

5500000107961661

Process Date: 05/10/2016

Page: 1 of 1

To: DE JONG, ANN

8470 HELENA AVE

LAS VEGAS, NV 89129-0405

From: Re:

National Practitioner Data Bank Response to Your Self-Query

The enclosed information is released by the National Practitioner Data Bank (NPDB) for restricted use under the provisions of Title IV of Public Law 99-660, the Health Care Quality Improvement Act of 1986, as amended; Section 1921 of the Social Security Act; and Section 1128E of the Social Security Act.

Title IV established the NPDB as an information clearinghouse to collect and release certain information related to malpractice payment history and professional competence or conduct of physicians, dentists, and other licensed health care practitioners.

Section 1921 of the Social Security Act expanded the scope of the NPDB. Section 1921 was enacted to protect program beneficiaries from unfit health care practitioners, and to improve the anti-fraud provisions of federal and state health care programs. Section 1921 authorizes the NPDB to collect certain adverse actions taken by state licensing and certification authorities, peer review organizations, and private accreditation organizations, as well as final adverse actions taken by state law or fraud enforcement agencies (including, but not limited to, state law enforcement agencies, state Medicaid Fraud Control Units, and state agencies administering or supervising the administration of a state health care program), against health care practitioners, health care entities, providers and suppliers.

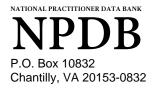
Section 1128E of the Social Security Act was added by Section 221(a) of Public Law 104-191, the Health Insurance Portability and Accountability Act of 1996. The statute established a national data collection program (formerly known as the Healthcare Integrity and Protection Data Bank) to combat fraud and abuse in health care delivery and to improve the quality of patient care. Section 1128E information is now collected and disclosed by the NPDB as a result of amendments made by Section 6403 of the Affordable Care Act of 2010, Public Law 111-148. Section 1128E information includes certain final adverse actions taken by federal agencies and health plans against health care practitioners, providers, and suppliers.

Regulations governing the NPDB are codified at 45 CFR part 60. Responsibility for operating the NPDB resides with the Secretary of the U.S. Department of Health and Human Services (HHS), and HRSA, Division of Practitioner Data Banks.

Reports from the NPDB contain limited summary information and should be used in conjunction with information from other sources in granting privileges, or in making employment, affiliation, contracting or licensure decisions. NPDB responses may contain more than one report on a particular incident, if two or more actions were taken as a result of a single incident (e.g., an exclusion from a federal or state health care program and an adverse licensure action). The NPDB is a flagging system, and a report may be included for a variety of reasons that do not necessarily reflect adversely on the professional competence or conduct of the subject named in the report.

All information received from the NPDB is considered confidential and must be used solely for the purpose for which it was disclosed. Further, ANY PERSON WHO VIOLATES THE CONFIDENTIALITY PROVISIONS AS SPECIFIED IN TITLE IV OF PUBLIC LAW 99-660, AS AMENDED, IS SUBJECT TO A CIVIL MONEY PENALTY OF UP TO \$11,000 FOR EACH VIOLATION. Subjects of reports who obtain information about themselves from the NPDB are permitted to share that information with anyone they choose.

If you require additional assistance, visit the NPDB web site (http://www.npdb.hrsa.gov) or contact the NPDB Customer Service Center at 1-800-767-6732 (TDD: 1-703-802-9395). Information Specialists are available to speak with you weekdays from 8:30 a.m. to 6:00 p.m. (5:30 p.m. on Fridays) Eastern Time. The NPDB Customer Service Center is closed on all Federal holidays.



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REPORT RESPONSE SERVICE LOGIN INSTRUCTIONS

To access the on-line Report Response Service, go to http://www.npdb.hrsa.gov. On the Data Bank home page, click Check Your Report. The Check Your Report Sign In page displays.

As the subject of a report, you are assigned a unique Report Password. This Report Password applies to all reports on file with the Data Bank for which you are the subject.

If you have more than one report for which you wish to dispute report information (add, modify, or remove a Subject Statement, initiate or withdraw a dispute or request for Dispute Resolution, or modify your address as maintained by the Data Bank), you must enter one Report Number in the appropriate field on the Check Your Report page, along with your Report Password. Once you have completed your transaction for that report, return to the Check Your Report page and enter the next Report Number for which you wish to dispute report information. Use the same Report Password for all Report Numbers.

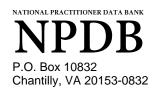
Report Number: Found on the first page of the report, which follows the Notification of a Report in the

Data Bank sent to inform you of a report submitted to the Data Bank, or in your self-

query results.

Report Password: Use the password you created on 05/10/2016.

The Data Bank News, quarterly newletter, is available electronically. If you would like to receive the Data Banks e-newsletter, check the box on the *Report Response Options* page. Enter your e-mail address and click **Save**.



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DE JONG, ANN - SELF-QUERY RESPONSE

A. SUBJECT IDENTIFICATION INFORMATION (Recipients should verify that subject identified is, in fact, the subject of interest.)

