

5500000140134608

Process Date: 10/26/2018

Page: 1 of 1

To: JOON, CHOI

1577 E CHEVY CHASE DR STE 110

GLENDALE, CA 91206-4091

From:

National Practitioner Data Bank

Re: 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.

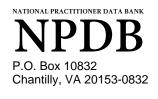
Section 1128E of the Social Security Act was added by Section 221(a) of Public Law 104-191, the Health Insurance Portability and Accountability Act of 1996. The statute established a national data collection program (formerly known as the Healthcare Integrity and Protection Data Bank) to combat fraud 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 (https://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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JOON, CHOI - SELF-QUERY RESPONSE

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

Practitioner Name: JOON, CHOI

Date of Birth: 11/17/1961 Gender: MALE

Organization Name: JOON CHOI, MD

Organization Type: MEDICAL GROUP/PRACTICE (365)

Delivery Address: 1577 E CHEVY CHASE DR STE 110, GLENDALE, CA 91206-4091

Social Security Number: ***-*-9433 DEA: BC3698733

NPI: 1023073152 FEIN: 954534815

License: PHYSICIAN (MD), G80351, CA, OBSTETRICS & GYNECOLOGY

Professional School(s): THE UNIVERSITY OF TOLEDO COLLEGE OF MEDICINE (1991)

B. PAYMENT INFORMATION

Credit Card Information: XXXXXXXXXXXX9737 (07/2023)

NPDB Charge: \$4.00 NPDB Bill Reference Number: N59924075
Transaction Date: 10/26/2018 Additional Paper Copies Requested: 0

C. SUMMARY OF REPORTS ON FILE WITH THE DATA BANK AS OF 10/26/2018

The following report types have been searched:

Medical Malpractice Payment Report(s): Health Plan Action(s): No Reports Yes, See Below 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 preceding cover page.

MEDICAL BOARD OF CALIFORNIA

STATE LICENSURE

Basis for Action: - NEGLIGENCE

Initial Action: - REPRIMAND OR CENSURE Date of Action: 12/15/2016

DCN: 5500000136623150

HEALTH RESOURCES AND SERVICES ADMIN

MEDICAL MALPRACTICE PAYMENT

Basis for Action: - FAILURE TO TREAT

Initial Action: - SETTLEMENT Date of Action: 07/22/2012

DCN: 5500000084433382

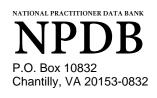
MUTUAL PROTECTION TRUST

MEDICAL MALPRACTICE PAYMENT

Basis for Action: - IMPROPERLY PERFORMED VAGINAL DELIVERY

Initial Action: - SETTLEMENT Date of Action: 08/24/2011

DCN: 5500000071235315



5500000140134608

Process Date: 10/26/2018

Date of Action:

07/27/2009

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MEDICAL BOARD OF CALIFORNIA

STATE LICENSURE

Basis for Action: - NEGLIGENCE

Initial Action: - REPRIMAND OR CENSURE

DCN: 5500000057637419

MUTUAL PROTECTION TRUST

MEDICAL MALPRACTICE PAYMENT

Basis for Action: - FAILURE TO DIAGNOSE

Initial Action: - SETTLEMENT Date of Action: 07/26/2005

DCN: 5500000038525619

MUTUAL PROTECTION TRUST

MEDICAL MALPRACTICE PAYMENT

Basis for Action: - TREATMNT: FAILURE TO OBTAIN CONSENT/LACK OF INFORMED CONSENT - TREATMENT: NOT

OTHERWISE CLASSIFIED

Initial Action: - SETTLEMENT Date of Action: 07/31/2002

DCN: 5500000026788267

MUTUAL PROTECTION TRUST

MEDICAL MALPRACTICE PAYMENT

Basis for Action: - TREATMENT: IMPROPER MANAGEMENT OF COURSE OF TREATMENT - TREATMENT: IMPROPER

MANAGEMENT OF COURSE OF TREATMENT

Initial Action: - SETTLEMENT Date of Action: 12/26/2001

DCN: 5500000024292349

MUTUAL PROTECTION TRUST

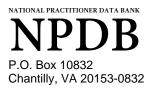
MEDICAL MALPRACTICE PAYMENT

Basis for Action: - TREATMENT: NOT OTHERWISE CLASSIFIED - TREATMENT: NOT OTHERWISE CLASSIFIED

Initial Action: - SETTLEMENT Date of Action: 09/11/2000

DCN: 5500000018848351

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



DCN: 5500000136623150 Process Date: 07/13/2018

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CHOI, JOON

MEDICAL BOARD OF CALIFORNIA

STATE LICENSURE ACTION

Initial Action

Basis for Initial Action

Date of Action: 12/15/2016

- REPRIMAND OR CENSURE

- NEGLIGENCE

A. REPORTING **ENTITY**

Entity Name: MEDICAL BOARD OF CALIFORNIA

Address: 2005 EVERGREEN ST STE 1200 City, State, Zip: SACRAMENTO, CA 95815-5401

Country:

Name or Office: CHRISTINA HAYDON

Title or Department: DISCIPLINE COORDINATION UNIT

Telephone: (916) 263-2370

Entity Internal Report Reference: 18-2011-219803

Type of Report: INITIAL

B. SUBJECT IDENTIFICATION INFORMATION (INDIVIDUAL)

Subject Name: CHOI, JOON

Other Name(s) Used:

Gender: MALE Date of Birth: 11/17/1961

Organization Name:

Work Address: 1577 E. CHEVY CHASE DRIVE, #110

City, State, ZIP: GLENDALE, CA 91206-4091

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

Deceased: NO

Federal Employer Identification Numbers (FEIN):

Social Security Numbers (SSN): ***-**-9433

Individual Taxpayer Identification Numbers (ITIN):

National Provider Identifiers (NPI):

Professional School(s) & Year(s) of Graduation: MEDICAL COLLEGE OF OHIO (1991)

Occupation/Field of Licensure (Code): PHYSICIAN (MD) State License Number, State of Licensure: G 80351, CA

Specialty: UNSPECIFIED

Drug Enforcement Administration (DEA) Numbers:

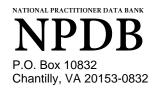
Unique Physician Identification Numbers (UPIN):

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

the Reported Action.): Business Address of Affiliate:

City, State, ZIP:

Nature of Relationship(s):



C. INFORMATION

REPORTED

DCN: 5500000136623150 Process Date: 07/13/2018

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Name of Agency or Program	
That Took the Adverse Action	MEDICAL DOADD OF CALLEDDALA
Specified in This Report:	MEDICAL BOARD OF CALIFORNIA
Adverse Action	DEDDIMAND OD GENGINE (1140)
Classification Code(s):	
Date Action Was Taken:	12/15/2016
Date Action Became Effective:	12/15/2016
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:	PUBLIC LETTER OF REPRIMAND.
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)?:	YES
Subject identified in Section B ha	is appealed the reported adverse action.

This report has been disputed by the subject identified in Section B.

Type of Adverse Action: STATE LICENSURE

Basis for Action: NEGLIGENCE (13)

STATEMENT

D. SUBJECT

If the subject identified in Section B of 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.

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.

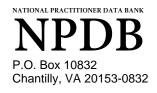
At the request of the subject identified in Section B, this report was reviewed by the Secretary of the U.S. Department of Health and Human Services. The Secretary's decision is shown below:

Date of Original Submission: 07/13/2018

Date of Most Recent Change: 07/13/2018

F. SUPPLEMENTAL SUBJECT INFORMATION ON FILE WITH DATA BANK

The following information was not provided by the reporting entity identified in Section A of this report. The information was submitted to the Data Bank from other sources and is intended to supplement the information contained in this report.



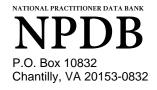
DCN: 5500000136623150 Process Date: 07/13/2018

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National Provider Identifiers (NPI): 1023073152

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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CHOI, JOON

DISCLOSURE HISTORY

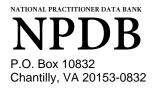
Report Number: 5500000136623150

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
07/13/2018	PROSPECT MEDICAL 600 CITY PKWY W STE 800 ORANGE, CA 92868 (714) 938-5266
Date Released	Entity Name
07/20/2018	PRIME HEALTH SERVICES, INC. 7110 CROSSROADS BLVD STE 100 BRENTWOOD, TN 37027 (615) 565-9011
Date Released	Entity Name
	Entity Name



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CHOI, JOON

HEALTH RESOURCES AND SERVICES ADMIN

MEDICAL MALPRACTICE PAYMENT REPORT

Basis for Initial Action

Date of Action: 07/22/2012

Initial Action

- FAILURE TO TREAT

A. REPORTING ENTITY

- SETTLEMENT

Entity Name: HEALTH RESOURCES AND SERVICES ADMIN *

Address: 5600 FISHERS LANE PARKLAWN BUILDING

ROOM 7-100

City, State, Zip: ROCKVILLE, MD 20857

Country:

Name or Office: OFFICE OF QUALITY IMPROVEMENT

Title or Department: OQI

Telephone: 1877 974-2742 Ext. 2

Entity Internal Report Reference: 2011-0209
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 08/20/2018:

Entity Name: HEALTH RESOURCES AND SERVICES ADMIN

Address: 5600 FISHERS LN # 16W61D City, State, Zip: ROCKVILLE, MD 20852-1750

Country:

B. SUBJECT IDENTIFICATION INFORMATION (INDIVIDUAL) Subject Name: CHOI, JOON

Other Name(s) Used:

Gender: MALE

Date of Birth: 11/17/1961

Organization Name: COMPREHENSIVE COMMUNITY HEALTH CENTERS, INC.

Work Address: 12157 VICTORY BLVD

City, State, ZIP: NORTH HOLLYWOOD, CA 91606

Home Address: 3352 DEER CREEK
City, State, ZIP: GLENDALE, CA 91208

Deceased: NO

Social Security Numbers (SSN):

National Provider Identifiers (NPI):

Professional School(s) & Year(s) of Graduation: MEDICAL COLLEGE OF OHIO AT TOLEDO (1991)

Occupation/Field of Licensure (Code): PHYSICIAN (MD) State License Number, State of Licensure: 680351, CA

Drug Enforcement Administration (DEA) Numbers:

Hospital Affiliation(s):

C. INFORMATION REPORTED

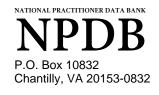
Date of Report: 09/10/2013

Relationship of Entity to

This Practitioner: SELF-INSURED ORGANIZATION
PAYMENTS BY THIS PAYER FOR THIS PRACTITIONER

Amount of This Payment

for This Practitioner: \$ 150,000.00



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Date of This Payment: 07/22/2012

This Payment Represents: A SINGLE FINAL PAYMENT

Total Amount Paid or to Be Paid by

This Payer for This Practitioner: \$ 150,000.00 Payment Result of: SETTLEMENT

Date of Judgment or Settlement, if Any: 06/13/2012

Adjudicative Body Case Number:

Adjudicative Body Name: Court File Number:

Description of Judgment or Settlement and Any

Conditions, Including Terms of Payment: SETTLEMENT OF \$150,000 PAID IN CASH.

PAYMENTS BY THIS PAYER FOR OTHER PRACTITIONERS IN THIS CASE

Total Amount Paid or to Be Paid by This Payer for All

Practitioners in This Case: \$ 150,000.00

Number of Practitioners for Whom This Payer Has Paid

or Will Pay in This Case: 2

PAYMENTS BY OTHERS FOR THIS PRACTITIONER

Has a State Guaranty Fund or State Excess Judgment Fund Made a Payment for This Practitioner in This Case, or Is Such a

UNKNOWN Payment Expected to Be Made?:

Amount Paid or Expected to Be Paid by the State Fund:

Has a Self-Insured Organization and/or Other Insurance

Company/Companies Made Payment(s) for This Practitioner in

This Case, or Is/Are Such Payment(s) Expected to Be Made?:

Amount Paid or Expected to Be Paid by Self-Insured

Organization(s) and/or Other Insurance Company/Companies:

CLASSIFICATION OF ACT(S) OR OMISSION(S)

Patient's Age at Time of Initial Event: 38 YEARS

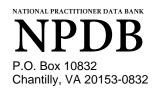
Patient's Gender: FEMALE Patient's Type: BOTH

Description of the Medical Condition With Which the Patient

Presented for Treatment: ON 03/10/2010, PATIENT PRESENTED TO HEALTH CENTER FOR PRENATAL CARE AS A NEW OBSTETRICS PATIENT. GRAVIDA 5, PARA2, SPONTANEOUS ABORTION 2, WITH A LAST MENSTRUAL PERIOD OF 01/17/2010 WITH AN ESTIMATED DATE OF CONFINEMENT OF 10/24/2010. THE PATIENT'S BLOOD PRESSURES WERE NORMAL THROUGHOUT THE PREGNANCY UNTIL 09/17/2010 AT WHICH TIME IT WAS 125/80, A SLIGHT

INCREASE FROM THE PREVIOUS BLOOD PRESSURES.

Description of the Procedure Performed: BY 09/28/2010, THE PATIENT'S BLOOD PRESSURE CONTINUED TO RISE TO 144/84. THIS WAS A SIGNIFICANT RISE OVER THE PREVIOUS NORMAL BLOOD PRESSURES, AND SHOWED AN UPWARD TREND OF BLOOD PRESSURES. AT THIS TIME THE ACCEPTABLE STANDARD OF CARE WOULD BE TO ENTER A NOTE CONSISTENT WITH A DIAGNOSIS OF GESTATIONAL HYPERTENSION AND POSSIBLE EARLY SIGNS OF PRE-ECLAMPSIA. PRE-ECLAMPSIA LABS WHERE INDICATED AT THIS TIME. AT LEAST BY 09/28/2010 CONCERNS REGARDING THE INCREASING BLOOD PRESSURE SHOULD HAVE PROMPTED GESTATIONAL HYPERTENSION LABS TO BE DRAWN. ON 10/07/2010, 37.4 WEEKS GESTATION; BLOOD PRESSURE WAS 142/90; THE NP REFERRED PATIENT TO DR. CHOI. HE ORDERED BED REST AT THE PT'S HOME AND IF SHE HAD ANY SIGNS OF PREGNANCY INDUCED HYPERTENSION OR LABOR PAINS, OR DECREASE FETAL MOVEMENT TO REPORT TO THE HOSPITAL IMMEDIATELY.ON 10/11/2010 AND 10/19/2010 SHE WAS ADMITTED TO HOSPITAL AND DISCHARGED BY DR. CHOI. WITH AN EDD OF 10/24/10 THE PATIENT WAS AT TERM AND WHETHER SHE HAD PREGNANCY INDUCE HYPERTENSION OR PRE-



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ECLAMPSIA, THE STANDARD OF CARE WOULD HAVE BEEN TO MOVE

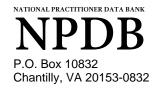
TO DELIVERY.

