



JOSEPH ALAN JACKSON

License Number: ME85613

Profession	Medical Doctor
License Status	Null And Void/
Year Began Practicing	01/01/1975
License Expiration Date	01/31/2022
Controlled Substance Prescriber (for the	Yes
Treatment of Chronic Non-malignant Pain)	

General Information

Primary Practice Address

JOSEPH ALAN JACKSON
2587 NORTH S 2587 NORTH ST
SOUTHAVEN, MS 38672

Medicaid

This practitioner DOES participate in the Medicaid program.

Staff Privileges

This practitioner has not indicated any staff privileges.

Email Address

Please contact at: drjaj1251@gmail.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
MISSISSIPPI	MD

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 not indicated whether he/she has submitted payment of the assessment.

Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
TULANE MEDICAL SCHOOL	MD	9/1/1971 - 11/1/1974	11/26/1974

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
TULANE UNIVERSITY	NEW ORLEANS	LOUISIANA	09/01/1968	08/01/1972	BA - 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
EMORY SCHOOL OF MEDICINE	RESIDENCY	P - PSYCHIATRY		ATLANTA	GEORGIA	01/01/1975	01/01/1977
EMORY SCHOOL OF MEDICINE	INTERNSHIP	IM - INTERNAL MEDICINE		ATLANTA	GEORGIA	01/01/1977	07/01/1977
EMORY SCHOOL OF MEDICINE	RESIDENCY	N - NEUROLOGY		ATLANTA	GEORGIA	07/01/1977	07/01/1979
BAYLOR SCHOOL OF MEDICINE	FELLOWSHIP		NEUROMUSCULAR	HOUSTON	TEXAS	01/01/1982	08/01/1982
UCLA SCHOOL OF MEDICINE	FELLOWSHIP	OTHER	MEDICAL ACUPUNCTURE	LOS ANGELES	CALIFORNIA	11/01/1997	03/01/1998
STANFORD UNIVERSITY		OTHER	SLEEP DISORDERS MEDICINE	PALO ALTO	CALIFORNIA	03/08/1986	03/19/1986

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	NEUROLOGY	04/01/1981

Financial Responsibility

Financial Responsibility

I do not have hospital staff privileges and I have obtained and maintain professional liability coverage in an amount not less than \$100,000 per claim, with a minimum annual aggregate of not less than \$300,000 from an authorized insurer as defined under s. 624.09, F. S., from a surplus lines insurer as defined under s. 626.914(2).

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	11/02/2021	SUSPENSION	

Type	Imposed	Due	Completed	Amt Due	Amt Recvd
FINE	11/2/2021	12/1/2021		\$ 1,500.00	\$ 0.00
COSTS	11/2/2021	12/1/2021		\$ 207.49	\$ 0.00
REINSTATEMENT APPEARANCE	11/2/2021			\$ 0.00	\$ 0.00
BOARD RETAINS JURISDICTION	11/2/2021			\$ 0.00	\$ 0.00
UNENCUMBERED LICENSE	11/2/2021			\$ 0.00	\$ 0.00
CE: DRUG PRESCRIBING		12/1/2022		\$ 0.00	\$ 0.00
CE: LAWS, RULES AND ETHICS		12/1/2022		\$ 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 MEDICAL BOARD	01/12/2021	VOLUNTARY-RELINQUISHED	NO
ALABAMA MEDICAL BOARD	01/12/2021	RECIPROCAL ACTION BY ANOTHER STATE	NO
MISSISSIPPI	11/19/2020	SUSPENDED	NO
ILLINOIS BOARD OF MEDICINE	02/23/2021	SUSPENDED	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 an affiliation with the following committees:
none

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
CERT: AMERICAN BOARD OF SLEEP MEDICINE