

**JONATHAN MICHAEL JOHNSON MD****License Number: ME109610**

Profession Medical Doctor
License Status Clear/Active
Year Began Practicing 05/16/2008
License Expiration 01/31/2027
Date

General Information**Primary Practice Address**

JONATHAN MICHAEL JOHNSON MD
10275 LITTLE PATUXENT PKWY
SUITE 300
COLUMBIA, MD 21044

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
ADVOCATE CHRIST MEDICAL CENTER	OAK LAWN	ILLINOIS
ADVOCATE CONDELL MEDICAL CENTER	LIBERTYVILLE	ILLINOIS
ADVOCATE GOOD SAMARITAN HOSPITAL	DOWNERS GROVE	ILLINOIS
ADVOCATE ILLINOIS MASONIC MEDICAL CENTER	CHICAGO	ILLINOIS
ADVOCATE LUTHERAN GENERAL HOSPITAL	PARK RIDGE	ILLINOIS
AFFINITY MEDICAL CENTER	MASSILLON	OHIO
AKRON CHILDREN'S HOSPITAL	AKRON	OHIO
ALLEGIANCE HEALTH	JACKSON	MICHIGAN
BALL MEMORIAL HOSPITAL	MUNCIE	INDIANA
BELLIN HEALTH	GREEN BAY	WISCONSIN
BRANDON REGIONAL HOSPITAL	BRADENTON	FLORIDA
BRYAN MEDICAL CENTER	LINCOLN	NEBRASKA
CABELL HUNTINGTON HOSPITAL	HUNTINGTON	WEST VIRGINIA
CAPE CANAVERAL HOSPITAL	COCOA BEACH	FLORIDA
CAPITAL HEALTH	TRENTON	NEW JERSEY
CEDAR PARK SURGERY CENTER	CEDAR PARK	TEXAS
CENTERPOINT MEDICAL CENTER	INDEPENDANCE	MISSOURI
CENTRAL DUPAGE HOSPITAL	WINFIELD	ILLINOIS
CENTRAL FLORIDA REGIONAL HOSPITAL	SANFORD	FLORIDA
CHARLESTON AREA MEDICAL CENTER	CHARLESTON	WEST VIRGINIA
CHARLOTTE REGIONAL MEDICAL CENTER	PUNTA GORDO	FLORIDA
CHILDREN'S HSPITAL AND MEDICAL CENTER	OMAHA	NEBRASKA
CLARION HOSPITAL	CLARION	PENNSYLVANIA

Institution Name	City	State
CLINCH VALLEY MEDICAL CENTER	RICHLAND	VIRGINIA
COMMUNITY HOSPITAL	MUNSTER	INDIANA
CROSSROADS COMMUNITY HOSPITAL	MT VERNON	ILLINOIS
DELNOR HOSPITAL	GENEVA	ILLINOIS
DIXIE REGIONAL MEDICAL CENTER	ST GEORGE	UTAH
DOCTORS HOSPITAL OF SARASOTA	SARASOTA	FLORIDA
HOLMES REGIONAL MEDICAL CENTER	MELBOURNE	FLORIDA
EDWARD HOSPITAL	NAPERVILLE	ILLINOIS
FAIRVIEW RIDGES HOSPITAL	BURNSVILLE	MINNESOTA
FAIRVIEW SOUTHDALE HOSPITAL	EDINA	MINNESOTA
FAWCETT MEMORIAL HOSPITAL	PORT CHARLOTTE	FLORIDA
FROEDTERT HEALTH	MILWAUKEE	WISCONSIN
GOOD SAMATIRAN HOSPITAL	SAN JOSE	CALIFORNIA
HOLZER HEALTH SYSTEM	GALLIPOLIS	OHIO
HUNTSVILLE MEMORIAL HOSPITAL	HUNTSVILLE	TEXAS
JENNIE EDMUNDSON HOSPITAL	COUCIL BLUFFS	IOWA
KETTERING MEDICAL CENTER	DAYTON	OHIO
LAKELAND REGIONAL HEALTH SYSTEM	ST JOSEPH	MICHIGAN
LAKES SURGERY CENTER	WEST BLOOMFIELD	MICHIGAN
LAKEWOOD RANCH MEDICAL CENTER	BRADENTON	FLORIDA
LARGO MEDICAL CENTER	LARGO	FLORIDA
LEE MEMORIAL HOSPITAL	FORT MYERS	FLORIDA
LOS ROBLES HOSPITAL	THOUSAND OAKS	CALIFORNIA
LUTHERAN HOSPITAL	FORT WAYNE	INDIANA
MEASE HOSPITAL - COUNTRYSIDE	SAFETY HARBOR	FLORIDA
MEASE HOSPITAL - DUNEDIN	DUNEDIN	FLORIDA
TRINITY HOSPITAL	TRINITY	FLORIDA
MENORAH MEDICAL CENTER	OVERLAND PARK	KANSAS
MERCY MEDICAL CENTER	CANTON	OHIO
MERCY MEDICAL CENTER	SIOUX CITY	IOWA
MERCY MEDICAL CETNER NORTH IOWA	MASON CITY	IOWA
METHODIST AMBULATORYSURGERY HOSPITAL	SAN ANTONIO	TEXAS
METHODIST CHARLTON MEDICAL CENTER	DALLAS	TEXAS
METHODIST HOSPITAL	DALLAS	TEXAS
METHOIDST HOSPITAL	SAN ANTONIO	TEXAS
METHOIDST HOSPITAL	OMAHA	NEBRASKA
METHOIDST HOSPITAL FOR SURGERY	ADDISON	TEXAS
METHOIDST HOSPITAL SOUTHLAKE	MERRILLVILLE	INDIANA
METHOIDST MANSFILED MEDICAL CENTER	MANSFILELD	TEXAS
METHOIDST RICHARDSON MEDICAL CENTER	RICHARDSON	TEXAS
METHODISTH SPECIALTY & TRANSPLANT HOSPITAL	SAN ANTONIO	TEXAS
METRO HEALTH HOSPITAL	WYMONING	MICHIGAN
METROPOLITAN METHODIST HOSPITAL	SAN ANTONIO	TEXAS
MIDWEST SURGICAL HOSPITAL	OMAHA	NEBRASKA
MT. CARMEL HEALTH SYSTEM	COLUMBUS	OHIO