Nature of Allegation: OBSTETRICS RELATED (050) Specific Allegation: FAILURE TO TREAT (113)

Date of Event	Associated With Allegation or Incident: Outcome:	10/11/2010 DEATH (09)
Description of the Allegations and Injuries or Illnesses Upon Which the Action or Claim Was Based:		
D. SUBJECT STATEMENT	If the subject identified in Section B of this report has submitted a statement, it appears in this section.	
Unless a box below is checked, the subject of this report identified in Section B has 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 review U.S. Department of Health and Human Services to determine its accuracy an reporting requirements. No decision has been reached. At the request of the subject identified in Section B, this report was reviewed I Department of Health and Human Services and a decision was reached. The the Secretary reconsider the original decision. At the request of the subject identified in Section B, this report was reviewed I the Secretary of the U.S. Department of Health and Human Services. The Se is shown below:		y the subject identified in Section B. ntified in Section B, this report is being reviewed by the Secretary of the Human Services to determine its accuracy and/or whether it complies with ision has been reached. ntified in Section B, this report was reviewed by the Secretary of the U.S. an Services and a decision was reached. The subject has requested that ginal decision.
	Date of Original Submission:	09/10/2013
	Date of Most Recent Change:	09/10/2013
F. SUPPLEMENTAL SUBJECT INFORMATION ON FILE WITH DATA BANK	The following information was not provided by the reporting entity identified in Section A of this report. The information was submitted to the Data Bank from other sources and is intended to supplement the information contained in this report. National Provider Identifiers (NPI): 1023073152	
This report is maintaine	d under the provisions of: Title IV	,

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, 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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CHOI, JOON

DISCLOSURE HISTORY

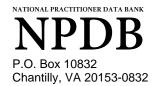
Report Number: 5500000084433382

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Date Released	Entity Name
10/30/2013	REGAL MEDICAL GROUP 8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325 (818) 654-3400
Date Released	Entity Name
11/07/2013	GLENDALE ADVENTIST MEDICAL CENTER - MEDI 1509 WILSON TER GLENDALE, CA 91206 (818) 409-8010
Date Released	Entity Name
01/17/2014	REGAL MEDICAL GROUP 8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325 (818) 654-3400
Date Released	Entity Name
01/18/2014	PACIFICA HOSPITAL OF THE VALLEY 9449 SAN FERNANDO RD SUN VALLEY, CA 91352 (818) 252-2231
Date Released	Entity Name
02/10/2014	REGAL MEDICAL GROUP 8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325 (818) 654-3400



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CHOI, JOON

Date Released Entity Name

03/19/2014 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

03/21/2014 CHEVY CHASE AMBULATORY CENTER, LP

801 S CHEVY CHASE DR STE 106

GLENDALE, CA 91205

(818) 265-2275

Date Released Entity Name

04/28/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

05/02/2014 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

07/29/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

09/03/2014 LOS ANGELES MEDICAL CENTER

2115 COMPTON AVE CORONA, CA 92881

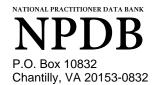
(951) 280-7788

Date Released Entity Name

09/12/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400



DCN: 5500000084433382 Process Date: 09/10/2013

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CHOI, JOON

Date Released Entity Name

10/30/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

01/30/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

04/30/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

07/31/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

10/09/2015 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER

GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

10/21/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

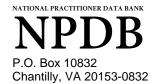
(818) 654-3400

Date Released Entity Name

01/15/2016 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400



DCN: 5500000084433382 Process Date: 09/10/2013

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CHOI, JOON

Date Released Entity Name

02/19/2016 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

05/13/2016 VALLEY PRESBYTERIAN HOSPITAL

15107 VANOWEN ST VAN NUYS, CA 91405

(818) 902-3956

Date Released Entity Name

08/03/2016 PROSPECT MEDICAL

600 CITY PKWY W STE 800 ORANGE, CA 92868

(714) 938-5266

Date Released Entity Name

11/08/2016 SEOUL MEDICAL GROUP

520 S VIRGIL AVE STE 507 LOS ANGELES, CA 90020

(213) 480-7770

Date Released Entity Name

02/08/2017 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/17/2017 SEOUL MEDICAL GROUP

520 S VIRGIL AVE STE 507 LOS ANGELES, CA 90020

(213) 480-7770

Date Released Entity Name

03/16/2017 COAST HEALTHCARE MANAGEMENT, LLC

10833 VALLEY VIEW ST STE 300 CREDENTIALING DEPARTMENT

CYPRESS, CA 90630

(562) 602-1563



DCN: 5500000084433382 Process Date: 09/10/2013

Page: 5 of 6

CHOI, JOON

Date Released Entity Name

04/06/2017 ARROYO VISTA FAMILY HEALTH CENTER

6000 N FIGUEROA ST

LOS ANGELES, CA 90042

(323) 254-5291

Date Released Entity Name

06/14/2017 KOREAN AMERICAN MEDICAL GROUP, INC.

PO BOX 6300

CYPRESS, CA 90630

(714) 947-8600

Date Released Entity Name

08/25/2017 PROSPECT MEDICAL

600 CITY PKWY W STE 800 ORANGE, CA 92868

(714) 938-5266

Date Released Entity Name

09/12/2017 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

10/12/2017 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER

GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

01/09/2018 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

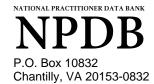
(818) 847-3930

Date Released Entity Name

04/14/2018 AVALON SURGERY & ROBOTIC CENTER

716 W BROADWAY STE 200 GLENDALE, CA 91204

(818) 696-0091



DCN: 5500000084433382 Process Date: 09/10/2013

Page: 6 of 6

CHOI, JOON

Date Released Entity Name

06/20/2018 HEALTHCARE PARTNERS MEDICAL GROUP

2175 PARK PL

EL SEGUNDO, CA 90245

(310) 354-6242

Date Released Entity Name

07/20/2018 PRIME HEALTH SERVICES, INC.

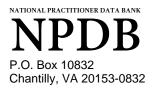
7110 CROSSROADS BLVD STE 100

BRENTWOOD, TN 37027

(615) 565-9011

Date Released Entity Name

10/26/2018 SELF-QUERIER



DCN: 5500000071235315 Process Date: 10/19/2011

Page: 1 of 3 CHOI, JOON

CHOI, JOON

MUTUAL PROTECTION TRUST

MEDICAL MALPRACTICE PAYMENT REPORT

Initial Action

Basis for Initial Action

Date of Action: 08/24/2011

- SETTLEMENT

- IMPROPERLY PERFORMED VAGINAL DELIVERY

A. REPORTING ENTITY

Entity Name: MUTUAL PROTECTION TRUST *

Address: 333 SOUTH HOPE STREET, 8TH FLOOR

City, State, Zip: LOS ANGELES, CA 90071-1409

Country:

Name or Office: SUZANNE PARK
Title or Department: CLAIMS SERVICES

Telephone: (213) 473-8631

Entity Internal Report Reference: 10-0505

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 04/16/2018:

Entity Name: MUTUAL PROTECTION TRUST

Address: 333 S HOPE ST FL 8

City, State, Zip: LOS ANGELES, CA 90071-3001

Country:

B. SUBJECT
IDENTIFICATION
INFORMATION
(INDIVIDUAL)

Subject Name: CHOI, JOON

Other Name(s) Used:

Gender: MALE

Date of Birth: 11/17/1961

Organization Name:

Work Address: 801 S. CHEVY CHASE DRIVE, #104

City, State, ZIP: GLENDALE, CA 91205

Home Address:

City, State, ZIP:

Deceased: NO

Social Security Numbers (SSN):

National Provider Identifiers (NPI):

Professional School(s) & Year(s) of Graduation: MEDICAL UNIVERSITY OF OHIO (1991)

Occupation/Field of Licensure (Code): PHYSICIAN (MD)
State License Number, State of Licensure: G80351, CA

Drug Enforcement Administration (DEA) Numbers:

Hospital Affiliation(s):

C. INFORMATION

REPORTED

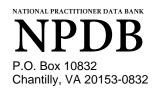
Date of Report: 10/19/2011

Relationship of Entity to

This Practitioner: SELF-INSURED ORGANIZATION
PAYMENTS BY THIS PAYER FOR THIS PRACTITIONER

Amount of This Payment

for This Practitioner: \$ 175,000.00 Date of This Payment: 08/24/2011



DCN: 5500000071235315 Process Date: 10/19/2011

Page: 2 of 3 CHOI, JOON

This Payment Represents: A SINGLE FINAL PAYMENT

Total Amount Paid or to Be Paid by

This Payer for This Practitioner: \$ 175,000.00 Payment Result of: SETTLEMENT

Date of Judgment or Settlement, if Any: 07/21/2011

Adjudicative Body Case Number:

Adjudicative Body Name: LOS ANGELES COUNTY - BURBANK

Court File Number: EC054209

Description of Judgment or Settlement and Any

Conditions, Including Terms of Payment: FINAL PAYMENT.

PAYMENTS BY THIS PAYER FOR OTHER PRACTITIONERS IN THIS CASE

Total Amount Paid or to Be Paid by This Payer for All

Practitioners in This Case: \$ 175,000.00

Number of Practitioners for Whom This Payer Has Paid

or Will Pay in This Case: 1

PAYMENTS BY OTHERS FOR THIS PRACTITIONER

Has a State Guaranty Fund or State Excess Judgment Fund Made a Payment for This Practitioner in This Case, or Is Such a

Payment Expected to Be Made?: NO

Amount Paid or Expected to Be Paid by the State Fund:

Has a Self-Insured Organization and/or Other Insurance Company/Companies Made Payment(s) for This Practitioner in

This Case, or Is/Are Such Payment(s) Expected to Be Made?:

Amount Paid or Expected to Be Paid by Self-Insured

Organization(s) and/or Other Insurance Company/Companies:

CLASSIFICATION OF ACT(S) OR OMISSION(S)

Patient's Age at Time of Initial Event: 23 YEARS

Patient's Gender: FEMALE

Patient's Type: INPATIENT

Description of the Medical Condition With Which the Patient

Presented for Treatment: PREMATURE RUPTURE OF MEMBRANES AT 23 1/2 WEEKS

GESTATION.

Description of the Procedure Performed: VAGINAL DELIVERY

Nature of Allegation: OBSTETRICS RELATED (050)

Specific Allegation: IMPROPERLY PERFORMED VAGINAL DELIVERY (308)

Date of Event Associated With Allegation or Incident: 11/16/2009

Outcome: DEATH (09)

Description of the Allegations and Injuries or Illnesses Upon

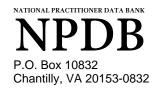
Which the Action or Claim Was Based: DR. CHOI WAS COVERING FOR A COLLEAGUE FROM NOVEMBER 16-19, 2009 AT SAINT JOSEPH MEDICAL CENTER, BURBANK. DR. CHOI WAS OB FOR DELIVERY. PATIENT'S PRIMARY OB WAS DR. RICHARD BARDWELL. THE PATIENT PRESENTED TO THE HOSPITAL WITH PREMATURE RUPTURE OF MEMBRANES AT 23 1/2 WEEKS. THE

BABY WAS BREECH. SHE BEGAN HAVING CONTRACTIONS ON 11/16/09. THE BODY DELIVERED SPONTANEOUSLY IN TO THE VAGINA BUT THE HEAD REMAINED ENTRAPPED IN THE CERVIX. THE HEAD WAS DECAPITATED DURING ATTEMPTS BY OUR MEMBER

TO DELIVER THE BABY. THE BABY WEIGHED 680 GM.

D. SUBJECT **STATEMENT**

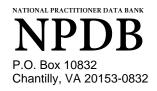
If the subject identified in Section B of this report has submitted a statement, it appears in this section.



DCN: 5500000071235315 Process Date: 10/19/2011

Page: 3 of 3 CHOI, JOON

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.		
	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: 10/19/2011		
	Date of Most Recent Change: 10/19/2011		
F. SUPPLEMENTAL SUBJECT INFORMATION ON FILE WITH DATA BANK	The following information was not provided by the reporting entity identified in Section A of this report. The information was submitted to the Data Bank from other sources and is intended to supplement the information contained in this report.		
National Provider Identifiers (NPI): 1023073152			
This report is maintained	d under the provisions of: Title IV		
The information contained provisions of Title IV of Pu for the purpose for which i	In this report is maintained by the National Practitioner Data Bank for restricted use under the ublic Law 99-660, as amended, and 45 CFR Part 60. All information is confidential and may be used only it was disclosed. Disclosure or use of confidential information for other purposes is a violation of federal action or clarification, contact the reporting entity identified in Section A.		
	END OF REPORT		



DCN: 5500000071235315 Process Date: 10/19/2011

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CHOI, JOON

DISCLOSURE HISTORY

Report Number: 5500000071235315

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
10/27/2011	REGAL MEDICAL GROUP 8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325 (818) 654-3400
Date Released	Entity Name
01/31/2012	REGAL MEDICAL GROUP 8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325 (818) 654-3400
Date Released	Entity Name
04/27/2012	REGAL MEDICAL GROUP 8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325 (818) 654-3400
Date Released	Entity Name
05/24/2012	COMPREHENSIVE COMMUNITY HEALTH CENTER 801 S CHEVY CHASE DR STE 20 GLENDALE, CA 91205 (818) 265-2238
Date Released	Entity Name
05/30/2012	CHEVY CHASE AMBULATORY CENTER, LP 801 S CHEVY CHASE DR STE 106 GLENDALE, CA 91205

(818) 265-2275



DCN: 5500000071235315 Process Date: 10/19/2011

Page: 2 of 9

CHOI, JOON

Date Released Entity Name

07/24/2012 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

07/26/2012 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

08/27/2012 PRIVATE HEALTH CARE SYSTEMS

1100 WINTER ST

WALTHAM, MA 02451

(781) 895-5847

Date Released Entity Name

09/20/2012 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238

Date Released Entity Name

10/30/2012 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

11/14/2012 HEALTHCARE PARTNERS MEDICAL GROUP

2175 PARK PL

EL SEGUNDO, CA 90245

(310) 354-6242

Date Released Entity Name

01/22/2013 CARE1ST HEALTH PLAN

601 POTRERO GRANDE DR MONTEREY PARK, CA 91755

(323) 889-6638



DCN: 5500000071235315 Process Date: 10/19/2011

Page: 3 of 9

CHOI, JOON

Date Released Entity Name

01/31/2013 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/21/2013 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

03/14/2013 THRIFTY MANAGEMENT SERVICES

1025 N BRAND BLVD STE 100

GLENDALE, CA 91202

(818) 265-0800

Date Released Entity Name

03/29/2013 PROSPECT MEDICAL

600 CITY PKWY W STE 800 ORANGE, CA 92868

(714) 938-5266

Date Released Entity Name

04/27/2013 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

07/24/2013 PACIFICA HOSPITAL OF THE VALLEY

9449 SAN FERNANDO RD SUN VALLEY, CA 91352

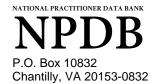
(818) 252-2231

Date Released Entity Name

07/30/2013 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400



DCN: 5500000071235315 Process Date: 10/19/2011

Page: 4 of 9

CHOI, JOON

Date Released Entity Name

10/30/2013 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

11/07/2013 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER

GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

01/17/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

01/18/2014 PACIFICA HOSPITAL OF THE VALLEY

9449 SAN FERNANDO RD SUN VALLEY, CA 91352

(818) 252-2231

Date Released Entity Name

02/10/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

03/19/2014 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

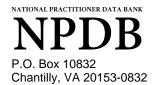
Date Released Entity Name

03/21/2014 CHEVY CHASE AMBULATORY CENTER, LP

801 S CHEVY CHASE DR STE 106

GLENDALE, CA 91205

(818) 265-2275



DCN: 5500000071235315 Process Date: 10/19/2011

Page: 5 of 9

CHOI, JOON

Date Released Entity Name

04/28/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

05/02/2014 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

07/29/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

09/03/2014 LOS ANGELES MEDICAL CENTER

2115 COMPTON AVE CORONA, CA 92881

(951) 280-7788

Date Released Entity Name

09/12/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

10/30/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

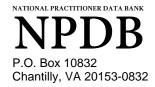
(818) 654-3400

Date Released Entity Name

01/30/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400



DCN: 5500000071235315 Process Date: 10/19/2011

Page: 6 of 9

CHOI, JOON

Date Released Entity Name

04/30/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

07/31/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

10/09/2015 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER

GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

10/21/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

01/15/2016 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/19/2016 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

05/13/2016 VALLEY PRESBYTERIAN HOSPITAL

15107 VANOWEN ST VAN NUYS, CA 91405

(818) 902-3956



DCN: 5500000071235315 Process Date: 10/19/2011

Page: 7 of 9

CHOI, JOON

Date Released Entity Name

08/03/2016 PROSPECT MEDICAL

600 CITY PKWY W STE 800 ORANGE, CA 92868

(714) 938-5266

Date Released Entity Name

11/08/2016 SEOUL MEDICAL GROUP

520 S VIRGIL AVE STE 507 LOS ANGELES, CA 90020

(213) 480-7770

Date Released Entity Name

02/08/2017 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/17/2017 SEOUL MEDICAL GROUP

520 S VIRGIL AVE STE 507 LOS ANGELES, CA 90020

(213) 480-7770

Date Released Entity Name

03/16/2017 COAST HEALTHCARE MANAGEMENT, LLC

10833 VALLEY VIEW ST STE 300 CREDENTIALING DEPARTMENT

CYPRESS, CA 90630

(562) 602-1563

Date Released Entity Name

04/06/2017 ARROYO VISTA FAMILY HEALTH CENTER

6000 N FIGUEROA ST

LOS ANGELES, CA 90042

(323) 254-5291

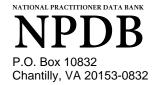
Date Released Entity Name

06/14/2017 KOREAN AMERICAN MEDICAL GROUP, INC.

