



SCOTT ALLEN DEPPE MD

License Number: ME124084

Profession Medical Doctor
License Status DELINQUENT/
Year Began Practicing 01/01/1979
License Expiration 01/31/2025
Date

General Information

Primary Practice Address

SCOTT ALLEN DEPPE MD
3204 MEADOWOOD LANE
GREAT FALLS, MT 59404

Medicaid

This practitioner does NOT participate in the Medicaid program.

Staff Privileges

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

Institution Name	City	State
WILLIAMSBURG REGIONAL MEDICAL CENTER	WILLIAMSBURG	VIRGINIA
NORFOLK GENERAL HOSPITAL	NORFOLK	VIRGINIA
ST.CATHERINES HOSPITAL	GRADEN CITY	KANSAS
ALASKA NATIVE MEDICAL CENTER	ANCHORAGE	ALASKA
MEMORIAL UNIVERSITY HEAKTH MEDICAL CENTER	SAVANNAH	GEORGIA
BLAKE REGIONAL MEDICAL CENTER.	BRADENTON	FLORIDA
LAWNWOOD RGIOMAL MEDICAL CENTER	FORT PIERCE	FLORIDA
COMMUNITY MEDICAL CENTER	MISSOULA	MONTANA
CJW MEDICAL CENTER	RICHMOND	VIRGINIA
HENRICO DOCTORS HOSPITAL	RICHMOND	VIRGINIA

Email Address

Please contact at: ccmdoctor@msn.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
ALASKA	MEDICAL DOCTOR
GEORGIA	MEDICAL DOCTOR
KANSAS	MEDICAL DOCTOR
NEVADA	MEDICAL DOCTOR
MONTANA	MEDICAL DOCTOR
TENNESSEE	MEDICAL DOCTOR
SOUTH CAROLINA	MEDICAL DOCTOR

State	Profession
SOUTH DAKOTA	MEDICAL DOCTOR
WISCONSIN	MEDICAL DOCTOR
PENNSYLVANIA	MEDICAL DOCTOR
TEXAS	MEDICAL DOCTOR
ARIZONA	MEDICAL DOCTOR
NORTH DAKOTA	MEDICAL DOCTOR
IDAHO	MEDICAL DOCTOR
CALIFORNIA	MEDICAL DOCTOR
MICHIGAN	MEDICAL DOCTOR
WYOMING	MEDICAL DOCTOR
VIRGINIA	MEDICAL DOCTOR
SOUTH DAKOTA	MEDICAL DOCTOR
NEBRASKA	MEDICAL DOCTOR
WASHINGTON	MEDICAL DOCTOR
INDIANA	MEDICAL DOCTOR
IOWA	MEDICAL DOCTOR
MINNESOTA	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
UNIVERSITY OF MINNESOTA MEDICAL SCHOOL	MD	8/1/1975 - 6/9/1979	06/09/1979

Other Health Related Degrees

This practitioner does not hold any additional health related degrees.

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
US PUBLIC HEALTH SERVICE	INTERNSHIP	IM - INTERNAL MEDICINE		SAN FRANCISCO	CALIFORNIA	07/01/1979	06/30/1981
CALIFORNIA PACIFIC MEDICAL CENTER	RESIDENCY	IM - INTERNAL MEDICINE		SAN FRANCISCO	CALIFORNIA	11/01/1981	06/30/1982
LETTERMAN ARMY MEDICAL CENTER	FELLOWSHIP	IM - CRITICAL CARE MEDICINE		SAN FRANCISCO	CALIFORNIA	07/01/1982	06/30/1984

Academic Appointments

Graduate Medical Education

This practitioner has had the responsibility for graduate medical education within the last 10 years.

Academic Appointments

This practitioner currently holds faculty appointments at the following medical/health related institutions of higher learning:

Title	Institution	City	State
CLINICAL PROFESSOR OF MEDICINE	UNIVERSITY OF SOUTH DAKOTA SCHOOL OF MED	SIOUX FALLS	SOUTH DAKOTA

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 INTERNAL MEDICINE	IM - INTERNAL MEDICINE	01/01/1982
AMERICAN BOARD OF INTERNAL MEDICINE	IM - CRITICAL CARE MEDICINE	01/01/1987

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 *NOT* had any final disciplinary action taken against him/her within the last 10 years by a licensing agency.

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 provided the following national, state, local, county, and professional affiliations:

Affiliation
FACP, FCCM, FCCP - (ABIM, SCCM, ACCP)