Practitioner Name: DE JONG, ANN

Date of Birth: 09/28/1975 Gender: FEMALE

Work Address: 8470 HELENA AVE, LAS VEGAS, NV 89129-0405

Social Security Number: ***-**-3295 **DEA:** FD0355075, FD3013000,

FD3124372

NPI: 1871700823

License: PHYSICIAN (MD), m-11037, ID, GENERAL PRACTICE/FAMILY PRACTICE

PHYSICIAN (MD), 44500, AZ

PHYSICIAN (MD), 118790, CA, GENERAL PRACTICE/FAMILY PRACTICE
PHYSICIAN (MD), 54396, MN, GENERAL PRACTICE/FAMILY PRACTICE
PHYSICIAN (MD), 12181, MT, GENERAL PRACTICE/FAMILY PRACTICE
PHYSICIAN (MD), 10724, ND, GENERAL PRACTICE/FAMILY PRACTICE
PHYSICIAN (MD), 7760, SD, GENERAL PRACTICE/FAMILY PRACTICE
PHYSICIAN (MD), 55979-020, WI, GENERAL PRACTICE/FAMILY PRACTICE
PHYSICIAN (MD), 15204, NV, GENERAL PRACTICE/FAMILY PRACTICE

Professional School(s): ROSS UNIVERSITY, SCHOOL OF MEDICINE (2005)

B. PAYMENT INFORMATION

Credit Card Information: XXXXXXXXXXXX1237 (01/2018)

NPDB Charge: \$5.00* NPDB Bill Reference Number: N42898289

* Each charge will appear separately on your credit card statement.

Transaction Date: 05/10/2016 Additional Paper Copies Requested: 0

C. SUMMARY OF REPORTS ON FILE WITH THE DATA BANK AS OF 05/10/2016

The following report types have been searched:

Medical Malpractice Payment Report(s): No Reports Health Plan Action(s): No Reports State Licensure Action(s): Yes, See Below Professional Society Action(s): No Reports Exclusion or Debarment Action(s): No Reports DEA/Federal Licensure Action(s): No Reports Government Administrative Action(s): No Reports Judgment or Conviction Report(s): No Reports Clinical Privileges Action(s): No Reports Peer Review Organization Action(s): No Reports

Copies of these reports are enclosed for restricted/limited use as prescribed by statutes listed on the preceeding cover page.

MEDICAL BOARD OF CALIFORNIA

STATE LICENSURE

Basis for Action: - LICENSE REVOCATION, SUSPENSION OR OTHER DISCIPLINARY ACTION TAKEN BY A FEDERAL, STATE

OR LOCAL LICENSING AUTHORITY

Initial Action: - REPRIMAND OR CENSURE Date of Action: 07/31/2015

DCN: 5500000098741621

IDAHO STATE BOARD OF MEDICINE

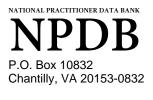
STATE LICENSURE

Basis for Action: - OTHER, SEE SECTION C. OF THE REPORT FOR DETAILS

Initial Action: - REPRIMAND OR CENSURE Date of Action: 01/02/2014

DCN: 5500000105944144

------ Unabridged Report(s) Follow ------



DCN: 5500000098741621 Process Date: 07/30/2015

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DE JONG, ANN

MEDICAL BOARD OF CALIFORNIA

STATE LICENSURE ACTION

Initial Action

Basis for Initial Action

Date of Action: 07/31/2015

- REPRIMAND OR CENSURE

- LICENSE REVOCATION, SUSPENSION OR OTHER DISCIPLINARY ACTION TAKEN BY A FEDERAL, STATE OR LOCAL LICENSING AUTHORITY

A. REPORTING ENTITY

Entity Name: MEDICAL BOARD OF CALIFORNIA *

Address: 2005 EVERGREEN STREET, SUITE 1200

City, State, Zip: SACRAMENTO, CA 95815-3831

Country:

Name or Office: CHRISTINA HAYDON

Title or Department: DISCIPLINE COORDINATION UNIT

Telephone: (916) 263-2370 Entity Internal Report Reference: 8002014002486

Type of Report: INITIAL

*The reporting entity has changed its name or address on file with the NPDB. The following is the entity's most recent contact information reported

to the NPDB on 09/08/2015:

Entity Name: MEDICAL BOARD OF CALIFORNIA
Address: 2005 EVERGREEN ST STE 1200
City, State, Zip: SACRAMENTO, CA 95815-5401

Country:

B. SUBJECT
IDENTIFICATION
INFORMATION
(INDIVIDUAL)

Subject Name: DE JONG, ANN

Other Name(s) Used:

Gender: FEMALE

Date of Birth: 09/28/1975

Organization Name:

Work Address: 8470 HELENA AVE

City, State, ZIP: LAS VEGAS, NV 89129-0405

Organization Type: Home Address: City, State, ZIP:

Deceased: NO

Federal Employer Identification Numbers (FEIN):

Social Security Numbers (SSN): ***-**-3295

Individual Taxpayer Identification Numbers (ITIN):

National Provider Identifiers (NPI):

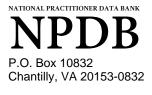
Professional School(s) & Year(s) of Graduation: ROSS UNIVERSITY SCHOOL OF MEDICINE (2005)

Occupation/Field of Licensure (Code): PHYSICIAN (MD)
State License Number, State of Licensure: A 118790, CA
Specialty: UNSPECIFIED