PO BOX 6300

CYPRESS, CA 90630

(714) 947-8600



DCN: 5500000071235315 Process Date: 10/19/2011

Page: 8 of 9

CHOI, JOON

Date Released Entity Name

08/25/2017 PROSPECT MEDICAL

600 CITY PKWY W STE 800 ORANGE, CA 92868

(714) 938-5266

Date Released Entity Name

09/12/2017 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

10/12/2017 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER

GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

01/09/2018 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

04/14/2018 AVALON SURGERY & ROBOTIC CENTER

716 W BROADWAY STE 200 GLENDALE, CA 91204

(818) 696-0091

Date Released Entity Name

06/20/2018 HEALTHCARE PARTNERS MEDICAL GROUP

2175 PARK PL

EL SEGUNDO, CA 90245

(310) 354-6242

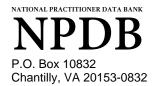
Date Released Entity Name

07/20/2018 PRIME HEALTH SERVICES, INC.

7110 CROSSROADS BLVD STE 100

BRENTWOOD, TN 37027

(615) 565-9011

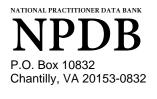


DCN: 5500000071235315 Process Date: 10/19/2011

Page: 9 of 9

CHOI, JOON

Date Released	Entity Name	
10/26/2018	SELF-QUERIER	



DCN: 5500000057637419 Process Date: 07/30/2009

Page: 1 of 3 CHOI, JOON

CHOI, JOON

MEDICAL BOARD OF CALIFORNIA

STATE LICENSURE ACTION

Initial Action

Basis for Initial Action

Date of Action: 07/27/2009

- REPRIMAND OR CENSURE

- NEGLIGENCE

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: 06-2006-175204

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 08/01/2017:

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: CHOI, JOON

Other Name(s) Used:

Gender: MALE

Date of Birth: 11/17/1961

Organization Name:

Work Address: 801 S. CHEVY CHASE DRIVE, #104

City, State, ZIP: GLENDALE, CA 91505

Organization Type: Home Address:

City, State, ZIP:

Deceased: NO

Federal Employer Identification Numbers (FEIN):

Social Security Numbers (SSN): ***-**-9433

Individual Taxpayer Identification Numbers (ITIN):

National Provider Identifiers (NPI):

Professional School(s) & Year(s) of Graduation: MEDICAL COLLEGE OF OHIO (1991)

Occupation/Field of Licensure (Code): PHYSICIAN (MD)
State License Number, State of Licensure: G 80351, CA

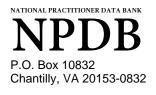
Specialty: UNSPECIFIED

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

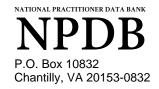
the Reported Action.):



DCN: 5500000057637419 Process Date: 07/30/2009

Page: 2 of 3 CHOI, JOON

	Business Address of Affiliate:		
	City, State, ZIP:		
	Nature of Relationship(s):		
C. INFORMATION	Type of Adverse Action:	STATE LICENSURE	
REPORTED	Basis for Action:	NEGLIGENCE (13)	
	Name of Agency or Program		
	That Took the Adverse Action	MEDICAL DOADD OF CALLEODNIA	
	Specified in This Report:	MEDICAL BOARD OF CALIFORNIA	
	Adverse Action Classification Code(s):	REPRIMAND OR CENSURE (1140)	
	Date Action Was Taken:	07/27/2009	
	Date Action Became Effective:	07/27/2009	
	Length of Action:	INDEFINITE	
	Total Amount of Monetary Penalty,		
	Assessment and/or Restitution:		
	Subject Automatically Reinstated After	VPQ	
	Adverse Action Period Is Completed?:	YES	
	ubject's Act(s) or Omission(s) or Other ken and Description of Action(s) Taken		
11000011010171011011(0) 101	by Reporting Entity:	PUBLIC REPRIMAND.	
Is the Adverse Action	Specified in This Report Based on the		
	npetence or Conduct, Which Adversely		
Affected,	or Could Have Adversely Affected, the	YES	
	Health or Welfare of Patient(s)?:	150	
	Subject identified in Section B ha	s appealed the reported adverse action.	
			
D. SUBJECT	If the cubicat identified in Castian D.a.	f this report has submitted a statement it appears in this section	
STATEMENT	ii 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 s	ubject of this report identified in Section B has not contested this report.	
	I his report has been disputed b	y the subject identified in Section B.	
	At the request of the subject ide	ntified 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.		
		ntified in Section B, this report was reviewed by the Secretary of the U.S.	
	the Secretary reconsider the ori	an Services and a decision was reached. The subject has requested that	
	the Secretary reconsider the on	giriai decision.	
		ntified in Section B, this report was reviewed by tment of Health and Human Services. The Secretary's decision	
	is shown below:	thent of fleath and fluman dervices. The decretary 3 decision	
	Date of Original Submission:	07/30/2009	
	Date of Most Recent Change:	07/30/2009	



DCN: 5500000057637419 Process Date: 07/30/2009

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CHOI, JOON

г.	SUPPLEMENTAL
	SUBJECT
	INFORMATION ON
	FILE WITH DATA
	BANK

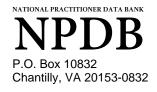
The following information was not provided by the reporting entity identified in Section A of this report. The information was submitted to the Data Bank from other sources and is intended to supplement the information contained in this report.

National Provider Identifiers (NPI): 1023073152

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.

———— END OF REPORT	



DCN: 5500000057637419 Process Date: 07/30/2009

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CHOI, JOON

DISCLOSURE HISTORY

Report Number: 5500000057637419

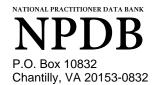
F. DISCLOSURE HISTORY

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
08/24/2009	SCAN HEALTH PLAN 3800 KILROY AIRPORT WAY STOP 620 QUALITY MANAGEMENT DEPT LONG BEACH, CA 90806 (562) 637-1219
Date Released	Entity Name
09/21/2009	CAREMORE HEALTH PLAN 12900 PARK PLAZA DR SUITE 150 MS-7110 CERRITOS, CA 90703 (562) 977-4602
Date Released	Entity Name
09/29/2009	ANTHEM, INC 200 BRICKSTONE SQ ANDOVER, MA 01810 (603) 541-2389
Date Released	Entity Name
10/14/2009	GLENDALE ADVENTIST MEDICAL CENTER - MEDI 1509 WILSON TER GLENDALE, CA 91206 (818) 409-8010
Date Released	Entity Name
10/30/2009	REGAL MEDICAL GROUP 8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400



DCN: 5500000057637419 Process Date: 07/30/2009

Page: 2 of 12

CHOI, JOON

Date Released Entity Name

01/11/2010 SCAN HEALTH PLAN

 $3800~{\sf KILROY}$ AIRPORT WAY STOP 620

QUALITY MANAGEMENT DEPT. -

LONG BEACH, CA 90806

(562) 637-1219

Date Released Entity Name

01/22/2010 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/22/2010 THRIFTY MANAGEMENT SERVICES

1025 N BRAND BLVD STE 100 GLENDALE, CA 91202

(818) 265-0800

Date Released Entity Name

04/01/2010 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

04/20/2010 COMMUNITY FAMILY CARE IPA

711 W. COLLEGE ST FOURTH FLOOR

LOS ANGELES, CA 90012

(213) 406-2730

Date Released Entity Name

04/26/2010 CARE1ST HEALTH PLAN

601 POTRERO GRANDE DR MONTEREY PARK, CA 91755

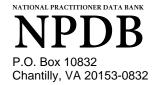
(323) 889-6638

Date Released Entity Name

04/27/2010 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400



DCN: 5500000057637419 Process Date: 07/30/2009

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CHOI, JOON

Date Released Entity Name

05/05/2010 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238

Date Released Entity Name

07/29/2010 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

09/29/2010 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

10/30/2010 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

01/22/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

04/28/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

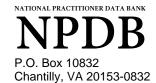
(818) 654-3400

Date Released Entity Name

06/03/2011 LOS ANGELES MEDICAL CENTER

2115 COMPTON AVE CORONA, CA 92881

(951) 280-7788



DCN: 5500000057637419 Process Date: 07/30/2009

Page: 4 of 12

CHOI, JOON

Date Released Entity Name

07/30/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

08/08/2011 HUMANA HEALTH PLANS INC

101 E MAIN ST

LOUISVILLE, KY 40202

(513) 826-7169

Date Released Entity Name

08/18/2011 FIRST HEALTH GROUP CORP.

6705 ROCKLEDGE DRIVE

SUITE 900

BETHESDA, MD 20817

(916) 374-4632

Date Released Entity Name

09/02/2011 CAREMORE HEALTH PLAN

12900 PARK PLAZA DR SUITE 150

MS-7110

CERRITOS, CA 90703

(562) 977-4602

Date Released Entity Name

10/13/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

10/14/2011 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER

GLENDALE, CA 91206

(818) 409-8010

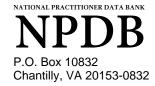
Date Released Entity Name

10/27/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150

NORTHRIDGE, CA 91325

(818) 654-3400



DCN: 5500000057637419 Process Date: 07/30/2009

Page: 5 of 12

CHOI, JOON

Date Released Entity Name

01/31/2012 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

04/27/2012 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

05/24/2012 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238

Date Released Entity Name

05/30/2012 CHEVY CHASE AMBULATORY CENTER, LP

801 S CHEVY CHASE DR STE 106

GLENDALE, CA 91205

(818) 265-2275

Date Released Entity Name

07/24/2012 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

07/26/2012 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

08/27/2012 PRIVATE HEALTH CARE SYSTEMS

1100 WINTER ST

WALTHAM, MA 02451

(781) 895-5847



DCN: 5500000057637419 Process Date: 07/30/2009

Page: 6 of 12

CHOI, JOON

Date Released Entity Name

09/20/2012 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238

Date Released Entity Name

10/30/2012 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

11/14/2012 HEALTHCARE PARTNERS MEDICAL GROUP

2175 PARK PL

EL SEGUNDO, CA 90245

(310) 354-6242

Date Released Entity Name

01/22/2013 CARE1ST HEALTH PLAN

601 POTRERO GRANDE DR MONTEREY PARK, CA 91755

(323) 889-6638

Date Released Entity Name

01/31/2013 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/21/2013 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

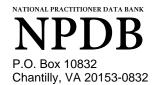
Date Released Entity Name

03/14/2013 THRIFTY MANAGEMENT SERVICES

1025 N BRAND BLVD STE 100

GLENDALE, CA 91202

(818) 265-0800



DCN: 5500000057637419 Process Date: 07/30/2009

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CHOI, JOON

Date Released Entity Name

03/29/2013 PROSPECT MEDICAL

600 CITY PKWY W STE 800 ORANGE, CA 92868

(714) 938-5266

Date Released Entity Name

04/27/2013 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

07/24/2013 PACIFICA HOSPITAL OF THE VALLEY

9449 SAN FERNANDO RD SUN VALLEY, CA 91352

(818) 252-2231

Date Released Entity Name

07/30/2013 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

10/30/2013 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

11/07/2013 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER

GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

01/17/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400



DCN: 5500000057637419 Process Date: 07/30/2009

Page: 8 of 12

CHOI, JOON

Date Released Entity Name

01/18/2014 PACIFICA HOSPITAL OF THE VALLEY

9449 SAN FERNANDO RD SUN VALLEY, CA 91352

(818) 252-2231

Date Released Entity Name

02/10/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

03/19/2014 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

03/21/2014 CHEVY CHASE AMBULATORY CENTER, LP

801 S CHEVY CHASE DR STE 106

GLENDALE, CA 91205

(818) 265-2275

Date Released Entity Name

04/28/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

05/02/2014 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

07/29/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400



DCN: 5500000057637419 Process Date: 07/30/2009

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CHOI, JOON

Date Released	Entity Name

09/03/2014 LOS ANGELES MEDICAL CENTER

2115 COMPTON AVE CORONA, CA 92881

(951) 280-7788

Date Released Entity Name

09/12/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

10/30/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

01/30/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

04/30/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

07/31/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

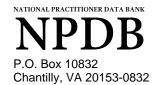
(818) 654-3400

Date Released Entity Name

10/09/2015 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER GLENDALE, CA 91206

(818) 409-8010



DCN: 5500000057637419 Process Date: 07/30/2009

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CHOI, JOON

Date Released Entity Name

10/21/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

01/15/2016 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/19/2016 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

05/13/2016 VALLEY PRESBYTERIAN HOSPITAL

15107 VANOWEN ST VAN NUYS, CA 91405

(818) 902-3956

Date Released Entity Name

08/03/2016 PROSPECT MEDICAL

600 CITY PKWY W STE 800 ORANGE, CA 92868

(714) 938-5266

Date Released Entity Name

11/08/2016 SEOUL MEDICAL GROUP

520 S VIRGIL AVE STE 507 LOS ANGELES, CA 90020

(213) 480-7770

Date Released Entity Name

02/08/2017 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400



DCN: 5500000057637419 Process Date: 07/30/2009

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CHOI, JOON

Date Released Entity Name

02/17/2017 SEOUL MEDICAL GROUP

520 S VIRGIL AVE STE 507 LOS ANGELES, CA 90020

(213) 480-7770

Date Released Entity Name

03/16/2017 COAST HEALTHCARE MANAGEMENT, LLC

10833 VALLEY VIEW ST STE 300 CREDENTIALING DEPARTMENT

CYPRESS, CA 90630

(562) 602-1563

Date Released Entity Name

04/06/2017 ARROYO VISTA FAMILY HEALTH CENTER

6000 N FIGUEROA ST LOS ANGELES, CA 90042

(323) 254-5291

Date Released Entity Name

06/14/2017 KOREAN AMERICAN MEDICAL GROUP, INC.