Email Address

Please contact at: jonathan_johnson@uwalumni.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
NEW YORK	MEDICAL
PENNSYLVANIA	MEDICAL
WISCONSIN	MEDICAL
NEW JERSEY	MEDICAL
CALIFORNIA	MEDICAL
GEORGIA	MEDICAL DOCTOR
CONNECTICUT	MEDICAL DOCTOR
DISTRICT OF COLUMBIA	MEDICAL DOCTOR
IOWA	MEDICAL DOCTOR
ILLINOIS	MEDICAL DOCTOR
INDIANA	MEDICAL DOCTOR
KANSAS	MEDICAL DOCTOR
MARYLAND	MEDICAL DOCTOR
MAINE	MEDICAL DOCTOR
MICHIGAN	MEDICAL DOCTOR
MINNESOTA	MEDICAL DOCTOR
MISSOURI	MEDICAL DOCTOR
MISSISSIPPI	MEDICAL DOCTOR
NORTH CAROLINA	MEDICAL DOCTOR
NORTH DAKOTA	MEDICAL DOCTOR
NEBRASKA	MEDICAL DOCTOR
OHIO	MEDICAL DOCTOR
OREGON	MEDICAL DOCTOR
SOUTH CAROLINA	MEDICAL DOCTOR
TENNESSEE	MEDICAL DOCTOR
TEXAS	MEDICAL DOCTOR
UTAH	MEDICAL DOCTOR
VIRGINIA	MEDICAL DOCTOR
WEST VIRGINIA	MEDICAL DOCTOR

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
UNIV. AUTONOMA DE GUADALAJARA	MD	1/1/1999 - 12/1/2002	12/01/2002

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
UNIV WISCONSIN-MADISON	MADISON	WISCONSIN	09/01/1983	12/01/1987	BS-BIOCHEMISTRY

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
ST. VINCENT CATHOLIC MED CENTER	INTERNSHIP	IM - INTERNAL MEDICINE		JAMAICA	NEW YORK	07/01/2005	06/01/2006
STONY BROOK MEDICAL CENTER	RESIDENCY	N - NEUROLOGY		STONY BROOK	NEW YORK	07/01/2006	06/01/2009
UNIV OF WISCONSIN	FELLOWSHIP	N - CLINICAL NEUROPHYSIOLOGY		MADISON	WISCONSIN	07/01/2009	06/01/2010

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 PSYCHIATRY AND NEUROLO	N - NEUROLOGY	12/01/2009
AMERICAN BOARD OF PSYCHIATRY AND NEUROLO	N - CLINICAL NEUROPHYSIOLOGY	

Financial Responsibility

Financial Responsibility

I have hospital staff privileges and I have professional liability coverage in an amount not less than \$250,000 per claim, with a minimum annual aggregate of not less than \$750,000 from an authorized insurer as defined under s. 624.09, F. S., from a surplus lines insurer as defined under s. 626.914(2), F. S., from a risk retention group as defined under s. 627.942, F.S., from the Joint Underwriting Association established under s. 627.351(4), F. S., or through a plan of self insurance as provided in s.627 .357, F.S.

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:

The information below is self reported by the practitioner.

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
MARYLAND BOARD OF PHYSICIANS	04/28/2017	CONSENT AGREEMENT AND FINE	NO
KENTUCKY MEDICAL BOARD	11/13/2017	CONSENT AGREEMENT AND FINE	NO
TEXAS MEDICAL BOARD	12/06/2017	CONSENT AGREEMENT AND FINE	NO
MICHIGAN BOARD OF MEDICINE	07/19/2018	CONSENT AGREEMENT AND FINE	NO
MEDICAL BOARD OF CALIFORNIA	12/10/2018	PUBLIC REPRIMAND	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](#).

There have not been any reported liability actions, which are required to be reported under section 456.049, F. S., within the previous 10 years.

Optional Information

Committees/Memberships

This practitioner has not indicated any committees on which they serve for any health entity with which they are affiliated.

Professional or Community Service Awards

This practitioner has not provided any professional or community service activities, honors, or awards.

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.