Drug Enforcement Administration (DEA) Numbers:

Unique Physician Identification Numbers (UPIN):

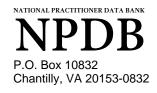
Name(s) of Health Care Entity (Entities) With Which Subject Is Affiliated or Associated (Inclusion Does Not Imply Complicity in



DCN: 5500000098741621 Process Date: 07/30/2015

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DE JONG, ANN

	the Reported Action.):		
	Business Address of Affiliate:		
	City, State, ZIP:		
	Nature of Relationship(s):		
C. INFORMATION	Type of Adverse Action:	STATE LICENSURE	
REPORTED		LICENSE REVOCATION, SUSPENSION OR OTHER DISCIPLINARY ACTION TAKEN BY A FEDERAL, STATE OR LOCAL LICENSING AUTHORITY (39)	
	Name of Agency or Program That Took the Adverse Action Specified in This Report:	MEDICAL BOARD OF CALIFORNIA	
	Adverse Action Classification Code(s):	REPRIMAND OR CENSURE (1140)	
	Date Action Was Taken:	07/01/2015	
	Date Action Became Effective:	07/31/2015	
	Length of Action:	INDEFINITE	
	Total Amount of Monetary Penalty, Assessment and/or Restitution: Subject Automatically Reinstated After	***	
Adverse Action Period Is Completed?: Description of Subject's Act(s) or Omission(s) or Other Reasons for Action(s) Taken and Description of Action(s) Taken			
Subject's Professional Com	by Reporting Entity: Specified in This Report Based on the spetence or Conduct, Which Adversely or Could Have Adversely Affected, the Health or Welfare of Patient(s)?:	PUBLIC REPRIMAND. YES	
		as appealed the reported adverse action.	
D. SUBJECT STATEMENT	If the subject identified in Section B o	f this report has submitted a statement, it appears in this section.	
E. REPORT STATUS	Unless a box below is checked, the subject of this report identified in Section B has not contested this report.		
	This report has been disputed by the subject identified in Section B.		
	At the request of the subject identified in Section B, this report is being reviewed by the Secretary of the U.S. Department of Health and Human Services to determine its accuracy and/or whether it complies with reporting requirements. No decision has been reached.		
	At the request of the subject identified in Section B, this report was reviewed by the Secretary of the U.S. Department of Health and Human Services and a decision was reached. The subject has requested that the Secretary reconsider the original decision.		
		ntified in Section B, this report was reviewed by tment of Health and Human Services. The Secretary's decision	



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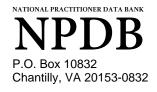
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Date of Original Submission: 07/30/2015

Date of Most Recent Change: 07/30/2015

This report is maintained under the provisions of: Title IV; Section 1921

The information contained in this report is maintained by the National Practitioner Data Bank for restricted use under the provisions of Title IV of Public Law 99-660, as amended, Section 1921 of the Social Security Act, and 45 CFR Part 60. All information is confidential and may be used only for the purpose for which it was disclosed. Disclosure or use of confidential information for other purposes is a violation of federal law. For additional information or clarification, contact the reporting entity identified in Section A.



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DISCLOSURE HISTORY

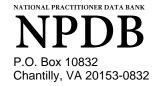
Report Number: 5500000098741621

F. DISCLOSURE HISTORY

Recipient(s) of the Current Version of this Report

A copy of this report has been disclosed to the following entity(entities) for limited/restricted use under the statutory provisions specified in this report. Additionally, all active entities who received an earlier version of this report within the three year period prior to the date this report was submitted or changed were mailed a copy of the current version.

Date Released	Entity Name
07/30/2015	VA SAN DIEGO HEALTHCARE SYSTEM 3350 LA JOLLA VILLAGE DR SAN DIEGO, CA 92161 (858) 552-8585
Date Released	Entity Name
07/30/2015	NEW MEXICO VA HEALTH CARE SYSTEM 1501 SAN PEDRO DR SE ALBUQUERQUE, NM 87108 (505) 767-6001
Date Released	Entity Name
07/30/2015	NORTHERN MONTANA HOSPITAL PO BOX 1231 HAVRE, MT 59501 (406) 262-1302
Date Released	Entity Name
07/30/2015	VA SOUTHERN NEVADA HEALTHCARE SYSTEM 6900 PECOS RD NORTH LAS VEGAS, NV 89086 (702) 791-9010
Date Released	Entity Name
07/30/2015	LOCUMTENENS.COM, LLC 2655 NORTHWINDS PKWY ALPHARETTA, GA 30009 (678) 277-3048



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Date Released Entity Name

08/25/2015 IDAHO STATE BOARD OF MEDICINE

PO BOX 83720 BOISE, ID 83720 (208) 327-7000

Date Released Entity Name

09/02/2015 IDAHO STATE BOARD OF MEDICINE

PO BOX 83720 BOISE, ID 83720 (208) 327-7000

Date Released Entity Name

09/30/2015 NATIONAL MEDICAL PROFESSIONALS OF TEXAS, PLLC

2941 LAKE VISTA DR LEWISVILLE, TX 75067

(972) 899-6726

Date Released Entity Name

10/05/2015 VA SOUTHERN NEVADA HEALTHCARE SYSTEM

6900 PECOS RD

NORTH LAS VEGAS, NV 89086

(702) 791-9010

Date Released Entity Name

10/06/2015 SELF-QUERIER

Date Released Entity Name

10/14/2015 BANNER PAYSON MEDICAL CENTER

807 S PONDEROSA ST PAYSON, AZ 85541

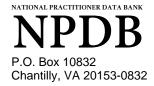
(928) 472-1273

Date Released Entity Name

10/15/2015 VEP HEALTHCARE, INC.