PO BOX 6300

CYPRESS, CA 90630

(714) 947-8600

Date Released Entity Name

08/25/2017 PROSPECT MEDICAL

600 CITY PKWY W STE 800 ORANGE, CA 92868

(714) 938-5266

Date Released Entity Name

09/12/2017 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

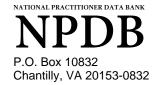
(818) 654-3400

Date Released Entity Name

10/12/2017 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER GLENDALE, CA 91206

(818) 409-8010



Date Released

10/26/2018

DCN: 5500000057637419 Process Date: 07/30/2009

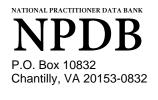
Page: 12 of 12

CHOI, JOON

Date Released	Entity Name	
01/09/2018	PROVIDENCE ST. JOSEPH MEDICAL CENTER 501 S BUENA VISTA ST BURBANK, CA 91505 (818) 847-3930	
Date Released	Entity Name	
04/14/2018	AVALON SURGERY & ROBOTIC CENTER 716 W BROADWAY STE 200 GLENDALE, CA 91204 (818) 696-0091	
Date Released	Entity Name	
06/20/2018	HEALTHCARE PARTNERS MEDICAL GROUP 2175 PARK PL EL SEGUNDO, CA 90245 (310) 354-6242	
Date Released	Entity Name	
07/20/2018	PRIME HEALTH SERVICES, INC. 7110 CROSSROADS BLVD STE 100 BRENTWOOD, TN 37027 (615) 565-9011	

Entity Name

SELF-QUERIER



DCN: 5500000038525619 **Process Date:** 08/03/2005

Page: 1 of 3 CHOI, JOON

CHOI, JOON

MUTUAL PROTECTION TRUST

MEDICAL MALPRACTICE PAYMENT REPORT Date of Action: 07/26/2005

Initial Action

Basis for Initial Action

- SETTLEMENT

- FAILURE TO DIAGNOSE

A. REPORTING ENTITY

Entity Name: MUTUAL PROTECTION TRUST *

Address: 333 SOUTH HOPE STREET, 8TH FLOOR

City, State, Zip: LOS ANGELES, CA 90071-1409

Country:

Name or Office: SUZANNE PARK
Title or Department: CLAIMS SERVICES

Telephone: (213) 473-8631

Entity Internal Report Reference: 01-0327

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 04/16/2018:

Entity Name: MUTUAL PROTECTION TRUST

Address: 333 S HOPE ST FL 8

City, State, Zip: LOS ANGELES, CA 90071-3001

Country:

B. SUBJECT
IDENTIFICATION
INFORMATION
(INDIVIDUAL)

Subject Name: CHOI, JOON

Other Name(s) Used:

Gender: MALE

Date of Birth: 11/17/1961

Organization Name:

Work Address: 801 S. CHEVY CHASE, #104

City, State, ZIP: GLENDALE, CA 91204

Home Address:

City, State, ZIP:

Deceased: NO

Social Security Numbers (SSN):

National Provider Identifiers (NPI):

Professional School(s) & Year(s) of Graduation: MEDICAL COLLEGE OF OHIO (1991)

Occupation/Field of Licensure (Code): PHYSICIAN (MD) State License Number, State of Licensure: G80351, CA

Drug Enforcement Administration (DEA) Numbers:

Hospital Affiliation(s):

C. INFORMATION REPORTED

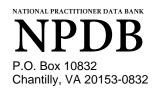
Date of Report: 08/03/2005

Relationship of Entity to

This Practitioner: SELF-INSURED ORGANIZATION
PAYMENTS BY THIS PAYER FOR THIS PRACTITIONER

Amount of This Payment

for This Practitioner: \$ 243,750.00 Date of This Payment: 07/26/2005



DCN: 5500000038525619 Process Date: 08/03/2005

Page: 2 of 3 CHOI, JOON

This Payment Represents: A SINGLE FINAL PAYMENT

Total Amount Paid or to Be Paid by

This Payer for This Practitioner: \$ 243,750.00 Payment Result of: SETTLEMENT

Date of Judgment or Settlement, if Any: 06/30/2005

Adjudicative Body Case Number:

Adjudicative Body Name: ARBITRATION Court File Number: EC032131

Description of Judgment or Settlement and Any

Conditions, Including Terms of Payment: A SINGLE PAYMEN TOF \$243,750 IN FULL SATISFACTION OF ALL

CLAIMS.

PAYMENTS BY THIS PAYER FOR OTHER PRACTITIONERS IN THIS CASE

Total Amount Paid or to Be Paid by This Payer for All

Practitioners in This Case: \$ 325,000.00

Number of Practitioners for Whom This Payer Has Paid

or Will Pay in This Case: 2

PAYMENTS BY OTHERS FOR THIS PRACTITIONER

Has a State Guaranty Fund or State Excess Judgment Fund Made a Payment for This Practitioner in This Case, or Is Such a

Payment Expected to Be Made?: NO

Amount Paid or Expected to Be Paid by the State Fund:

Has a Self-Insured Organization and/or Other Insurance

Company/Companies Made Payment(s) for This Practitioner in

This Case, or Is/Are Such Payment(s) Expected to Be Made?:

Amount Paid or Expected to Be Paid by Self-Insured

Organization(s) and/or Other Insurance Company/Companies:

CLASSIFICATION OF ACT(S) OR OMISSION(S)

Patient's Age at Time of Initial Event: 39 YEARS

Patient's Gender: FEMALE

Patient's Type: OUTPATIENT

Description of the Medical Condition With Which the Patient

Presented for Treatment: BREAST LUMP

Description of the Procedure Performed: MAMMOGRAM

Nature of Allegation: DIAGNOSIS RELATED (001) Specific Allegation: FAILURE TO DIAGNOSE (101)

Date of Event Associated With Allegation or Incident: 03/05/1999

Outcome: MAJOR PERMANENT INJURY (07)

Description of the Allegations and Injuries or Illnesses Upon

Which the Action or Claim Was Based: A 39-YEAR-OLD FEMALE COMPLAINING OF A BREAST LUMP

UNDERWENT A SCREENING MAMMOGRAM THAT WAS NEGATIVE AND

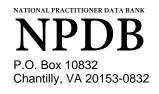
RECOMMENDED CLINICAL FOLLOW UP FOR THE LUMP.

SUBSEQUENTLY SHE WAS DIAGNOSED WITH BREAST CANCER. SHE ALLEGED THAT A DIAGNOSTIC MAMMOGRAM SHOULD HAVE BEEN ORDERED AND THAT THERE SHOULD HAVE BEEN CLINICAL FOLLOW-

UP.

D. SUBJECT **STATEMENT**

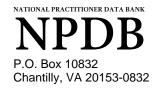
If the subject identified in Section B of this report has submitted a statement, it appears in this section.



DCN: 5500000038525619 Process Date: 08/03/2005

Page: 3 of 3 CHOI, JOON

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.			
	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: 08/03/2005			
	Date of Most Recent Change: 08/03/2005			
F. SUPPLEMENTAL SUBJECT INFORMATION ON FILE WITH DATA BANK	The following information was not provided by the reporting entity identified in Section A of this report. The information was submitted to the Data Bank from other sources and is intended to supplement the information contained in this report.			
National Provider Identifiers (NPI): 1023073152				
This report is maintained	d under the provisions of: Title IV			
The information contained provisions of Title IV of Pu for the purpose for which i	In this report is maintained by the National Practitioner Data Bank for restricted use under the ablic Law 99-660, as amended, and 45 CFR Part 60. All information is confidential and may be used only it was disclosed. Disclosure or use of confidential information for other purposes is a violation of federal action or clarification, contact the reporting entity identified in Section A.			
——————————————————————————————————————				



DCN: 5500000038525619 Process Date: 08/03/2005

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CHOI, JOON

DISCLOSURE HISTORY

Report Number: 5500000038525619

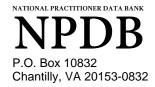
F. DISCLOSURE HISTORY

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
09/29/2005	GLENDALE ADVENTIST MEDICAL CENTER - MEDI 1509 WILSON TER GLENDALE, CA 91206 (818) 409-8010
Date Released	Entity Name
10/04/2005	ARCADIAN MANAGEMENT SERVICES 955 OVERLAND COURT SAN DIMAS, CA 91773 (909) 971-6922
Date Released	Entity Name
10/28/2005	REGAL MEDICAL GROUP 8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325 (818) 654-3400
Date Released	Entity Name
12/18/2005	COMPREHENSIVE COMMUNITY HEALTH CENTERS 801 S CHEVY CHASE DR STE 20 GLENDALE, CA 91205 (818) 265-2238
Date Released	Entity Name
12/29/2005	LAKESIDE MEDICAL GROUP 777 A FLOWER STREET GLENDALE, CA 91201

(818) 637-2000



DCN: 5500000038525619 Process Date: 08/03/2005

Page: 2 of 17

CHOI, JOON

Date Released Entity Name

01/26/2006 CHEVY CHASE AMBULATORY CENTER, LP

801 S CHEVY CHASE DR STE 106

GLENDALE, CA 91205

(818) 265-2275

Date Released Entity Name

06/27/2006 MULTIPLAN, INC

115 FIFTH AVENUE, 7TH FLOOR

NEW YORK, NY 10003

(212) 780-2477

Date Released Entity Name

03/06/2007 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

07/31/2007 CARE1ST HEALTH PLAN

601 POTRERO GRANDE DR MONTEREY PARK, CA 91755

(323) 889-6638

Date Released Entity Name

09/28/2007 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER

GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

11/30/2007 PRIVATE HEALTH CARE SYSTEMS

1100 WINTER ST

WALTHAM, MA 02451

(781) 895-5847

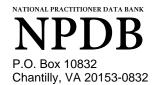
Date Released Entity Name

02/27/2008 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238



DCN: 5500000038525619 Process Date: 08/03/2005

Page: 3 of 17

CHOI, JOON

Date Released Entity Name

03/12/2008 HUMANA HEALTH PLANS INC

101 E MAIN ST

LOUISVILLE, KY 40202

(513) 826-7169

Date Released Entity Name

04/16/2008 LAKESIDE MEDICAL GROUP

777 A FLOWER STREET GLENDALE, CA 91201

(818) 637-2000

Date Released Entity Name

04/21/2008 HEALTH NET

21281 BURBANK BLVD

WOODLAND HILLS, CA 91367

(818) 676-5566

Date Released Entity Name

06/12/2008 GLENDALE PHYSICIANS ALLIANCE

5000 AIRPORT PLAZA DR

SUITE 150

LONG BEACH, CA 90815

(818) 459-6190

Date Released Entity Name

09/10/2008 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

09/12/2008 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238

Date Released Entity Name

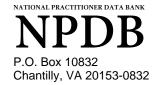
10/21/2008 CAREMORE HEALTH PLAN

12900 PARK PLAZA DR SUITE 150

MS-7110

CERRITOS, CA 90703

(562) 977-4602



DCN: 5500000038525619 Process Date: 08/03/2005

Page: 4 of 17

CHOI, JOON

Date Released Entity Name

10/29/2008 GLENDALE OUTPATIENT SURGERY CENTER

716 W BROADWAY GLENDALE, CA 91204

(818) 244-8200

Date Released Entity Name

12/01/2008 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

01/16/2009 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/09/2009 ASSOCIATED HISPANIC PHYSICIANS OF SO. CA

880 S ATLANTIC BLVD STE 201 MONTEREY PARK, CA 91754

(626) 457-5579

Date Released Entity Name

02/10/2009 ACCESS IPA

880 S ATLANTIC BLVD STE 201 MONTEREY PARK, CA 91754

(626) 457-5579

Date Released Entity Name

02/24/2009 CHEVY CHASE AMBULATORY CENTER, LP

801 S CHEVY CHASE DR STE 106

GLENDALE, CA 91205

(818) 265-2275

Date Released Entity Name

03/10/2009 LAKESIDE MEDICAL GROUP

777 A FLOWER STREET GLENDALE, CA 91201

(818) 637-2000



DCN: 5500000038525619 Process Date: 08/03/2005

Page: 5 of 17

CHOI, JOON

Date Released Entity Name

04/06/2009 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

04/19/2009 BEECH STREET CORPORATION

6116 SHALLOWFORD RD STE 109B

CHATTANOOGA, TN 37421

(423) 553-6512

Date Released Entity Name

05/12/2009 LAKESIDE MEDICAL GROUP

777 A FLOWER STREET GLENDALE, CA 91201

(818) 637-2000

Date Released Entity Name

07/07/2009 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

07/28/2009 LAKESIDE MEDICAL GROUP

777 A FLOWER STREET GLENDALE, CA 91201

(818) 637-2000

Date Released Entity Name

08/24/2009 SCAN HEALTH PLAN

3800 KILROY AIRPORT WAY STOP 620

QUALITY MANAGEMENT DEPT. -

LONG BEACH, CA 90806

(562) 637-1219

Date Released Entity Name

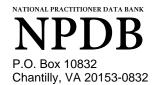
09/21/2009 CAREMORE HEALTH PLAN

12900 PARK PLAZA DR SUITE 150

MS-7110

CERRITOS, CA 90703

(562) 977-4602



DCN: 5500000038525619 Process Date: 08/03/2005

Page: 6 of 17

CHOI, JOON

Date Released Entity Name

09/29/2009 ANTHEM, INC

200 BRICKSTONE SQ ANDOVER, MA 01810

(603) 541-2389

Date Released Entity Name

10/14/2009 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER GLENDALE, CA 9120

(818) 409-8010

Date Released Entity Name

10/30/2009 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

01/11/2010 SCAN HEALTH PLAN

3800 KILROY AIRPORT WAY STOP 620

QUALITY MANAGEMENT DEPT. -LONG BEACH, CA 90806

(562) 637-1219

Date Released Entity Name

01/22/2010 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/22/2010 THRIFTY MANAGEMENT SERVICES

1025 N BRAND BLVD STE 100

GLENDALE, CA 91202

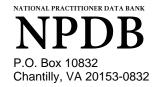
(818) 265-0800

Date Released Entity Name

04/01/2010 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930



DCN: 5500000038525619 Process Date: 08/03/2005

Page: 7 of 17

CHOI, JOON

Entity Name

04/20/2010 COMMUNITY FAMILY CARE IPA

711 W. COLLEGE ST FOURTH FLOOR

LOS ANGELES, CA 90012

(213) 406-2730

Date Released Entity Name

04/26/2010 CARE1ST HEALTH PLAN

601 POTRERO GRANDE DR MONTEREY PARK, CA 91755

(323) 889-6638

Date Released Entity Name

04/27/2010 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

05/05/2010 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238

Date Released Entity Name

07/29/2010 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

09/29/2010 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

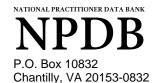
(818) 847-3930

Date Released Entity Name

10/30/2010 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400



DCN: 5500000038525619 Process Date: 08/03/2005

Page: 8 of 17

CHOI, JOON

Date Released Entity Name

01/22/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

04/28/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

06/03/2011 LOS ANGELES MEDICAL CENTER

2115 COMPTON AVE CORONA, CA 92881

(951) 280-7788

Date Released Entity Name

07/30/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

08/08/2011 HUMANA HEALTH PLANS INC

101 E MAIN ST

LOUISVILLE, KY 40202

(513) 826-7169

Date Released Entity Name

08/18/2011 FIRST HEALTH GROUP CORP.

6705 ROCKLEDGE DRIVE

SUITE 900

BETHESDA, MD 20817

(916) 374-4632

Date Released Entity Name

09/02/2011 CAREMORE HEALTH PLAN

12900 PARK PLAZA DR SUITE 150

MS-7110

CERRITOS, CA 90703

(562) 977-4602



DCN: 5500000038525619 Process Date: 08/03/2005

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CHOI, JOON

Date Released Entity Name

10/13/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

10/14/2011 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER GLENDALE, CA 912

(818) 409-8010

Date Released Entity Name

10/27/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

01/31/2012 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

04/27/2012 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

05/24/2012 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238

Date Released Entity Name

05/30/2012 CHEVY CHASE AMBULATORY CENTER, LP

801 S CHEVY CHASE DR STE 106

GLENDALE, CA 91205

(818) 265-2275



DCN: 5500000038525619 Process Date: 08/03/2005

Page: 10 of 17

CHOI, JOON

Date Released Entity Name

07/24/2012 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

07/26/2012 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

08/27/2012 PRIVATE HEALTH CARE SYSTEMS

1100 WINTER ST

WALTHAM, MA 02451

(781) 895-5847

Date Released Entity Name

09/20/2012 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238

Date Released Entity Name

10/30/2012 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

11/14/2012 HEALTHCARE PARTNERS MEDICAL GROUP

2175 PARK PL

EL SEGUNDO, CA 90245

(310) 354-6242

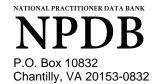
Date Released Entity Name

01/22/2013 CARE1ST HEALTH PLAN

601 POTRERO GRANDE DR MONTEREY PARK, CA 91755

(---)

(323) 889-6638



DCN: 5500000038525619 Process Date: 08/03/2005

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CHOI, JOON

Date Released Entity Name

01/31/2013 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/21/2013 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

03/14/2013 THRIFTY MANAGEMENT SERVICES

1025 N BRAND BLVD STE 100

GLENDALE, CA 91202

(818) 265-0800

Date Released Entity Name

03/29/2013 PROSPECT MEDICAL

600 CITY PKWY W STE 800 ORANGE, CA 92868

(714) 938-5266

Date Released Entity Name

04/27/2013 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

07/24/2013 PACIFICA HOSPITAL OF THE VALLEY

9449 SAN FERNANDO RD SUN VALLEY, CA 91352

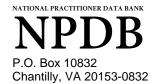
(818) 252-2231

Date Released Entity Name

07/30/2013 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400



DCN: 5500000038525619 Process Date: 08/03/2005

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CHOI, JOON

Date Released Entity Name

10/30/2013 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

11/07/2013 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER GLENDALE, CA 9120

