



ANN MARIE HARMAN

License Number: ME109660

Profession Medical Doctor
License Status Clear/Active
Year Began Practicing 07/01/1987
License Expiration 01/31/2027
Date

General Information

Primary Practice Address

ANN MARIE HARMAN
CFI BUILDING 2010 ATHERHOLT DR
LYNCHBURG, VA 24501

Medicaid

This practitioner DOES participate in the Medicaid program.

Staff Privileges

This practitioner currently holds staff privileges at the following hospital/medical/health institutions:

Institution Name	City	State
CENTRA	LYNCHBURG	VIRGINIA

Email Address

Please contact at: vaharman@gmail.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
VIRGINIA	MEDICAL
NORTH CAROLINA	MEDICAL
TENNESSEE	MEDICAL
SOUTH CAROLINA	MEDICAL
NEW YORK	MEDICAL
GEORGIA	MEDICAL

Florida Birth-Related Neurological Injury Compensation Association

If you are a Florida Allopathic (MD) or Osteopathic (DO) Physician, you are required to provide proof of payment of the Florida Birth-Related Neurological Injury Compensation Association (NICA) assessment as required by section 766.314, Florida Statutes. Payment of the initial and annual assessment are required of all Florida Allopathic and Osteopathic Physicians who do not qualify for an exemption as set forth in section 766.314(4)(b)4, Florida Statutes.

This practitioner has indicated that he/she has submitted payment of the assessment.

Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
SUNY AT STONY BROOK	MD	9/1/1983 - 5/1/1987	05/25/1987

Other Health Related Degrees

This practitioner has completed the following other health related degrees:

School/University	City	State/Country	Dates Attended From	Dates Attended To	Degree Title
ADELPHI UNIVERSITY	GARDEN CITY	NEW YORK	09/01/1979	05/01/1983	BS BIOLOGY

Professional and Postgraduate Training

This practitioner has completed the following graduate medical education:

Program Name	Program Type	Specialty Area	Other Specialty Area	City	State or Country	Dates Attended From	Dates Attended To
NORTH SHORE UNIVERSITY HOSPITAL	INTERNSHIP	IM - INTERNAL MEDICINE		MANHASSET	NEW YORK	07/01/1987	06/01/1988
NASSAU UNIVERSITY MEDICAL CENTER	RESIDENCY	AN - ANESTHESIOLOGY		EAST MEADOW	NEW YORK	07/01/1988	06/01/1990
UNIVERSITY OF VIRGINIA HEALTH SCIENCES CENTER	FELLOWSHIP	AN - ANESTHESIOLOGY		CHARLOTTESVILLE	VIRGINIA	07/01/1990	06/01/1991

Academic Appointments

Graduate Medical Education

This practitioner has not had the responsibility for graduate medical education within the last 10 years.

Academic Appointments

This practitioner does not currently hold faculty appointments at any medical/health related institutions of higher learning.

Specialty Certification

Specialty Certification

This practitioner holds the following certifications from specialty boards recognized by the Florida board which regulates the profession for which he/she is licensed:

Specialty Board	Certification	Date Certified
AMERICAN BOARD OF ANESTHESIOLOGY	AN - ANESTHESIOLOGY	04/01/1994

Financial Responsibility

Financial Responsibility

Financial Exemption

Proceedings and Actions

Proceedings & Actions

Criminal Offenses

The criminal history information, if any exists, may be incomplete; federal criminal history information is not available to the public. Information is verified by the Department at the time of initial licensure and renewal.

This practitioner has indicated that he/she has no criminal offenses required to be published on this profile.

Medicaid Sanctions and Terminations

This practitioner has not been sanctioned or terminated for cause from the Medicaid program.

Final Disciplinary Actions Reported by the Department of Health within the last 10 years:

For instructions on how to order copies of final disciplinary actions, please click [here](#).

[View Discipline Narratives](#)

[View Board Actions](#)

Taken By		Date Of Action	Description of Disciplinary Action	Under Appeal
FLORIDA DEPARTMENT OF HEALTH		06/18/2025	OBLIGATION(S) SATISFIED	

Type	Imposed	Due	Completed	Amt Due	Amt Recvd
				\$ 0.00	\$ 0.00

The information below is self reported by the practitioner. For Florida health care practitioner discipline, see information listed above.

Final disciplinary action taken by a specialty board within the last 10 years:

This practitioner has indicated that he/she has *NOT* had any final disciplinary action taken against him/her within the last 10 years by a specialty board.

Final disciplinary action taken by a licensing agency within the last 10 years:

This practitioner has indicated that he/she has had final disciplinary action taken against him/her within the last 10 years by a licensing agency.

Taken By		Date Of Action	Description of Disciplinary Action	Under Appeal
GEORGIA COMPOSITE BOARD		10/05/2021	CONSENT AGREEMENT	NO

Disciplinary action taken by a health maintenance organization, pre-paid health clinic, nursing home, licensed hospital or ambulatory surgical center within the last 10 years:

This practitioner has indicated that he/she has *NOT* had any final disciplinary action taken against him/her within the last 10 years by a health maintenance organization, pre-paid health clinic, nursing home, licensed hospital or ambulatory surgical center. The following discipline has been reported as required under 456.041(5), F.S. within the previous 10 years.

Resignation from or non-renewal of medical staff membership or the restriction or revocation of staff privileges within the last 10 years by a health maintenance organization, pre-paid health clinic, nursing home, licensed hospital or ambulatory surgical center in lieu of or in settlement of a pending disciplinary case related to competence or character.

This practitioner has indicated that he/she has *NEVER* been asked to or allowed to resign from or had any medical staff privileges restricted or revoked within the last 10 years by a health maintenance organization, pre-paid health clinic, nursing home, licensed hospital or ambulatory surgical center.

Liability Claims Exceeding \$100,000.00 Within last 10 years.

Settlement of a claim may occur for a variety of reasons that do not necessarily reflect negatively on the professional competence or conduct of the physician. A payment settlement of a medical malpractice action or claim should not be construed as creating a presumption that medical malpractice has occurred.

Additional claims information may have been reported to the Department of Financial Services. To check their web site, please click [here](#).

The following liability actions have been reported as required under section 456.049, F. S., within the previous 10 years:

Incident Date	County	Judicial Case	Settlement Date	Amount	Policy Amount
10/30/2014	OUT OF STATE		06/28/2020	\$150,000.00	\$0.00

Optional Information

Committees/Memberships

This practitioner has an affiliation with the following committees:
American Society of Anesthesiology
American Society of Regional Anesthesia

Professional or Community Service Awards

This practitioner has provided the following professional or community service activities, honors, or awards:

Community Service/Award/Honor	Organization
BEDSIDE MANNER AWARD	CENTRA MEDICAL GROUP
BEDSIDE MANNER AWARD	HCA RICHMOND
PRECEPTOR OF THE YEAR	UNIVERSITY OF LYNCHBURG PA SCHOOL

Publications

This practitioner has not provided any publications that he/she authored in peer-reviewed medical literature within the last ten years.

Professional Web Page

This practitioner has not provided any professional web page information.

Languages Other Than English

This practitioner has not indicated that any languages other than English are used to communicate with patients, or that any translation service is available for patients, at his/her primary place of practice.

Other Affiliations

This practitioner has not provided any national, state, local, county, or professional affiliations.