1990 N CALIFORNIA BLVD STE 400 WALNUT CREEK, CA 94596

(925) 225-5837



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Date Released Entity Name

11/09/2015 VA MEDICAL CENTER

2121 NORTH AVE

GRAND JUNCTION, CO 81501

(970) 242-0731

Date Released Entity Name

11/10/2015 TENNESSEE VALLEY HEALTHCARE SYSTEM

1310 24TH AVENUE SOUTH NASHVILLE, TN 37212

(615) 873-6084

Date Released Entity Name

11/16/2015 SELF-QUERIER

Date Released Entity Name

11/16/2015 SELF-QUERIER

Date Released Entity Name

12/11/2015 BARSTOW COMMUNITY HOSPITAL

820 E. MOUNTAIN VIEW STREE

BARSTOW, CA 92311

(760) 957-3224

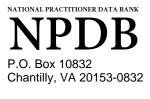
Date Released Entity Name

05/06/2016 VA SIERRA NEVADA HEALTH CARE SYSTEM

975 KIRMAN AVE RENO, NV 89502 (775) 789-6630

Date Released Entity Name

05/10/2016 SELF-QUERIER



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IDAHO STATE BOARD OF MEDICINE

STATE LICENSURE ACTION

REPRIMAND OR CENSURE

Basis for Initial Action

Date of Action: 01/02/2014

Initial Action

- OTHER, SEE SECTION C. OF THE REPORT FOR DETAILS

A. REPORTING ENTITY

Entity Name: IDAHO STATE BOARD OF MEDICINE *

Address: PO BOX 83720

City, State, Zip: BOISE, ID 83720-0003

Country:

Name or Office: FELICIA M KRUCK

Title or Department: DISCIPLINE ASSISTANT

Telephone: (208) 327-7000 Ext. 2507

Entity Internal Report Reference:

Type of Report: CORRECTION

Previous Report Number: 5500000086880913 (Please destroy all copies of the

previous report)

*The following was the entity's contact information at the time the initial report was submitted on 01/17/2014:

Entity Name: IDAHO STATE BOARD OF MEDICINE

Address: PO BOX 83720

City, State, Zip: BOISE, ID 83720-0058

Country:

B. SUBJECT
IDENTIFICATION
INFORMATION
(INDIVIDUAL)

NOTE: Information marked with an asterisk (*) was added, corrected, or removed.

Subject Name: DEJONG, ANN

Other Name(s) Used:

Gender: FEMALE

Date of Birth: 09/28/1975

Organization Name:

Work Address: 1253 84TH ST

* City, State, ZIP: NEW RICHMOND, WI 54017-6443

Organization Type:

Home Address: City, State, ZIP:

Deceased: NO

Federal Employer Identification Numbers (FEIN):

Social Security Numbers (SSN): ***-**-3295

Individual Taxpayer Identification Numbers (ITIN):

National Provider Identifiers (NPI): 1871700823

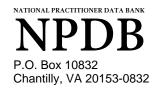
Professional School(s) & Year(s) of Graduation: ROSS UNIVERSITY, SCHOOL OF MEDICINE (2005)

Occupation/Field of Licensure (Code): PHYSICIAN (MD) State License Number, State of Licensure: M-11037, ID

Specialty: EMERGENCY MEDICINE

Drug Enforcement Administration (DEA) Numbers:

Unique Physician Identification Numbers (UPIN):



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Name(s) of Health Care Entity (Entities) With Which Subject Is Affiliated or Associated (Inclusion Does Not Imply Complicity in

the Reported Action.):

Business Address of Affiliate:

City, State, ZIP:

Nature of Relationship(s):

C. INFORMATION REPORTED

NOTE: Information marked with an asterisk (*) was added, corrected, or removed.

Type of Adverse Action: STATE LICENSURE

* Basis for Action: OTHER - NOT CLASSIFIED, SPECIFY (99)

* Other, as Specified: PUBLIC REPRIMAND, ORDER TO COMPLY WITH IDAHO TELEHEALTH

ACCESS ACT

Name of Agency or Program
That Took the Adverse Action

Specified in This Report: IDAHO STATE BOARD OF MEDICINE

* Adverse Action

Classification Code(s): REPRIMAND OR CENSURE (1140)

Date Action Was Taken: 01/02/2014

Date Action Became Effective: 01/02/2014

Length of Action: INDEFINITE

Total Amount of Monetary Penalty,
Assessment and/or Restitution:
Is Subject Automatically Reinstated After
Adverse Action Period Is Completed?: NO

* Description of Subject's Act(s) or Omission(s) or Other

Reasons for Action(s) Taken and Description of Action(s) Taken

by Reporting Entity:
ON SEPTEMBER 21, 2015, THE IDAHO BOARD OF MEDICINE
ISSUED AN AMENDED FINAL ORDER PROVIDING ONLY A PUBLIC
REPRIMAND AND ORDER TO COMPLY WITH IDAHO TELEHEALTH
ACCESS ACT AND RELATED RULES. THIS AMENDED FINAL ORDER
RETROACTIVELY CHANGED THE INITIAL REPORT TO SHOW A
REPRIMAND RATHER THAN A RESTRICTION ON THE LICENSEE.