(818) 409-8010

Date Released Entity Name

01/17/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

01/18/2014 PACIFICA HOSPITAL OF THE VALLEY

9449 SAN FERNANDO RD SUN VALLEY, CA 91352

(818) 252-2231

Date Released Entity Name

02/10/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

03/19/2014 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

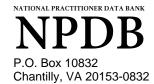
Date Released Entity Name

03/21/2014 CHEVY CHASE AMBULATORY CENTER, LP

801 S CHEVY CHASE DR STE 106

GLENDALE, CA 91205

(818) 265-2275



DCN: 5500000038525619 Process Date: 08/03/2005

Page: 13 of 17

CHOI, JOON

Date Released Entity Name

04/28/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

05/02/2014 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

07/29/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

09/03/2014 LOS ANGELES MEDICAL CENTER

2115 COMPTON AVE CORONA, CA 92881

(951) 280-7788

Date Released Entity Name

09/12/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

10/30/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

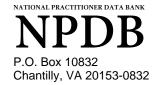
(818) 654-3400

Date Released Entity Name

01/30/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400



DCN: 5500000038525619 Process Date: 08/03/2005

Page: 14 of 17

CHOI, JOON

Date Released Entity Name

04/30/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

07/31/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

10/09/2015 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER

GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

10/21/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

01/15/2016 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/19/2016 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

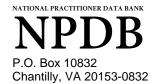
(818) 847-3930

Date Released Entity Name

05/13/2016 VALLEY PRESBYTERIAN HOSPITAL

15107 VANOWEN ST VAN NUYS, CA 91405

(818) 902-3956



DCN: 5500000038525619 Process Date: 08/03/2005

Page: 15 of 17

CHOI, JOON

Date Released Entity Name

08/03/2016 PROSPECT MEDICAL

600 CITY PKWY W STE 800 ORANGE, CA 92868

(714) 938-5266

Date Released Entity Name

11/08/2016 SEOUL MEDICAL GROUP

520 S VIRGIL AVE STE 507 LOS ANGELES, CA 90020

(213) 480-7770

Date Released Entity Name

02/08/2017 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/17/2017 SEOUL MEDICAL GROUP

520 S VIRGIL AVE STE 507 LOS ANGELES, CA 90020

(213) 480-7770

Date Released Entity Name

03/16/2017 COAST HEALTHCARE MANAGEMENT, LLC

10833 VALLEY VIEW ST STE 300 CREDENTIALING DEPARTMENT

CYPRESS, CA 90630

(562) 602-1563

Date Released Entity Name

04/06/2017 ARROYO VISTA FAMILY HEALTH CENTER

6000 N FIGUEROA ST

LOS ANGELES, CA 90042

(323) 254-5291

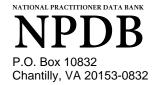
Date Released Entity Name

06/14/2017 KOREAN AMERICAN MEDICAL GROUP, INC.

PO BOX 6300

CYPRESS, CA 90630

(714) 947-8600



DCN: 5500000038525619 Process Date: 08/03/2005

Page: 16 of 17

CHOI, JOON

Date Released Entity Name

08/25/2017 PROSPECT MEDICAL

600 CITY PKWY W STE 800 ORANGE, CA 92868

(714) 938-5266

Date Released Entity Name

09/12/2017 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

10/12/2017 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER

GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

01/09/2018 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

04/14/2018 AVALON SURGERY & ROBOTIC CENTER

716 W BROADWAY STE 200 GLENDALE, CA 91204

(818) 696-0091

Date Released Entity Name

06/20/2018 HEALTHCARE PARTNERS MEDICAL GROUP

2175 PARK PL

EL SEGUNDO, CA 90245

(310) 354-6242

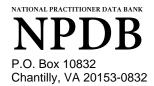
Date Released Entity Name

07/20/2018 PRIME HEALTH SERVICES, INC.

7110 CROSSROADS BLVD STE 100

BRENTWOOD, TN 37027

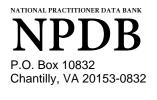
(615) 565-9011



DCN: 5500000038525619 Process Date: 08/03/2005

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CHOI, JOON



DCN: 5500000026788267 Process Date: 08/12/2002

Page: 1 of 3 CHOI, JOON

CHOI, JOON

MUTUAL PROTECTION TRUST

MEDICAL MALPRACTICE PAYMENT REPORT **Date of Action:** 07/31/2002

Initial Action

Basis for Initial Action

- SETTLEMENT - TREATMNT: FAILURE TO OBTAIN CONSENT/LACK OF

INFORMED CONSENT

- TREATMENT: NOT OTHERWISE CLASSIFIED

A. REPORTING **ENTITY**

Entity Name: MUTUAL PROTECTION TRUST *

Address: 333 SOUTH HOPE STREET, 8TH FLOOR

City, State, Zip: LOS ANGELES, CA 90071-1409

Country:

Name or Office: SUZANNE PARK Title or Department: CLAIMS SERVICES

Telephone: (213) 473-8631

Entity Internal Report Reference:

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 04/16/2018:

Entity Name: MUTUAL PROTECTION TRUST

Address: 333 S HOPE ST FL 8

City, State, Zip: LOS ANGELES, CA 90071-3001

Country:

B. SUBJECT IDENTIFICATION INFORMATION (INDIVIDUAL)

Subject Name: CHOI, JOON

Other Name(s) Used:

Gender: MALE

Date of Birth: 11/17/1961

Organization Name:

Work Address: 801 S. CHEVY CHASE DR., #104

City, State, ZIP: GLENDALE, CA 91205

Home Address: City, State, ZIP:

Deceased: NO

Social Security Numbers (SSN):

Professional School(s) & Year(s) of Graduation: MEDICAL COLLEGE OHIO (1991)

Occupation/Field of Licensure (Code): PHYSICIAN (MD) State License Number, State of Licensure: G080351, CA

Drug Enforcement Administration (DEA) Numbers:

Hospital Affiliation(s):

C. INFORMATION REPORTED

Date of Report: 08/12/2002

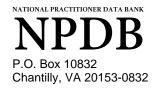
Act/Omission Code: TREATMNT: FAILURE TO OBTAIN CONSENT/LACK OF INFORMED

CONSENT (680)

Date of Act/Omission: 04/07/2000

Act/Omission Code: TREATMENT: NOT OTHERWISE CLASSIFIED (690)

Date of Act/Omission: 04/07/2000



DCN: 5500000026788267 Process Date: 08/12/2002

Page: 2 of 3 CHOI, JOON

Payment Date: 07/31/2002

Multiple or Single Payment: SINGLE

Amount of This Payment: \$ 45,000.00 Total Amount of Judgment or Settlement: \$ 45,000.00

Number of Practitioners for Whom Payment is Made: 1

Relationship of Entity to the Practitioner: SELF INSURED ORGANIZATION

Payment Result of: SETTLEMENT

Date of Judgment/Settlement: Adjudicative Case Number: Adjudicative Body Name:

Court File Number:

Reporter's Description of Act or Omission: PHYSICIAN PERFORMED TOTAL ABDOMINAL HYSTERECTOMY AND

PATIENT DEVELOPED A VESICOVAGINAL FISTULA, WHICH IS A KNOWN COMPLICATION OF THIS PROCEDURE AND CAN OCCUR IN

THE ABSENCE OF NEGLIGENCE.

Reporter's Description of the Judgment or Settlement: \$45,000 SETTLED ON BEHALF OF JOON CHOI, M.D. AS FULL AND

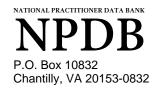
FINAL SETTLEMENT OF ALL CLAIMS.

D. SUBJECT STATEMENT	If the subject identified in Section B	of this report has submitted a statement, it appears in this section.
E. REPORT STATUS	This report has been disputed to the subject ide U.S. Department of Health and reporting requirements. No de At the request of the subject ide Department of Health and Hum the Secretary reconsider the or	entified in Section B, this report was reviewed by the Secretary of the U.S. an Services and a decision was reached. The subject has requested that
	Date of Original Submission: Date of Most Recent Change:	08/12/2002 08/12/2002

F. SUPPLEMENTAL SUBJECT INFORMATION ON FILE WITH DATA BANK

The following information was not provided by the reporting entity identified in Section A of this report. The information was submitted to the Data Bank from other sources and is intended to supplement the information contained in this report.

National Provider Identifiers (NPI): 1023073152



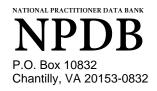
DCN: 5500000026788267 Process Date: 08/12/2002

Page: 3 of 3 CHOI, JOON

This report is maintained under the provisions of: Title IV

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, 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 _____



DCN: 5500000026788267 Process Date: 08/12/2002

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CHOI, JOON

DISCLOSURE HISTORY

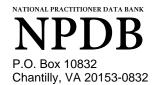
Report Number: 5500000026788267

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.

Ğ	
Date Released	Entity Name
08/20/2002	PACIFICA HOSPITAL OF THE VALLEY 9449 SAN FERNANDO RD SUN VALLEY, CA 91352 (818) 252-2231
Date Released	Entity Name
10/11/2002	VERDUGO HILLS HOSPITAL 1812 VERDUGO BLVD GLENDALE, CA 91208 (818) 952-4647
Date Released	Entity Name
10/16/2002	ARCADIAN MANAGEMENT SERVICES 955 OVERLAND COURT SAN DIMAS, CA 91773 (909) 971-6922
Date Released	Entity Name
11/20/2002	PROVIDENCE ST. JOSEPH MEDICAL CENTER 501 S BUENA VISTA ST BURBANK, CA 91505 (818) 847-3930
Date Released	Entity Name
11/22/2002	HARVARD HEALTH CARE MEDICAL ASSOCIATES, 5855 GREEN VALLEY CIRCLE, SUITE 105 & 107 CULVER CITY, CA 90231 31064 170-00



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CHOI, JOON

Date Released Entity Name

12/10/2002 CENTRAL HEALTH MSO

1540 BRIDGEGATE DR DIAMOND BAR, CA 91765

(626) 388-2390

Date Released Entity Name

12/17/2002 LAKESIDE MEDICAL GROUP

777 A FLOWER STREET GLENDALE, CA 91201

(818) 637-2000

Date Released Entity Name

03/14/2003 GLENDALE MEMORIAL HOSPITAL

1420 S CENTRAL AVE GLENDALE, CA 91204

(818) 502-2317

Date Released Entity Name

04/07/2003 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

10/14/2003 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER

GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

10/11/2004 CARE1ST HEALTH PLAN

601 POTRERO GRANDE DR MONTEREY PARK, CA 91755

(323) 889-6638

Date Released Entity Name

02/16/2005 PRIVATE HEALTH CARE SYSTEMS

1100 WINTER ST

WALTHAM, MA 02451

(781) 895-5847



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CHOI, JOON

Date Released Entity Name

04/08/2005 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

05/12/2005 HUMANA HEALTH PLAN

5401 WEST KENNEDY BLVD

SUITE 161

TAMPA, FL 33609 (813) 287-6275

Date Released Entity Name

09/29/2005 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

10/04/2005 ARCADIAN MANAGEMENT SERVICES

955 OVERLAND COURT SAN DIMAS, CA 91773

(909) 971-6922

Date Released Entity Name

10/28/2005 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

12/18/2005 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238

Date Released Entity Name

12/29/2005 LAKESIDE MEDICAL GROUP

777 A FLOWER STREET GLENDALE, CA 91201

(818) 637-2000



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CHOI, JOON

Date Released Entity Name

01/26/2006 CHEVY CHASE AMBULATORY CENTER, LP

801 S CHEVY CHASE DR STE 106

GLENDALE, CA 91205

(818) 265-2275

Date Released Entity Name

06/27/2006 MULTIPLAN, INC

115 FIFTH AVENUE, 7TH FLOOR

NEW YORK, NY 10003

(212) 780-2477

Date Released Entity Name

03/06/2007 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

07/31/2007 CARE1ST HEALTH PLAN

601 POTRERO GRANDE DR MONTEREY PARK, CA 91755

(323) 889-6638

Date Released Entity Name

09/28/2007 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER

GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

11/30/2007 PRIVATE HEALTH CARE SYSTEMS

1100 WINTER ST

WALTHAM, MA 02451

(781) 895-5847

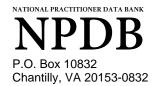
Date Released Entity Name

02/27/2008 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238



DCN: 5500000026788267 Process Date: 08/12/2002

Page: 5 **of** 19

CHOI, JOON

Date Released Entity Name

03/12/2008 HUMANA HEALTH PLANS INC

101 E MAIN ST

LOUISVILLE, KY 40202

(513) 826-7169

Date Released Entity Name

04/16/2008 LAKESIDE MEDICAL GROUP

777 A FLOWER STREET GLENDALE, CA 91201

(818) 637-2000

Date Released Entity Name

04/21/2008 HEALTH NET

21281 BURBANK BLVD

WOODLAND HILLS, CA 91367

(818) 676-5566

Date Released Entity Name

06/12/2008 GLENDALE PHYSICIANS ALLIANCE

5000 AIRPORT PLAZA DR

SUITE 150

LONG BEACH, CA 90815

(818) 459-6190

Date Released Entity Name

09/10/2008 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

09/12/2008 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238

Date Released Entity Name

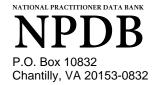
10/21/2008 CAREMORE HEALTH PLAN

12900 PARK PLAZA DR SUITE 150

MS-7110

CERRITOS, CA 90703

(562) 977-4602



DCN: 5500000026788267 Process Date: 08/12/2002

Page: 6 **of** 19

CHOI, JOON

Date Released Entity Name

10/29/2008 GLENDALE OUTPATIENT SURGERY CENTER

716 W BROADWAY

GLENDALE, CA 91204

(818) 244-8200

Date Released Entity Name

12/01/2008 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

01/16/2009 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/09/2009 ASSOCIATED HISPANIC PHYSICIANS OF SO. CA

880 S ATLANTIC BLVD STE 201 MONTEREY PARK, CA 91754

(626) 457-5579

Date Released Entity Name

02/10/2009 ACCESS IPA

880 S ATLANTIC BLVD STE 201 MONTEREY PARK, CA 91754

(626) 457-5579

Date Released Entity Name

02/24/2009 CHEVY CHASE AMBULATORY CENTER, LP

801 S CHEVY CHASE DR STE 106

GLENDALE, CA 91205

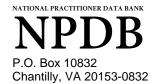
(818) 265-2275

Date Released Entity Name

03/10/2009 LAKESIDE MEDICAL GROUP

777 A FLOWER STREET GLENDALE, CA 91201

(818) 637-2000



DCN: 5500000026788267 Process Date: 08/12/2002

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CHOI, JOON

Date Released Entity Name

04/06/2009 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

04/19/2009 BEECH STREET CORPORATION

6116 SHALLOWFORD RD STE 109B

CHATTANOOGA, TN 37421

(423) 553-6512

Date Released Entity Name

05/12/2009 LAKESIDE MEDICAL GROUP

777 A FLOWER STREET GLENDALE, CA 91201

(818) 637-2000

Date Released Entity Name

07/07/2009 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

07/28/2009 LAKESIDE MEDICAL GROUP

777 A FLOWER STREET GLENDALE, CA 91201

(818) 637-2000

Date Released Entity Name

08/24/2009 SCAN HEALTH PLAN

3800 KILROY AIRPORT WAY STOP 620 QUALITY MANAGEMENT DEPT. -

LONG BEACH, CA 90806

(562) 637-1219

Date Released Entity Name

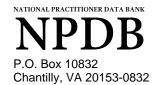
09/21/2009 CAREMORE HEALTH PLAN

12900 PARK PLAZA DR SUITE 150

MS-7110

CERRITOS, CA 90703

(562) 977-4602



DCN: 5500000026788267 Process Date: 08/12/2002

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CHOI, JOON

Date Released Entity Name

09/29/2009 ANTHEM, INC

200 BRICKSTONE SQ ANDOVER, MA 01810

(603) 541-2389

Date Released Entity Name

10/14/2009 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER

GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

10/30/2009 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

01/11/2010 SCAN HEALTH PLAN

3800 KILROY AIRPORT WAY STOP 620

QUALITY MANAGEMENT DEPT. -LONG BEACH, CA 90806

(562) 637-1219

Date Released Entity Name

01/22/2010 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/22/2010 THRIFTY MANAGEMENT SERVICES

1025 N BRAND BLVD STE 100

GLENDALE, CA 91202

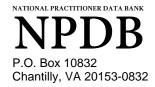
(818) 265-0800

Date Released Entity Name

04/01/2010 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930



DCN: 5500000026788267 Process Date: 08/12/2002

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CHOI, JOON

Date Released Entity Name

04/20/2010 COMMUNITY FAMILY CARE IPA

711 W. COLLEGE ST FOURTH FLOOR

LOS ANGELES, CA 90012

(213) 406-2730

Date Released Entity Name

04/26/2010 CARE1ST HEALTH PLAN

601 POTRERO GRANDE DR MONTEREY PARK, CA 91755

(323) 889-6638

Date Released Entity Name

04/27/2010 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

05/05/2010 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238

Date Released Entity Name

07/29/2010 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

09/29/2010 PROVIDENCE ST. JOSEPH MEDICAL CENTER

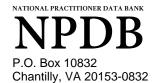
501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

10/30/2010 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325



DCN: 5500000026788267 Process Date: 08/12/2002

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CHOI, JOON

Date Released Entity Name

01/22/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

04/28/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

06/03/2011 LOS ANGELES MEDICAL CENTER

2115 COMPTON AVE CORONA, CA 92881

(951) 280-7788

Date Released Entity Name

07/30/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

08/08/2011 HUMANA HEALTH PLANS INC

101 E MAIN ST

LOUISVILLE, KY 40202

(513) 826-7169

Date Released Entity Name

08/18/2011 FIRST HEALTH GROUP CORP.

