Florida HEALTH Department of Health

STEPHEN MICHAEL ROBERTS MD

License Number: ME126251

Profession	Medical Doctor
License Status	Clear/Active
Year Began Practicing	07/01/1985
License Expiration Date	01/31/2028

General Information

Primary Practice Address

STEPHEN MICHAEL ROBERTS MD
633 75TH STREET WEST
PALMA SOLA, FL 34209

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
SANTA ROSA MEDICAL CENTER	MILTON	FLORIDA
BELTON REGIONAL MEDICAL CENTER	BELTON	MISSOURI
SOUTHERN HILLS MEDICAL CENTER	NASHVILLE	TENNESSEE
TENNOVA HEALTHCARE LEBANON	LEBANON	TENNESSEE
STONECREST MEDICAL CENTER	SMYRNA	TENNESSEE
GREENVIEW REGIONAL HOSPITAL	BOWLING GREEN	KENTUCKY
HORIZON MEDICAL CENTER	DICKSON	TENNESSEE
MCLEOD MEDICAL CENTER DILLON - ED	DILLION	SOUTH CAROLINA
MCLEON LORIS HOSPITAL	LORIS	SOUTH CAROLINA
MCLEOD SEACOAST HOSPITAL - ED	LITTLE RIVER	SOUTH CAROLINA
SOUTH GEORGIA MEDICAL CENTER	VALDOSTA	GEORGIA
BAY MEDICAL CENTER	PANAMA CITY	FLORIDA
NORTH CREST MEDICAL CENTER	SPRINGFIELD	TENNESSEE
WILSON MEMORIAL HOSPITAL	SIDNEY	OHIO
CAROLINA PINES REGIONAL MEDICAL CENTER	HARTSVILLE	SOUTH CAROLINA
MERIT HEALTH BILOXI	BILOXI	MISSISSIPPI
MERIT HEALTH NATCHEZ	NATCHEZ	MISSISSIPPI
MERIT HEALTH RANKIN	BRANDON	MISSISSIPPI
MERIT HEALTH RIVER REGION	VICKSBURG	MISSISSIPPI

Email Address

Please contact at: **steverobertsmd@gmail.com**

Other State Licenses

This practitioner has indicated the following additional state licensure:

State	Profession
MISSISSIPPI	MEDICAL DOCTOR
GEORGIA	MEDICAL
KENTUCKY	MEDICAL
TENNESSEE	MEDICAL
SOUTH CAROLINA	MEDICAL
MISSOURI	MEDICAL
ILLINOIS	MEDICAL
OHIO	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
WRIGHT STATE UNIVERSITY BOONSHOFT SCHOOL OF MEDICINE	MD	9/1/1981 - 6/8/1985	06/08/1985

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
ST. JOHN'S MERCY MEDICAL CENTER	RESIDENCY	FP - FAMILY MEDICINE		SAINT LOUIS	MISSOURI	07/01/1985	06/30/1988

Academic Appointments

Graduate Medical Education

This practitioner has 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

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

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.

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.