* Is the Adverse Action Specified in This Report Based on the Subject's Professional Competence or Conduct, Which Adversely Affected, or Could Have Adversely Affected, the

Health or Welfare of Patient(s)?: NO

Subject identified in Section B has appealed the reported adverse action.

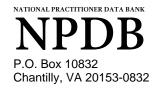
D. SUBJECT STATEMENT

If the subject identified in Section B of this report has submitted a statement, it appears in this section.

Date Submitted: 01/22/2016

We write on behalf of Dr. Ann DeJong regarding various reports issued by the Idaho Board of Medicine (IBOM) which were not filed in accordance with Data Bank regulations and which do not accurately reflect the written records of the IBOM. The original report, DCN 5500000086880913 (the 913 report), which is the specific subject of this dispute, was filed January 2, 2014 as a State Licensure Action. A second report, DCN 5500000100335613 (the 613 report), was filed on September 21, 2015 as a Revision to State Licensure Action and related to the prior 913 report. A third report, DCN 5500000100447410 (the 410 report) was filed by IBOM on October 7, 2015 as a Correction of Revision to State Licensure Action; as a result of that filing, the second 613 report appears to have been expunged from Dr. DeJong's NPDB records. The original 913 report was filed as a result of disciplinary action taken by IBOM and indicated, erroneously, there was a restriction on Dr. DeJong's license. That classification as a restriction (an 1147 code) was based on language contained in the IBOM's Order dated January 2, 2014 which read in part:

"Respondent shall not provide any type of medical/health care via telephone/email



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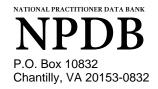
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medical consultations (telemedicine) to Idaho citizens." (Exh. A - 1/2/14 Order, attached to Points of Dispute). Based on acknowledgement by IBOM's counsel that a restriction was not intended (see exh. B - letter from Ms. [ND]), Dr. DeJong filed a Petition to Modify the Board Order and the NPDB report. The IBOM issued an Amended Final Order which made clear, among other things: " . . . the Final Order entered January 2, 2014, is modified as of its effective date to reflect its original intention to require that Dr. DeJong comply with current Idaho legal standards applicable to telemedicine rather than impose licensure or practice standards greater than those applicable to licensed physicians in the State of Idaho." (Exh. C - Amended Final Order, attached to Points of Dispute.) The Order required that the IBOM appropriate amend the NPDB report. (Id.) Prior to the IBOM filing the 613 report in September, counsel for the Dr. DeJong and the IBOM communicated extensively regarding the appropriate form of the report. (See exh. D - email correspondence between Attorneys [Name Deleted (ND)] and [ND], attached as evidence of attempted resolution). IBOM's counsel insisted for reasons that remain unclear that the appropriate form of the report would be a "revision" rather than a "correction." Counsel for IBOM refused to even seek guidance from the Data Bank on the correct form of the report. (See exh. D.) The IBOM filed the 613 report as a "revision" of the earlier 913 report. This distinction proved more than just academic to Dr. DeJong as potential employers expressed concern to her over the period of time her license was "restricted." Dr. DeJong, through counsel, reached out to NPDB for assistance. After Dr. DeJong's counsel initially contacted NPDB, the IBOM without notice to Dr. DeJong's counsel, file a third report, the 410 report. Again, it appears that that report was not filed as a correction of the 913 report, but rather a "Correction of Revision." Because this corrected the revision, but not the original report, the result is that the second report (the 613 report) has been expunged, but the original (the 913 report) remains. It now appears to anyone accessing NPDB's records that the IBOM has issued two actions against Dr. DeJong, including an initial restriction followed by a subsequent censure. The original 913 report stating that IBOM indefinitely limited or restricted Dr. DeJong's license (an 1147 code) on January 2, 2014 remains and this should be expunged. The third 410 report should be expunged and replaced by a report of a State Licensure Action against Dr. DeJong for a reprimand (1140 code), based on a public reprimand issued by the IBOM.

Unless a box below is checked, the subject of this report identified in Section B has not contested this report. | X | This report has been disputed by the subject identified in Section B. | At the request of the subject identified in Section B, this report is being reviewed by the Secretary of the U.S. Department of Health and Human Services to determine its accuracy and/or whether it complies with reporting requirements. No decision has been reached. | At the request of the subject identified in Section B, this report was reviewed by the Secretary of the U.S. Department of Health and Human Services and a decision was reached. The subject has requested that the Secretary reconsider the original decision. | At the request of the subject identified in Section B, this report was reviewed by the Secretary of the U.S. Department of Health and Human Services. The Secretary's decision is shown below: | Date of Original Submission: 01/17/2014

04/22/2016

Date of Most Recent Change:



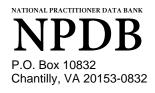
DCN: 5500000105944144 Process Date: 04/22/2016

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This report is maintained under the provisions of: Section 1921

The information contained in this report is maintained by the National Practitioner Data Bank for restricted use under the provisions of Section 1921 of the Social Security Act, and 45 CFR Part 60. All information is confidential and may be used only for the purpose for which it was disclosed. Disclosure or use of confidential information for other purposes is a violation of federal law. For additional information or clarification, contact the reporting entity identified in Section A.