6705 ROCKLEDGE DRIVE

SUITE 900

BETHESDA, MD 20817

(916) 374-4632

Date Released Entity Name

09/02/2011 CAREMORE HEALTH PLAN

12900 PARK PLAZA DR SUITE 150

MS-7110

CERRITOS, CA 90703

(562) 977-4602



DCN: 5500000026788267 Process Date: 08/12/2002

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CHOI, JOON

Date Released Entity Name

10/13/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

10/14/2011 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER

GLENDALE, CA 9120

(818) 409-8010

Date Released Entity Name

10/27/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

01/31/2012 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

04/27/2012 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

05/24/2012 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238

Date Released Entity Name

05/30/2012 CHEVY CHASE AMBULATORY CENTER, LP

801 S CHEVY CHASE DR STE 106

GLENDALE, CA 91205

(818) 265-2275



DCN: 5500000026788267 Process Date: 08/12/2002

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CHOI, JOON

Date Released **Entity Name**

07/24/2012 PROVIDENCE ST. JOSEPH MEDICAL CENTER

> 501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released **Entity Name**

07/26/2012 REGAL MEDICAL GROUP

> 8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released **Entity Name**

08/27/2012 PRIVATE HEALTH CARE SYSTEMS

1100 WINTER ST

WALTHAM, MA 02451

(781) 895-5847

Date Released **Entity Name**

09/20/2012 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238

Date Released **Entity Name**

10/30/2012 REGAL MEDICAL GROUP

> 8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released **Entity Name**

11/14/2012 HEALTHCARE PARTNERS MEDICAL GROUP

2175 PARK PL

EL SEGUNDO, CA 90245

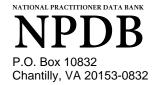
(310) 354-6242

Date Released **Entity Name**

01/22/2013 CARE1ST HEALTH PLAN

> 601 POTRERO GRANDE DR MONTEREY PARK, CA 91755

(323) 889-6638



DCN: 5500000026788267 Process Date: 08/12/2002

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CHOI, JOON

Date Released Entity Name

01/31/2013 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/21/2013 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

03/14/2013 THRIFTY MANAGEMENT SERVICES

1025 N BRAND BLVD STE 100

GLENDALE, CA 91202

(818) 265-0800

Date Released Entity Name

03/29/2013 PROSPECT MEDICAL

600 CITY PKWY W STE 800 ORANGE, CA 92868

(714) 938-5266

Date Released Entity Name

04/27/2013 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

07/24/2013 PACIFICA HOSPITAL OF THE VALLEY

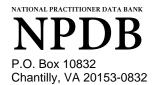
9449 SAN FERNANDO RD SUN VALLEY, CA 91352

(818) 252-2231

Date Released Entity Name

07/30/2013 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325



DCN: 5500000026788267 Process Date: 08/12/2002

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CHOI, JOON

Date Released Entity Name

10/30/2013 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

11/07/2013 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER GLENDALE, CA 9120

(818) 409-8010

Date Released Entity Name

01/17/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

01/18/2014 PACIFICA HOSPITAL OF THE VALLEY

9449 SAN FERNANDO RD SUN VALLEY, CA 91352

(818) 252-2231

Date Released Entity Name

02/10/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

03/19/2014 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

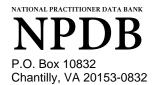
Date Released Entity Name

03/21/2014 CHEVY CHASE AMBULATORY CENTER, LP

801 S CHEVY CHASE DR STE 106

GLENDALE, CA 91205

(818) 265-2275



DCN: 5500000026788267 Process Date: 08/12/2002

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CHOI, JOON

Date Released Entity Name

04/28/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

05/02/2014 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

07/29/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

09/03/2014 LOS ANGELES MEDICAL CENTER

2115 COMPTON AVE CORONA, CA 92881

(951) 280-7788

Date Released Entity Name

09/12/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

10/30/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

01/30/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325



DCN: 5500000026788267 Process Date: 08/12/2002

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CHOI, JOON

Date Released Entity Name

04/30/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

07/31/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

10/09/2015 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER

GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

10/21/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

01/15/2016 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/19/2016 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

05/13/2016 VALLEY PRESBYTERIAN HOSPITAL

15107 VANOWEN ST VAN NUYS, CA 91405

(818) 902-3956



DCN: 5500000026788267 Process Date: 08/12/2002

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CHOI, JOON

Date Released Entity Name

08/03/2016 PROSPECT MEDICAL

600 CITY PKWY W STE 800 ORANGE, CA 92868

(714) 938-5266

Date Released Entity Name

11/08/2016 SEOUL MEDICAL GROUP

520 S VIRGIL AVE STE 507 LOS ANGELES, CA 90020

(213) 480-7770

Date Released Entity Name

02/08/2017 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/17/2017 SEOUL MEDICAL GROUP

520 S VIRGIL AVE STE 507 LOS ANGELES, CA 90020

(213) 480-7770

Date Released Entity Name

03/16/2017 COAST HEALTHCARE MANAGEMENT, LLC

10833 VALLEY VIEW ST STE 300 CREDENTIALING DEPARTMENT

CYPRESS, CA 90630

(562) 602-1563

Date Released Entity Name

04/06/2017 ARROYO VISTA FAMILY HEALTH CENTER

6000 N FIGUEROA ST

LOS ANGELES, CA 90042

(323) 254-5291

Date Released Entity Name

06/14/2017 KOREAN AMERICAN MEDICAL GROUP, INC.

PO BOX 6300

CYPRESS, CA 90630

(714) 947-8600



DCN: 5500000026788267 Process Date: 08/12/2002

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CHOI, JOON

Date Released Entity Name

08/25/2017 PROSPECT MEDICAL

600 CITY PKWY W STE 800 ORANGE, CA 92868

(714) 938-5266

Date Released Entity Name

09/12/2017 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

10/12/2017 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER

GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

01/09/2018 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

04/14/2018 AVALON SURGERY & ROBOTIC CENTER

716 W BROADWAY STE 200 GLENDALE, CA 91204

(818) 696-0091

Date Released Entity Name

06/20/2018 HEALTHCARE PARTNERS MEDICAL GROUP

2175 PARK PL

EL SEGUNDO, CA 90245

(310) 354-6242

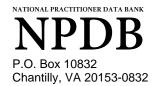
Date Released Entity Name

07/20/2018 PRIME HEALTH SERVICES, INC.

7110 CROSSROADS BLVD STE 100

BRENTWOOD, TN 37027

(615) 565-9011

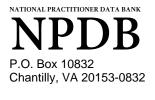


DCN: 5500000026788267 Process Date: 08/12/2002

Page: 19 of 19

CHOI, JOON

Date Released	Entity Name
10/26/2018	SELF-QUERIER



DCN: 5500000024292349 Process Date: 01/17/2002

Page: 1 of 3 CHOI, JOON

CHOI, JOON

MUTUAL PROTECTION TRUST

MEDICAL MALPRACTICE PAYMENT REPORT Date of Action: 12/26/2001

Initial Action

Basis for Initial Action

- SETTLEMENT

- TREATMENT: IMPROPER MANAGEMENT OF COURSE OF

TREATMENT

- TREATMENT: IMPROPER MANAGEMENT OF COURSE OF

TREATMENT

A. REPORTING ENTITY

Entity Name: MUTUAL PROTECTION TRUST *

Address: 333 SOUTH HOPE STREET, 8TH FLOOR

City, State, Zip: LOS ANGELES, CA 90071-1409

Country:

Name or Office: SUZANNE PARK
Title or Department: CLAIMS SERVICES

Telephone: (213) 473-8631

Entity Internal Report Reference:

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 04/16/2018:

Entity Name: MUTUAL PROTECTION TRUST Address: 333 S HOPE ST FL 8

City, State, Zip: LOS ANGELES, CA 90071-3001

Country:

B. SUBJECT
IDENTIFICATION
INFORMATION
(INDIVIDUAL)

Subject Name: CHOI, JOON

Other Name(s) Used:

Gender: MALE

Date of Birth: 11/17/1961

Organization Name:

Work Address: 1505 WILSON TERRACE, #240

City, State, ZIP: GLENDALE, CA 91206

Home Address:

City, State, ZIP:

Deceased: UNKNOWN

Social Security Numbers (SSN):

Professional School(s) & Year(s) of Graduation: MED COLLEGE, OHIO (1991)

Occupation/Field of Licensure (Code): PHYSICIAN (MD) State License Number, State of Licensure: G080351, CA

Drug Enforcement Administration (DEA) Numbers:

Hospital Affiliation(s):

C. INFORMATION REPORTED

Date of Report: 01/17/2002

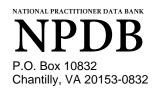
Act/Omission Code: TREATMENT: IMPROPER MANAGEMENT OF COURSE OF TREATMENT

(650)

Date of Act/Omission: 02/27/1998

Act/Omission Code: TREATMENT: IMPROPER MANAGEMENT OF COURSE OF TREATMENT

(650)



DCN: 5500000024292349 Process Date: 01/17/2002

Page: 2 of 3 CHOI, JOON

Date of Act/Omission: 02/27/1998

Payment Date: 12/26/2001

Multiple or Single Payment: SINGLE

Amount of This Payment: \$ 21,685.93 Total Amount of Judgment or Settlement: \$ 21,685.93

Payment Result of: SETTLEMENT

Number of Practitioners for Whom Payment is Made: 1

Relationship of Entity to the Practitioner: SELF INSURED ORGANIZATION

Date of Judgment/Settlement: Adjudicative Case Number: Adjudicative Body Name:

Court File Number:

Reporter's Description of Act or Omission: 42-YEAR-OLD PATIENT PRESENTED WITH HISTORY OF MULTIPLE

PREGNANCIES AND TAB WITH COMPLAINTS OF ABDOMINAL PAIN. DR. CHOI PERFORMED TAH ON 2/27/98 DUE TO ENDOMETRIOSIS. POST OP PATIENT COMPLAINED OF NON SPECIFIC ABDOMINAL

PAIN AND UNNECESSARY HYSTERECTOMY.

Reporter's Description of the Judgment or Settlement: SATISFACTION OF JUDGMENT, \$15,000 PLUS COSTS.

D.	SU	BJ	EC	Т	
	ST	ΔΤ	FM	FNT	

If the subject identified in Section B of 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.

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:

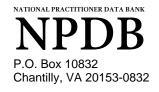
Date of Original Submission: 01/17/2002

Date of Most Recent Change: 01/17/2002

F. SUPPLEMENTAL SUBJECT INFORMATION ON FILE WITH DATA BANK

The following information was not provided by the reporting entity identified in Section A of this report. The information was submitted to the Data Bank from other sources and is intended to supplement the information contained in this report.

National Provider Identifiers (NPI): 1023073152



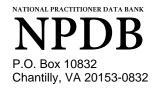
DCN: 5500000024292349 Process Date: 01/17/2002

Page: 3 of 3 CHOI, JOON

This report is maintained under the provisions of: Title IV

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, 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



DCN: 5500000024292349 Process Date: 01/17/2002

Page: 1 of 19

CHOI, JOON

DISCLOSURE HISTORY

Report Number: 5500000024292349

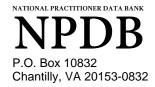
F. DISCLOSURE HISTORY

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		
01/21/2002	PRIVATE HEALTH CARE SYSTEMS 1100 WINTER ST WALTHAM, MA 02451 (781) 895-5847		
Date Released	Entity Name		
02/14/2002	NETWORK MEDICAL MANAGEMENT 1668 S GARFIELD AVE STE 201 ALHAMBRA, CA 91801 (626) 943-6267		
Date Released	Entity Name		
03/21/2002	BURBANK FAMILY CARE ATTN: QUALITY MANAGEMENT 2211 W. MAGNOLIA BOULEVARD BURBANK, CA 91506 81895 548-03		
Date Released	Entity Name		
05/07/2002	LA VIDA MEDICAL GROUP AND IPA 4161 W. REDONDO BEACH BLVD., SUITE 201 LAWNDALE, CA 90260 (310) 214-8677		
Date Released	Entity Name		
05/14/2002	BLUE SHIELD OF CALIFORNIA 50 BEALE ST # 21 SAN FRANCISCO, CA 94105		

