



THOMAS M PROSE

License Number: ME91109

Profession Medical Doctor
License Status Clear/Active
Year Began Practicing 07/01/1982
License Expiration 01/31/2026
Date

General Information

Primary Practice Address

THOMAS M PROSE
21333 HAGGERTY ROAD
SUITE 150
NOVI, MI 48375

Medicaid

This practitioner does NOT participate in the Medicaid program.

Staff Privileges

This practitioner has not indicated any staff privileges.

Email Address

Please contact at: tprose@generalmedicine.com

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
MICHIGAN	MD
MARYLAND	MD
MISSOURI	MD
GEORGIA	MD
INDIANA	MD
MASSACHUSETTS	MD
IOWA	MD
COLORADO	MD
UTAH	MD
VIRGINIA	MD
PENNSYLVANIA	MD
NEW MEXICO	MD
NEBRASKA	MD
CONNECTICUT	MD
KANSAS	MD
NEW YORK	MD
WASHINGTON	MD
WISCONSIN	MD

State	Profession
ILLINOIS	MD
OHIO	MD
ALASKA	MD
CALIFORNIA	MD
DELAWARE	MD
FLORIDA	MD
HAWAII	MD
IDAHO	MD
KENTUCKY	MD
MAINE	MD
MONTANA	MD
NEW HAMPSHIRE	MD
NEW JERSEY	MD
NORTH CAROLINA	MD
NORTH DAKOTA	MD
RHODE ISLAND	MD
SOUTH DAKOTA	MD
VERMONT	MD
DISTRICT OF COLUMBIA	MD
WEST VIRGINIA	MD
WYOMING	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 indicated that he/she is exempt from paying assessment.

Education and Training

Education and Training

Institution Name	Degree Title	Dates of Attendance	Graduation Date
UNIV OF MICHIGAN			

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
CALVIN COLLEGE	GRAND RAPIDS	MICHIGAN	09/01/1974	08/01/1978	
UNIVERSITY OF MICHIGAN	ANN ARBOR	MICHIGAN	09/01/1978	06/01/1982	M.D. MEDICAL DOCTOR

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 JOHN HOSPITAL	INTERNSHIP	FP - FAMILY MEDICINE		DETROIT	MICHIGAN	06/01/1982	06/01/1983
UNIVERSITY OF MICHIGAN	INTERNSHIP	AN - ANESTHESIOLOGY		ANN ARBOR	MICHIGAN	06/01/1983	07/01/1984

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 does not hold any certifications from specialty boards recognized by the Florida board which regulates the profession for which he/she is licensed.

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:

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
NEW MEXICO MEDICAL BOARD	02/16/2018	REPRIMAND	YES

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

Community Service/Award/Honor	Organization
	MICHANS STATE MEDICAL SOCIETY
	AMERICAN MEDICAL DIRECTORS ASSOCIATION
	AMERICAN COLLEGE OF OCCUPATIONAL & ENVIRONMENTAL MEDICAL
	MICHIGAN HEALTH & HOSPITAL ASSOCIATION

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.