END OF REPORT ————————————————————————————————————



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DEJONG, ANN

DISCLOSURE HISTORY

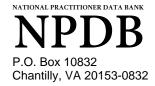
Report Number: 5500000105944144

F. DISCLOSURE HISTORY

Recipient(s) of the Current Version of this Report

A copy of this report has been disclosed to the following entity(entities) for limited/restricted use under the statutory provisions specified in this report. Additionally, all active entities who received an earlier version of this report within the three year period prior to the date this report was submitted or changed were mailed a copy of the current version.

Date Released	Entity Name	
04/22/2016	NATIONAL MEDICAL PROFESSIONALS OF TEXAS, PLL 2941 LAKE VISTA DR LEWISVILLE, TX 75067 (972) 899-6726	
Date Released	Entity Name	
04/22/2016	VA MEDICAL CENTER 2121 NORTH AVE GRAND JUNCTION, CO 81501 (970) 242-0731	
Date Released	Entity Name	
04/22/2016	LOCUMTENENS.COM, LLC 2655 NORTHWINDS PKWY ALPHARETTA, GA 30009 (678) 277-3048	
Date Released	Entity Name	
04/22/2016	NEW MEXICO VA HEALTH CARE SYSTEM 1501 SAN PEDRO DR SE ALBUQUERQUE, NM 87108 (505) 767-6001	
Date Released	Entity Name	
04/22/2016	TENNESSEE VALLEY HEALTHCARE SYSTEM 1310 24TH AVENUE SOUTH NASHVILLE, TN 37212 (615) 873-6084	



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DEJONG, ANN

Date Released Entity Name

05/06/2016 VA SIERRA NEVADA HEALTH CARE SYSTEM

975 KIRMAN AVE RENO, NV 89502 (775) 789-6630

Date Released Entity Name

05/10/2016 SELF-QUERIER

Recipient(s) of the Earlier Version of this Report

An earlier version of this report has been disclosed to the following entity(entities) for limited/restricted use under the statutory provisions specified in this report.

Date Released Entity Name

01/17/2014 AB STAFFING SOLUTIONS LLC

2680 S VAL VISTA DR STE 152

GILBERT, AZ 85295

(888) 515-3900

Date Released Entity Name

01/17/2014 AMN HEALTHCARE, INC.

8840 CYPRESS WATERS BLVD STE 300

COPPELL, TX 75019

(866) 790-4315

Date Released Entity Name

01/17/2014 NEW MEXICO VA HEALTH CARE SYSTEM

1501 SAN PEDRO DR SE ALBUQUERQUE, NM 87108

(505) 767-6001

Date Released Entity Name

01/17/2014 SANTA BARBARA COTTAGE HOSPITAL

400 W PUEBLO ST

SANTA BARBARA, CA 93105

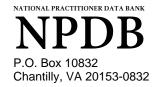
(805) 569-7245

Date Released Entity Name

01/17/2014 VA SAN DIEGO HEALTHCARE SYSTEM

3350 LA JOLLA VILLAGE DR SAN DIEGO, CA 92161

(858) 552-8585



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DEJONG, ANN

Date Released Entity Name

01/17/2014 LOCUMTENENS.COM, LLC

2655 NORTHWINDS PKWY ALPHARETTA, GA 30009

(678) 277-3048

Date Released Entity Name

01/17/2014 AMN HEALTHCARE, INC.