(415) 229-6878



DCN: 5500000024292349 Process Date: 01/17/2002

Page: 2 of 19

CHOI, JOON

Date Released Entity Name

08/06/2002 THRIFTY MANAGEMENT SERVICES

1025 N BRAND BLVD STE 100 GLENDALE, CA 91202

(818) 265-0800

Date Released Entity Name

08/20/2002 PACIFICA HOSPITAL OF THE VALLEY

9449 SAN FERNANDO RD SUN VALLEY, CA 91352

(818) 252-2231

Date Released Entity Name

10/11/2002 VERDUGO HILLS HOSPITAL

1812 VERDUGO BLVD GLENDALE, CA 91208

(818) 952-4647

Date Released Entity Name

10/16/2002 ARCADIAN MANAGEMENT SERVICES

955 OVERLAND COURT SAN DIMAS, CA 91773

(909) 971-6922

Date Released Entity Name

11/20/2002 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

11/22/2002 HARVARD HEALTH CARE MEDICAL ASSOCIATES,

5855 GREEN VALLEY CIRCLE,

SUITE 105 & 107

CULVER CITY, CA 90231

31064 170-00

Date Released Entity Name

12/10/2002 CENTRAL HEALTH MSO

1540 BRIDGEGATE DR DIAMOND BAR, CA 91765

(626) 388-2390



DCN: 5500000024292349 Process Date: 01/17/2002

Page: 3 of 19

CHOI, JOON

Date Released Entity Name

12/17/2002 LAKESIDE MEDICAL GROUP

777 A FLOWER STREET GLENDALE, CA 91201

(818) 637-2000

Date Released Entity Name

03/14/2003 GLENDALE MEMORIAL HOSPITAL

1420 S CENTRAL AVE GLENDALE, CA 91204

(818) 502-2317

Date Released Entity Name

04/07/2003 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

10/14/2003 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

10/11/2004 CARE1ST HEALTH PLAN

601 POTRERO GRANDE DR MONTEREY PARK, CA 91755

(323) 889-6638

Date Released Entity Name

02/16/2005 PRIVATE HEALTH CARE SYSTEMS

1100 WINTER ST

WALTHAM, MA 02451

(781) 895-5847

Date Released Entity Name

04/08/2005 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930



DCN: 5500000024292349 Process Date: 01/17/2002

Page: 4 of 19

CHOI, JOON

Date Released Entity Name

05/12/2005 HUMANA HEALTH PLAN

5401 WEST KENNEDY BLVD

SUITE 161

TAMPA, FL 33609 (813) 287-6275

Date Released Entity Name

09/29/2005 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

10/04/2005 ARCADIAN MANAGEMENT SERVICES

955 OVERLAND COURT SAN DIMAS, CA 91773

(909) 971-6922

Date Released Entity Name

10/28/2005 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

12/18/2005 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238

Date Released Entity Name

12/29/2005 LAKESIDE MEDICAL GROUP

777 A FLOWER STREET GLENDALE, CA 91201

(818) 637-2000

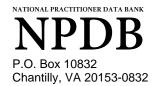
Date Released Entity Name

01/26/2006 CHEVY CHASE AMBULATORY CENTER, LP

801 S CHEVY CHASE DR STE 106

GLENDALE, CA 91205

(818) 265-2275



DCN: 5500000024292349 Process Date: 01/17/2002

Page: 5 **of** 19

CHOI, JOON

Date Released Entity Name

06/27/2006 MULTIPLAN, INC

115 FIFTH AVENUE, 7TH FLOOR

NEW YORK, NY 10003

(212) 780-2477

Date Released Entity Name

03/06/2007 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

07/31/2007 CARE1ST HEALTH PLAN

601 POTRERO GRANDE DR MONTEREY PARK, CA 91755

(323) 889-6638

Date Released Entity Name

09/28/2007 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

11/30/2007 PRIVATE HEALTH CARE SYSTEMS

1100 WINTER ST

WALTHAM, MA 02451

(781) 895-5847

Date Released Entity Name

02/27/2008 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238

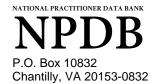
Date Released Entity Name

03/12/2008 HUMANA HEALTH PLANS INC

101 E MAIN ST

LOUISVILLE, KY 40202

(513) 826-7169



DCN: 5500000024292349 Process Date: 01/17/2002

Page: 6 **of** 19

CHOI, JOON

Date Released Entity Name

04/16/2008 LAKESIDE MEDICAL GROUP

777 A FLOWER STREET GLENDALE, CA 91201

(818) 637-2000

Date Released Entity Name

04/21/2008 HEALTH NET

21281 BURBANK BLVD

WOODLAND HILLS, CA 91367

(818) 676-5566

Date Released Entity Name

06/12/2008 GLENDALE PHYSICIANS ALLIANCE

5000 AIRPORT PLAZA DR

SUITE 150

LONG BEACH, CA 90815

(818) 459-6190

Date Released Entity Name

09/10/2008 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

09/12/2008 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238

Date Released Entity Name

10/21/2008 CAREMORE HEALTH PLAN

12900 PARK PLAZA DR SUITE 150

MS-7110

CERRITOS, CA 90703

(562) 977-4602

Date Released Entity Name

10/29/2008 GLENDALE OUTPATIENT SURGERY CENTER

716 W BROADWAY

GLENDALE, CA 91204

(818) 244-8200



DCN: 5500000024292349 Process Date: 01/17/2002

Page: 7 of 19

CHOI, JOON

Date Released Entity Name

12/01/2008 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

01/16/2009 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/09/2009 ASSOCIATED HISPANIC PHYSICIANS OF SO. CA

880 S ATLANTIC BLVD STE 201 MONTEREY PARK, CA 91754

(626) 457-5579

Date Released Entity Name

02/10/2009 ACCESS IPA

880 S ATLANTIC BLVD STE 201 MONTEREY PARK, CA 91754

(626) 457-5579

Date Released Entity Name

02/24/2009 CHEVY CHASE AMBULATORY CENTER, LP

801 S CHEVY CHASE DR STE 106

GLENDALE, CA 91205

(818) 265-2275

Date Released Entity Name

03/10/2009 LAKESIDE MEDICAL GROUP

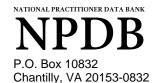
777 A FLOWER STREET GLENDALE, CA 91201

(818) 637-2000

Date Released Entity Name

04/06/2009 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325



DCN: 5500000024292349 Process Date: 01/17/2002

Page: 8 of 19

CHOI, JOON

Date Released Entity Name

04/19/2009 BEECH STREET CORPORATION

6116 SHALLOWFORD RD STE 109B

CHATTANOOGA, TN 37421

(423) 553-6512

Date Released Entity Name

05/12/2009 LAKESIDE MEDICAL GROUP

777 A FLOWER STREET GLENDALE, CA 91201

(818) 637-2000

Date Released Entity Name

07/07/2009 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

07/28/2009 LAKESIDE MEDICAL GROUP

777 A FLOWER STREET GLENDALE, CA 91201

(818) 637-2000

Date Released Entity Name

08/24/2009 SCAN HEALTH PLAN

3800 KILROY AIRPORT WAY STOP 620

QUALITY MANAGEMENT DEPT. -

LONG BEACH, CA 90806

(562) 637-1219

Date Released Entity Name

09/21/2009 CAREMORE HEALTH PLAN

12900 PARK PLAZA DR SUITE 150

MS-7110

CERRITOS, CA 90703

(562) 977-4602

Date Released Entity Name

09/29/2009 ANTHEM, INC

200 BRICKSTONE SQ ANDOVER, MA 01810

(603) 541-2389



DCN: 5500000024292349 Process Date: 01/17/2002

Page: 9 **of** 19

CHOI, JOON

Date Released Entity Name

10/14/2009 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

10/30/2009 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

01/11/2010 SCAN HEALTH PLAN

3800 KILROY AIRPORT WAY STOP 620

QUALITY MANAGEMENT DEPT. -LONG BEACH, CA 90806

(562) 637-1219

Date Released Entity Name

01/22/2010 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/22/2010 THRIFTY MANAGEMENT SERVICES

1025 N BRAND BLVD STE 100

GLENDALE, CA 91202

(818) 265-0800

Date Released Entity Name

04/01/2010 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

04/20/2010 COMMUNITY FAMILY CARE IPA

711 W. COLLEGE ST FOURTH FLOOR

LOS ANGELES, CA 90012

(213) 406-2730



DCN: 5500000024292349 Process Date: 01/17/2002

Page: 10 of 19

CHOI, JOON

Date Released Entity Name

04/26/2010 CARE1ST HEALTH PLAN

601 POTRERO GRANDE DR MONTEREY PARK, CA 91755

(323) 889-6638

Date Released Entity Name

04/27/2010 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

05/05/2010 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238

Date Released Entity Name

07/29/2010 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

09/29/2010 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

10/30/2010 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

01/22/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325



DCN: 5500000024292349 Process Date: 01/17/2002

Page: 11 of 19

CHOI, JOON

Date Released Entity Name

04/28/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

06/03/2011 LOS ANGELES MEDICAL CENTER

2115 COMPTON AVE CORONA, CA 92881

(951) 280-7788

Date Released Entity Name

07/30/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

08/08/2011 HUMANA HEALTH PLANS INC

101 E MAIN ST

LOUISVILLE, KY 40202

(513) 826-7169

Date Released Entity Name

08/18/2011 FIRST HEALTH GROUP CORP.

6705 ROCKLEDGE DRIVE

SUITE 900

BETHESDA, MD 20817

(916) 374-4632

Date Released Entity Name

09/02/2011 CAREMORE HEALTH PLAN

12900 PARK PLAZA DR SUITE 150

MS-7110

CERRITOS, CA 90703

(562) 977-4602

Date Released Entity Name

10/13/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325



DCN: 5500000024292349 Process Date: 01/17/2002

Page: 12 of 19

CHOI, JOON

Date Released Entity Name

10/14/2011 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

10/27/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

01/31/2012 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

04/27/2012 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

05/24/2012 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238

Date Released Entity Name

05/30/2012 CHEVY CHASE AMBULATORY CENTER, LP

801 S CHEVY CHASE DR STE 106

GLENDALE, CA 91205

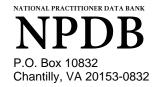
(818) 265-2275

Date Released Entity Name

07/24/2012 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930



DCN: 5500000024292349 Process Date: 01/17/2002

Page: 13 of 19

CHOI, JOON

Date Released Entity Name

07/26/2012 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

08/27/2012 PRIVATE HEALTH CARE SYSTEMS

1100 WINTER ST

WALTHAM, MA 02451

(781) 895-5847

Date Released Entity Name

09/20/2012 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238

Date Released Entity Name

10/30/2012 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

11/14/2012 HEALTHCARE PARTNERS MEDICAL GROUP

2175 PARK PL

EL SEGUNDO, CA 90245

(310) 354-6242

Date Released Entity Name

01/22/2013 CARE1ST HEALTH PLAN

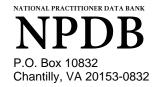
601 POTRERO GRANDE DR MONTEREY PARK, CA 91755

(323) 889-6638

Date Released Entity Name

01/31/2013 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325



DCN: 5500000024292349 Process Date: 01/17/2002

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CHOI, JOON

Date Released	Entity Name

02/21/2013 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

03/14/2013 THRIFTY MANAGEMENT SERVICES

1025 N BRAND BLVD STE 100 GLENDALE, CA 91202

(818) 265-0800

Date Released Entity Name

03/29/2013 PROSPECT MEDICAL

600 CITY PKWY W STE 800 ORANGE, CA 92868

(714) 938-5266

Date Released Entity Name

04/27/2013 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

07/24/2013 PACIFICA HOSPITAL OF THE VALLEY

9449 SAN FERNANDO RD SUN VALLEY, CA 91352

(818) 252-2231

Date Released Entity Name

07/30/2013 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

10/30/2013 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325



DCN: 5500000024292349 Process Date: 01/17/2002

Page: 15 of 19

CHOI, JOON

Date Released Entity Name

11/07/2013 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

01/17/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

01/18/2014 PACIFICA HOSPITAL OF THE VALLEY

9449 SAN FERNANDO RD SUN VALLEY, CA 91352

(818) 252-2231

Date Released Entity Name

02/10/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

03/19/2014 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

03/21/2014 CHEVY CHASE AMBULATORY CENTER, LP

801 S CHEVY CHASE DR STE 106

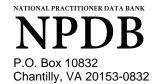
GLENDALE, CA 91205

(818) 265-2275

Date Released Entity Name

04/28/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325



DCN: 5500000024292349 Process Date: 01/17/2002

Page: 16 of 19

CHOI, JOON

Date Released Entity Name

05/02/2014 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

07/29/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

09/03/2014 LOS ANGELES MEDICAL CENTER

2115 COMPTON AVE CORONA, CA 92881

(951) 280-7788

Date Released Entity Name

09/12/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

10/30/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

01/30/2015 REGAL MEDICAL GROUP

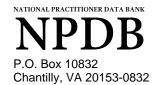
8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

04/30/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325



DCN: 5500000024292349 Process Date: 01/17/2002

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CHOI, JOON

Date Released Entity Name

07/31/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

10/09/2015 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER GLENDALE, CA 912

(818) 409-8010

Date Released Entity Name

10/21/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

01/15/2016 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/19/2016 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

05/13/2016 VALLEY PRESBYTERIAN HOSPITAL

15107 VANOWEN ST VAN NUYS, CA 91405

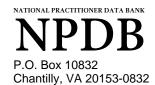
(818) 902-3956

Date Released Entity Name

08/03/2016 PROSPECT MEDICAL

600 CITY PKWY W STE 800 ORANGE, CA 92868

(714) 938-5266



DCN: 5500000024292349 Process Date: 01/17/2002

Page: 18 of 19

CHOI, JOON

Entity Name

11/08/2016 SEOUL MEDICAL GROUP

520 S VIRGIL AVE STE 507 LOS ANGELES, CA 90020

(213) 480-7770

Date Released Entity Name

02/08/2017 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/17/2017 SEOUL MEDICAL GROUP

520 S VIRGIL AVE STE 507 LOS ANGELES, CA 90020

(213) 480-7770

Date Released Entity Name

03/16/2017 COAST HEALTHCARE MANAGEMENT, LLC

10833 VALLEY VIEW ST STE 300 CREDENTIALING DEPARTMENT

CYPRESS, CA 90630

(562) 602-1563

Date Released Entity Name

04/06/2017 ARROYO VISTA FAMILY HEALTH CENTER

6000 N FIGUEROA ST

LOS ANGELES, CA 90042

(323) 254-5291

Date Released Entity Name

06/14/2017 KOREAN AMERICAN MEDICAL GROUP, INC.

PO BOX 6300

CYPRESS, CA 90630

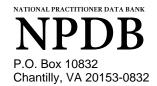
(714) 947-8600

Date Released Entity Name

08/25/2017 PROSPECT MEDICAL

600 CITY PKWY W STE 800 ORANGE, CA 92868

(714) 938-5266



DCN: 5500000024292349 Process Date: 01/17/2002

Page: 19 of 19

CHOI, JOON

Date Released Entity Name

09/12/2017 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

10/12/2017 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER GLENDALE, CA 912

(818) 409-8010

Date Released Entity Name

01/09/2018 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

04/14/2018 AVALON SURGERY & ROBOTIC CENTER

716 W BROADWAY STE 200 GLENDALE, CA 91204

(818) 696-0091

Date Released Entity Name

06/20/2018 HEALTHCARE PARTNERS MEDICAL GROUP

2175 PARK PL

EL SEGUNDO, CA 90245

(310) 354-6242

Date Released Entity Name

07/20/2018 PRIME HEALTH SERVICES, INC.

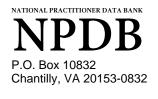
7110 CROSSROADS BLVD STE 100

BRENTWOOD, TN 37027

(615) 565-9011

Date Released Entity Name

10/26/2018 SELF-QUERIER



DCN: 5500000018848351 Process Date: 09/21/2000

Page: 1 of 3 CHOI, JOON

CHOI, JOON

MUTUAL PROTECTION TRUST

MEDICAL MALPRACTICE PAYMENT REPORT Date of Action: 09/11/2000

Initial Action

Basis for Initial Action

- SETTLEMENT - TREATMENT: NOT OTHERWISE CLASSIFIED - TREATMENT: NOT OTHERWISE CLASSIFIED

A. REPORTING ENTITY

Entity Name: MUTUAL PROTECTION TRUST *

Address: 333 SOUTH HOPE STREET, 8TH FLOOR

City, State, Zip: LOS ANGELES, CA 90071-1409

Country:

Name or Office: SUZANNE PARK
Title or Department: CLAIMS SERVICES

Telephone: (213) 473-8631

Entity Internal Report Reference:

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 04/16/2018:

Entity Name: MUTUAL PROTECTION TRUST
Address: 333 S HOPE ST FL 8

City, State, Zip: LOS ANGELES, CA 90071-3001

Country:

B. SUBJECT
IDENTIFICATION
INFORMATION
(INDIVIDUAL)

Subject Name: CHOI, JOON

Other Name(s) Used:

Gender: MALE

Date of Birth: 11/17/1961

Organization Name:

Work Address: 1505 WILSON TERRACE, #240

City, State, ZIP: GLENDALE, CA 91206

Home Address: City, State, ZIP:

Deceased: NO

Deceased. IV

Social Security Numbers (SSN):

Professional School(s) & Year(s) of Graduation: MEDICAL COLLEGE OF OHIO (1991)

Occupation/Field of Licensure (Code): PHYSICIAN (MD)
State License Number, State of Licensure: G080351, CA

Drug Enforcement Administration (DEA) Numbers:

Hospital Affiliation(s):

C. INFORMATION REPORTED

Date of Report: 09/21/2000

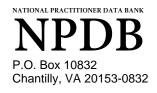
Act/Omission Code: TREATMENT: NOT OTHERWISE CLASSIFIED (690)

Date of Act/Omission: 12/31/1998

Act/Omission Code: TREATMENT: NOT OTHERWISE CLASSIFIED (690)

Date of Act/Omission: 01/16/1999

Payment Date: 09/11/2000 Multiple or Single Payment: SINGLE



DCN: 5500000018848351 Process Date: 09/21/2000

Page: 2 of 3 CHOI, JOON

Amount of This Payment: \$ 60,000.00

Total Amount of Judgment or Settlement: \$ 60,000.00

Payment Result of: SETTLEMENT

Number of Practitioners for Whom Payment is Made: 1

Relationship of Entity to the Practitioner: SELF INSURED ORGANIZATION

Date of Judgment/Settlement:
Adjudicative Case Number:
Adjudicative Body Name:
Court File Number:

Reporter's Description of Act or Omission: THIS 26-YEAR OLD FEMALE UNDERWENT SURGERY FOR AN ECTOPIC

PREGNANCY. THE PATHOLOGY REPORT DEMONSTRATED CHORIONIC VILLI. SUBSEQUENT TO THAT SURGERY SHE SUFFERED A RUPTURE AND HAD TO UNDERGO A LAPAROSCOPIC PROCEDURE. SHE ALLEGED A FAILURE TO PERFORM A FOLLOW UP BETA HCG

TEST

Reporter's Description of the Judgment or Settlement: SIXTY THOUSAND DOLLARS IN FULL AND FINAL SETTLEMENT OF

ALL CLAIMS.

