X	
со	X	Х	Х	X	Х	Х	Hospital affiliations
ст	x	х		x	X	X	Hospital privileges, honors/awards, publications, academic appointments
DC	X	X	Х	X	~	X	Trospitat printeges, noners, and as, publications, academic appointments
DE		X					
FL-M	X	Х		х	Х	Х	Staff privileges, Faculty appointments, and Financial Responsibility Information; Optional information includes the practitioner's email address, professional web page, committees, memberships, professional or community service awards, other affiliations and publications the practitioner has authorized. Staff privileges, Faculty appointments, and Financial Responsibility
FL-O	X	X		x	x	X	Information; Optional information includes the practitioner's email address, professional web page, committees, memberships, professional or community service awards, other affiliations and publications the practitioner has authorized.
GA	X	X	Х	Х	X	X	Hospital privileges
GU		X			Х		Chattur of license (o. g
HI IA		X					Status of license (e.g. current, limited, etc.)
ID	X	X					
IL	X	X	X	X	X	X	Hospital affiliation, academic appointments, publications, honors/awards
IN		X					
KS KY	X	X	Х				Hospital privileges
LA	X	X					
LA	Α	X					Self-reported: Accepting new patients, Insurance Plans Accepted, Hospital
MA	X	X	X	X	X	X	Affiliations, honors and awards, professional publications
MD	X	Х	x	X	x	X	Licenses held in other states, collaboration and consultation agreements, active supervisor agreements, certifying providers for medical cannabis
ME-M		X					
ME-O		X					
MI-M MI-O		X					
MN	X	X	Х		X		YOB, gender, email optional
MO	X	X	^		^		Tob, gender, email optional
MS	Х	Х					
MT		X					
NC	v	V	v	V	V	V	Agency (DEA,Medicare, etc.) actions, practice philosophy, awards &
NC ND	X	X	Х	Х	Х	X	publications, hospital privileges
NE		X					
NH	X	X					
NJ	X	X	X	X	Х	X	
NM	X	X					
NV-M NV-O	X	X	Х			X	
NY	X (PMC)	X (PMC)	X (PMC)	X (PMC)	X (PMC)	X (PMC)	Licensure status (BM); Professional Activities (PMC)
OH	X	X					
OK-M	X	Х	Х		X		Insurance Accepted, Office Hours, Hospital privileges
OK-O	X	V				V	Hospital privileges
OR PA-M		X				X	Specialty (not certification)
PA-M PA-O		X					
PR	X	X	X	X	X	X	
RI	X	X				X	
SC	X	X	V		X		Hospital affiliations
SD TN-M	X	X	X	X	X	X	Specialty (not certification), Supervision Publications, awards, honors
TN-M	X	X	X	X	X	X	Publications, awards, honors
TX	X	X	X		X	X	Hospital privileges, honors/awards, publications, academic appointments, gender, place of birth, race, years of practice
UT-M		X					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
UT-O		X					
VA	X	X	X	Х	X	X	11
VI VT-M	X	X	X	X	X	X	Must be requested Staff privileges
VT-O	^	X	^		^	^	Stail privileges
WA-M		X					
WA-O		X					
WI	Х	Х					
WV-M		Х				Х	Specialty (not certification), Other states of licensure, Any Physician Assistant collaboration
WV-O		X					Specialty (not certification), Other states of licensure
WY	X	X					Phone number