8840 CYPRESS WATERS BLVD STE 300

COPPELL, TX 75019

(866) 790-4315

Date Released Entity Name

01/17/2014 VA SOUTHERN NEVADA HEALTHCARE SYSTEM

6900 PECOS RD

NORTH LAS VEGAS, NV 89086

(702) 791-9010

Date Released Entity Name

02/20/2014 MEDICAL BOARD OF CALIFORNIA

2005 EVERGREEN ST STE 1200 SACRAMENTO, CA 95815

(916) 263-2639

Date Released Entity Name

04/11/2014 NEW MEXICO VA HEALTH CARE SYSTEM

1501 SAN PEDRO DR SE ALBUQUERQUE, NM 87108

(505) 767-6001

Date Released Entity Name

04/11/2014 NEW MEXICO VA HEALTH CARE SYSTEM

1501 SAN PEDRO DR SE ALBUQUERQUE, NM 87108

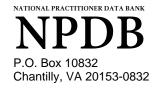
(505) 767-6001

Date Released Entity Name

05/14/2014 HEALTHPARTNERS INC

8170 33RD AVE S STOP 21107Q MINNEAPOLIS, MN 55425

(952) 883-6210



DCN: 5500000105944144 Process Date: 04/22/2016

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DEJONG, ANN

Date Released Entity Name

07/16/2014 VA SOUTHERN NEVADA HEALTHCARE SYSTEM

6900 PECOS RD

NORTH LAS VEGAS, NV 89086

(702) 791-9010

Date Released Entity Name

08/17/2014 VA SAN DIEGO HEALTHCARE SYSTEM

3350 LA JOLLA VILLAGE DR SAN DIEGO, CA 92161

(858) 552-8585

Date Released Entity Name

04/07/2015 NEW MEXICO VA HEALTH CARE SYSTEM

1501 SAN PEDRO DR SE ALBUQUERQUE, NM 87108

(505) 767-6001

Date Released Entity Name

04/07/2015 VA SAN DIEGO HEALTHCARE SYSTEM

3350 LA JOLLA VILLAGE DR SAN DIEGO, CA 92161

(858) 552-8585

Date Released Entity Name

04/07/2015 VA SOUTHERN NEVADA HEALTHCARE SYSTEM

6900 PECOS RD

NORTH LAS VEGAS, NV 89086

(702) 791-9010

Date Released Entity Name

05/11/2015 VA SAN DIEGO HEALTHCARE SYSTEM

3350 LA JOLLA VILLAGE DR SAN DIEGO, CA 92161

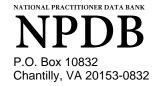
(858) 552-8585

Date Released Entity Name

05/11/2015 NEW MEXICO VA HEALTH CARE SYSTEM

1501 SAN PEDRO DR SE ALBUQUERQUE, NM 87108

(505) 767-6001



DCN: 5500000105944144 Process Date: 04/22/2016

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DEJONG, ANN

Entity Name

05/11/2015 VA SOUTHERN NEVADA HEALTHCARE SYSTEM

6900 PECOS RD

NORTH LAS VEGAS, NV 89086

(702) 791-9010

Date Released Entity Name

05/14/2015 NEW MEXICO VA HEALTH CARE SYSTEM

1501 SAN PEDRO DR SE ALBUQUERQUE, NM 87108

(505) 767-6001

Date Released Entity Name

05/14/2015 VA SOUTHERN NEVADA HEALTHCARE SYSTEM

6900 PECOS RD

NORTH LAS VEGAS, NV 89086

(702) 791-9010

Date Released Entity Name

05/14/2015 VA SAN DIEGO HEALTHCARE SYSTEM

3350 LA JOLLA VILLAGE DR SAN DIEGO, CA 92161

(858) 552-8585

Date Released Entity Name

05/18/2015 SELF-QUERIER

Date Released Entity Name

05/18/2015 NORTHERN MONTANA HOSPITAL

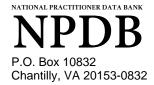
PO BOX 1231

HAVRE, MT 59501 (406) 262-1302

Date Released Entity Name

08/25/2015 IDAHO STATE BOARD OF MEDICINE

PO BOX 83720 BOISE, ID 83720 (208) 327-7000



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DEJONG, ANN

Date Released Entity Name

09/02/2015 IDAHO STATE BOARD OF MEDICINE

PO BOX 83720 BOISE, ID 83720 (208) 327-7000

Date Released Entity Name

09/30/2015 NATIONAL MEDICAL PROFESSIONALS OF TEXAS, PLLC

2941 LAKE VISTA DR LEWISVILLE, TX 75067

(972) 899-6726

Date Released Entity Name

10/05/2015 VA SOUTHERN NEVADA HEALTHCARE SYSTEM

6900 PECOS RD

NORTH LAS VEGAS, NV 89086

(702) 791-9010

Date Released Entity Name

10/06/2015 SELF-QUERIER

Date Released Entity Name

10/14/2015 BANNER PAYSON MEDICAL CENTER

807 S PONDEROSA ST PAYSON, AZ 85541

(928) 472-1273

Date Released Entity Name

10/15/2015 VEP HEALTHCARE, INC.

1990 N CALIFORNIA BLVD STE 400 WALNUT CREEK, CA 94596

(925) 225-5837

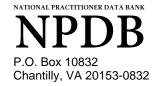
Date Released Entity Name

11/09/2015 VA MEDICAL CENTER

2121 NORTH AVE

GRAND JUNCTION, CO 81501

(970) 242-0731



DCN: 5500000105944144 Process Date: 04/22/2016

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DEJONG, ANN

Date Released	Entity Name
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11/10/2015 TENNESSEE VALLEY HEALTHCARE SYSTEM

1310 24TH AVENUE SOUTH NASHVILLE, TN 37212

(615) 873-6084

Date Released Entity Name

11/16/2015 SELF-QUERIER

Date Released Entity Name

11/16/2015 SELF-QUERIER

Date Released Entity Name

11/17/2015 VA SOUTHERN NEVADA HEALTHCARE SYSTEM

6900 PECOS RD

NORTH LAS VEGAS, NV 89086

(702) 791-9010

Date Released Entity Name

11/17/2015 VA SOUTHERN NEVADA HEALTHCARE SYSTEM

6900 PECOS RD

NORTH LAS VEGAS, NV 89086

(702) 791-9010

Date Released Entity Name

11/17/2015 VA SAN DIEGO HEALTHCARE SYSTEM

3350 LA JOLLA VILLAGE DR SAN DIEGO, CA 92161

(858) 552-8585

Date Released Entity Name

11/17/2015 VA SAN DIEGO HEALTHCARE SYSTEM

3350 LA JOLLA VILLAGE DR SAN DIEGO, CA 92161

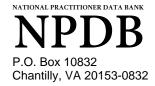
(858) 552-8585

Date Released Entity Name

11/17/2015 NEW MEXICO VA HEALTH CARE SYSTEM

1501 SAN PEDRO DR SE ALBUQUERQUE, NM 87108

(505) 767-6001



DCN: 5500000105944144 Process Date: 04/22/2016

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DEJONG, ANN

Date Released Entity Name

11/17/2015 NEW MEXICO VA HEALTH CARE SYSTEM

1501 SAN PEDRO DR SE ALBUQUERQUE, NM 87108

(505) 767-6001

Date Released Entity Name

11/17/2015 LOCUMTENENS.COM, LLC

2655 NORTHWINDS PKWY ALPHARETTA, GA 30009

(678) 277-3048

Date Released Entity Name

11/17/2015 LOCUMTENENS.COM, LLC

2655 NORTHWINDS PKWY ALPHARETTA, GA 30009

(678) 277-3048

Date Released Entity Name

11/17/2015 NATIONAL MEDICAL PROFESSIONALS OF TEXAS, PLLC

2941 LAKE VISTA DR LEWISVILLE, TX 75067

(972) 899-6726

Date Released Entity Name

11/17/2015 VA MEDICAL CENTER

2121 NORTH AVE

GRAND JUNCTION, CO 81501

(970) 242-0731

Date Released Entity Name

11/17/2015 VA MEDICAL CENTER

2121 NORTH AVE

GRAND JUNCTION, CO 81501

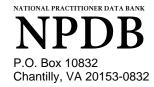
(970) 242-0731

Date Released Entity Name

11/17/2015 TENNESSEE VALLEY HEALTHCARE SYSTEM

1310 24TH AVENUE SOUTH NASHVILLE, TN 37212

(615) 873-6084



DCN: 5500000105944144 Process Date: 04/22/2016

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DEJONG, ANN

Date Released Entity Name

11/17/2015 TENNESSEE VALLEY HEALTHCARE SYSTEM

1310 24TH AVENUE SOUTH NASHVILLE, TN 37212

(615) 873-6084

Date Released Entity Name

11/17/2015 NATIONAL MEDICAL PROFESSIONALS OF TEXAS, PLLC

2941 LAKE VISTA DR LEWISVILLE, TX 75067

(972) 899-6726

Date Released Entity Name

12/11/2015 BARSTOW COMMUNITY HOSPITAL

820 E. MOUNTAIN VIEW STREE

BARSTOW, CA 92311

(760) 957-3224

Date Released Entity Name

01/22/2016 LOCUMTENENS.COM, LLC

2655 NORTHWINDS PKWY ALPHARETTA, GA 30009

(678) 277-3048

Date Released Entity Name

01/22/2016 NEW MEXICO VA HEALTH CARE SYSTEM

1501 SAN PEDRO DR SE ALBUQUERQUE, NM 87108

(505) 767-6001

Date Released Entity Name

01/22/2016 VA SOUTHERN NEVADA HEALTHCARE SYSTEM

6900 PECOS RD

NORTH LAS VEGAS, NV 89086

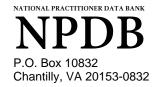
(702) 791-9010

Date Released Entity Name

01/22/2016 NATIONAL MEDICAL PROFESSIONALS OF TEXAS, PLLC

2941 LAKE VISTA DR LEWISVILLE, TX 75067

(972) 899-6726



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DEJONG, ANN

Date Released Entity Name

01/22/2016 TENNESSEE VALLEY HEALTHCARE SYSTEM

1310 24TH AVENUE SOUTH NASHVILLE, TN 37212

(615) 873-6084

Date Released Entity Name

01/22/2016 VA MEDICAL CENTER

2121 NORTH AVE

GRAND JUNCTION, CO 81501

(970) 242-0731

Date Released Entity Name

01/29/2016 TENNESSEE VALLEY HEALTHCARE SYSTEM

1310 24TH AVENUE SOUTH NASHVILLE, TN 37212

(615) 873-6084

Date Released Entity Name

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2941 LAKE VISTA DR LEWISVILLE, TX 75067

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Date Released Entity Name

01/29/2016 VA SOUTHERN NEVADA HEALTHCARE SYSTEM

6900 PECOS RD

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(702) 791-9010

Date Released Entity Name

01/29/2016 NEW MEXICO VA HEALTH CARE SYSTEM

1501 SAN PEDRO DR SE ALBUQUERQUE, NM 87108

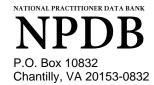
(505) 767-6001

Date Released Entity Name

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2655 NORTHWINDS PKWY ALPHARETTA, GA 30009

(678) 277-3048



DCN: 5500000105944144 Process Date: 04/22/2016

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DEJONG, ANN

Date Released

Entity Name

01/29/2016

VA MEDICAL CENTER
2121 NORTH AVE
GRAND JUNCTION, CO 81501

(970) 242-0731