D. SUBJECT STATEMENT	If the subject identified in Section B of 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.
	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: 09/21/2000

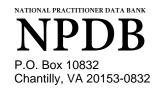
09/21/2000

F. SUPPLEMENTAL SUBJECT INFORMATION ON FILE WITH DATA BANK

The following information was not provided by the reporting entity identified in Section A of this report. The information was submitted to the Data Bank from other sources and is intended to supplement the information contained in this report.

National Provider Identifiers (NPI): 1023073152

Date of Most Recent Change:

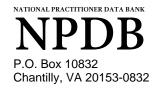


DCN: 5500000018848351 Process Date: 09/21/2000

Page: 3 of 3 CHOI, JOON

This report is maintained under the provisions of: Title IV

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, 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.



DCN: 5500000018848351 Process Date: 09/21/2000

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CHOI, JOON

DISCLOSURE HISTORY

Report Number: 5500000018848351

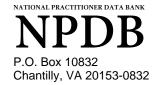
F. DISCLOSURE HISTORY

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
10/03/2000	VERDUGO HILLS HOSPITAL 1812 VERDUGO BLVD GLENDALE, CA 91208 (818) 952-4647
Date Released	Entity Name
10/05/2000	ONE HEALTH PLAN OF CALIFORNIA 655 N CENTRAL AVE, #1900 GLENDALE, CA 91203 40843 702-72
Date Released	Entity Name
11/01/2000	ADVENTIST HEALTH MEDICAL FOUNDATION 381 MERRILL AVENUE GLENDALE, CA 91206 81840 985-40
Date Released	Entity Name
12/08/2000	ADVENTIST HEALTH MEDICAL FOUNDATION 381 MERRILL AVENUE GLENDALE, CA 91206 81840 985-40
Date Released	Entity Name
02/05/2001	GLENDALE MEMORIAL HOSPITAL 1420 S CENTRAL AVE GLENDALE, CA 91204

(818) 502-2317



DCN: 5500000018848351 Process Date: 09/21/2000

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CHOI, JOON

Date Released Entity Name

03/22/2001 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

08/03/2001 NORTHRIDGE HOSPITAL SHERMAN WAY CAMPUS

14500 SHERMAN CIRCLE VAN NUYS, CA 91405

(818) 901-4599

Date Released Entity Name

08/31/2001 CARE1ST HEALTH PLAN

601 POTRERO GRANDE DR MONTEREY PARK, CA 91755

(323) 889-6638

Date Released Entity Name

10/18/2001 UNIVERSITY AFFILIATES IPA

1000 SOUTH FREMONT, SUITE 11200

ALHAMBRA, CA 91802

62694 310-51

Date Released Entity Name

12/05/2001 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

12/20/2001 BLUE CROSS OF CALIFORNIA

CREDENTIALING DEPARTMENT 21555 OXNARD STREET, AC9I WOODLAND HILLS, CA 91367

(978) 474-5199

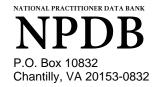
Date Released Entity Name

01/21/2002 PRIVATE HEALTH CARE SYSTEMS

1100 WINTER ST

WALTHAM, MA 02451

(781) 895-5847



DCN: 5500000018848351 Process Date: 09/21/2000

Page: 3 of 21

CHOI, JOON

Date Released Entity Name

02/14/2002 NETWORK MEDICAL MANAGEMENT

1668 S GARFIELD AVE STE 201

ALHAMBRA, CA 91801

(626) 943-6267

Date Released Entity Name

03/21/2002 BURBANK FAMILY CARE

ATTN: QUALITY MANAGEMENT 2211 W. MAGNOLIA BOULEVARD

BURBANK, CA 91506

81895 548-03

Date Released Entity Name

05/07/2002 LA VIDA MEDICAL GROUP AND IPA

4161 W. REDONDO BEACH BLVD., SUITE 201

LAWNDALE, CA 90260

(310) 214-8677

Date Released Entity Name

05/14/2002 BLUE SHIELD OF CALIFORNIA

50 BEALE ST # 21

SAN FRANCISCO, CA 94105

(415) 229-6878

Date Released Entity Name

08/06/2002 THRIFTY MANAGEMENT SERVICES

1025 N BRAND BLVD STE 100

GLENDALE, CA 91202

(818) 265-0800

Date Released Entity Name

08/20/2002 PACIFICA HOSPITAL OF THE VALLEY

9449 SAN FERNANDO RD SUN VALLEY, CA 91352

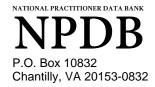
(818) 252-2231

Date Released Entity Name

10/11/2002 VERDUGO HILLS HOSPITAL

1812 VERDUGO BLVD GLENDALE, CA 91208

(818) 952-4647



DCN: 5500000018848351 Process Date: 09/21/2000

Page: 4 of 21

CHOI, JOON

Date Released Entity Name

10/16/2002 ARCADIAN MANAGEMENT SERVICES

955 OVERLAND COURT SAN DIMAS, CA 91773

(909) 971-6922

Date Released Entity Name

11/20/2002 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

11/22/2002 HARVARD HEALTH CARE MEDICAL ASSOCIATES,

5855 GREEN VALLEY CIRCLE,

SUITE 105 & 107

CULVER CITY, CA 90231

31064 170-00

Date Released Entity Name

12/10/2002 CENTRAL HEALTH MSO

1540 BRIDGEGATE DR DIAMOND BAR, CA 91765

(626) 388-2390

Date Released Entity Name

12/17/2002 LAKESIDE MEDICAL GROUP

777 A FLOWER STREET GLENDALE, CA 91201

(818) 637-2000

Date Released Entity Name

03/14/2003 GLENDALE MEMORIAL HOSPITAL

1420 S CENTRAL AVE GLENDALE, CA 91204

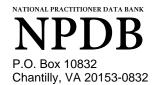
(818) 502-2317

Date Released Entity Name

04/07/2003 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930



DCN: 5500000018848351 Process Date: 09/21/2000

Page: 5 of 21

CHOI, JOON

Date Released Entity Name

10/14/2003 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

10/11/2004 CARE1ST HEALTH PLAN

601 POTRERO GRANDE DR MONTEREY PARK, CA 91755

(323) 889-6638

Date Released Entity Name

02/16/2005 PRIVATE HEALTH CARE SYSTEMS

1100 WINTER ST

WALTHAM, MA 02451

(781) 895-5847

Date Released Entity Name

04/08/2005 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

05/12/2005 HUMANA HEALTH PLAN

5401 WEST KENNEDY BLVD

SUITE 161

TAMPA, FL 33609 (813) 287-6275

Date Released Entity Name

09/29/2005 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER GLENDALE, CA 91206

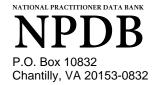
(818) 409-8010

Date Released Entity Name

10/04/2005 ARCADIAN MANAGEMENT SERVICES

955 OVERLAND COURT SAN DIMAS, CA 91773

(909) 971-6922



DCN: 5500000018848351 Process Date: 09/21/2000

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CHOI, JOON

Date Released **Entity Name**

10/28/2005 **REGAL MEDICAL GROUP**

> 8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released **Entity Name**

12/18/2005 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238

Date Released **Entity Name**

12/29/2005 LAKESIDE MEDICAL GROUP

> 777 A FLOWER STREET GLENDALE, CA 91201

(818) 637-2000

Date Released **Entity Name**

01/26/2006 CHEVY CHASE AMBULATORY CENTER, LP

801 S CHEVY CHASE DR STE 106

GLENDALE, CA 91205

(818) 265-2275

Date Released **Entity Name**

06/27/2006 MULTIPLAN, INC

115 FIFTH AVENUE, 7TH FLOOR

NEW YORK, NY 10003

(212) 780-2477

Date Released **Entity Name**

03/06/2007 PROVIDENCE ST. JOSEPH MEDICAL CENTER

> 501 S BUENA VISTA ST BURBANK, CA

(818) 847-3930

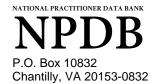
Date Released **Entity Name**

CARE1ST HEALTH PLAN 07/31/2007

601 POTRERO GRANDE DR

MONTEREY PARK, CA 91755

(323) 889-6638



DCN: 5500000018848351 Process Date: 09/21/2000

Page: 7 of 21

CHOI, JOON

Date Released Entity Name

09/28/2007 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

11/30/2007 PRIVATE HEALTH CARE SYSTEMS

1100 WINTER ST

WALTHAM, MA 02451

(781) 895-5847

Date Released Entity Name

02/27/2008 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238

Date Released Entity Name

03/12/2008 HUMANA HEALTH PLANS INC

101 E MAIN ST

LOUISVILLE, KY 40202

(513) 826-7169

Date Released Entity Name

04/16/2008 LAKESIDE MEDICAL GROUP

777 A FLOWER STREET GLENDALE, CA 91201

(818) 637-2000

Date Released Entity Name

04/21/2008 HEALTH NET

21281 BURBANK BLVD

WOODLAND HILLS, CA 91367

(818) 676-5566

Date Released Entity Name

06/12/2008 GLENDALE PHYSICIANS ALLIANCE

5000 AIRPORT PLAZA DR

SUITE 150

LONG BEACH, CA 90815

(818) 459-6190



DCN: 5500000018848351 Process Date: 09/21/2000

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CHOI, JOON

Date Released Entity Name

09/10/2008 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

09/12/2008 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238

Date Released Entity Name

10/21/2008 CAREMORE HEALTH PLAN

12900 PARK PLAZA DR SUITE 150

MS-7110

CERRITOS, CA 90703

(562) 977-4602

Date Released Entity Name

10/29/2008 GLENDALE OUTPATIENT SURGERY CENTER

716 W BROADWAY GLENDALE, CA 91204

(818) 244-8200

Date Released Entity Name

12/01/2008 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

01/16/2009 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/09/2009 ASSOCIATED HISPANIC PHYSICIANS OF SO. CA

880 S ATLANTIC BLVD STE 201 MONTEREY PARK, CA 91754

(626) 457-5579



DCN: 5500000018848351 Process Date: 09/21/2000

Page: 9 of 21

CHOI, JOON

Date Released Entity Name

02/10/2009 ACCESS IPA

880 S ATLANTIC BLVD STE 201 MONTEREY PARK, CA 91754

(626) 457-5579

Date Released Entity Name

02/24/2009 CHEVY CHASE AMBULATORY CENTER, LP

801 S CHEVY CHASE DR STE 106

GLENDALE, CA 91205

(818) 265-2275

Date Released Entity Name

03/10/2009 LAKESIDE MEDICAL GROUP

777 A FLOWER STREET GLENDALE, CA 91201

(818) 637-2000

Date Released Entity Name

04/06/2009 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

04/19/2009 BEECH STREET CORPORATION

6116 SHALLOWFORD RD STE 109B

CHATTANOOGA, TN 37421

(423) 553-6512

Date Released Entity Name

05/12/2009 LAKESIDE MEDICAL GROUP

777 A FLOWER STREET GLENDALE, CA 91201

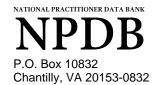
(818) 637-2000

Date Released Entity Name

07/07/2009 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400



DCN: 5500000018848351 Process Date: 09/21/2000

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CHOI, JOON

Date Released Entity Name

07/28/2009 LAKESIDE MEDICAL GROUP

777 A FLOWER STREET GLENDALE, CA 91201

(818) 637-2000

Date Released Entity Name

08/24/2009 SCAN HEALTH PLAN

3800 KILROY AIRPORT WAY STOP 620 QUALITY MANAGEMENT DEPT. -

LONG BEACH, CA 90806 (562) 637-1219

Date Released Entity Name

09/21/2009 CAREMORE HEALTH PLAN

12900 PARK PLAZA DR SUITE 150

MS-7110

CERRITOS, CA 90703

(562) 977-4602

Date Released Entity Name

09/29/2009 ANTHEM, INC

200 BRICKSTONE SQ ANDOVER, MA 01810

(603) 541-2389

Date Released Entity Name

10/14/2009 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER GLENDALE, CA 91206

(818) 409-8010

Date Released

10/30/2009 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Entity Name

Date Released Entity Name

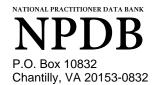
01/11/2010 SCAN HEALTH PLAN

3800 KILROY AIRPORT WAY STOP 620

QUALITY MANAGEMENT DEPT. -

LONG BEACH, CA 90806

(562) 637-1219



DCN: 5500000018848351 Process Date: 09/21/2000

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CHOI, JOON

Date Released Entity Name

01/22/2010 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/22/2010 THRIFTY MANAGEMENT SERVICES

1025 N BRAND BLVD STE 100 GLENDALE, CA 91202

(818) 265-0800

Date Released Entity Name

04/01/2010 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

04/20/2010 COMMUNITY FAMILY CARE IPA

711 W. COLLEGE ST FOURTH FLOOR

LOS ANGELES, CA 90012

(213) 406-2730

Date Released Entity Name

04/26/2010 CARE1ST HEALTH PLAN

601 POTRERO GRANDE DR MONTEREY PARK, CA 91755

(323) 889-6638

Date Released Entity Name

04/27/2010 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

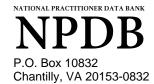
Date Released Entity Name

05/05/2010 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238



DCN: 5500000018848351 Process Date: 09/21/2000

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CHOI, JOON

Date Released Entity Name

07/29/2010 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

09/29/2010 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

10/30/2010 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

01/22/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

04/28/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

06/03/2011 LOS ANGELES MEDICAL CENTER

2115 COMPTON AVE CORONA, CA 92881

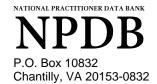
(951) 280-7788

Date Released Entity Name

07/30/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400



DCN: 5500000018848351 Process Date: 09/21/2000

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CHOI, JOON

Date Released Entity Name

08/08/2011 HUMANA HEALTH PLANS INC

101 E MAIN ST

LOUISVILLE, KY 40202

(513) 826-7169

Date Released Entity Name

08/18/2011 FIRST HEALTH GROUP CORP.

6705 ROCKLEDGE DRIVE

SUITE 900

BETHESDA, MD 20817

(916) 374-4632

Date Released Entity Name

09/02/2011 CAREMORE HEALTH PLAN

12900 PARK PLAZA DR SUITE 150

MS-7110

CERRITOS, CA 90703

(562) 977-4602

Date Released Entity Name

10/13/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

10/14/2011 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER

GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

10/27/2011 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

01/31/2012 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400



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CHOI, JOON

Date Released Entity Name

04/27/2012 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

05/24/2012 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238

Date Released Entity Name

05/30/2012 CHEVY CHASE AMBULATORY CENTER, LP

801 S CHEVY CHASE DR STE 106

GLENDALE, CA 91205

(818) 265-2275

Date Released Entity Name

07/24/2012 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

07/26/2012 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

08/27/2012 PRIVATE HEALTH CARE SYSTEMS

1100 WINTER ST

WALTHAM, MA 02451

(781) 895-5847

Date Released Entity Name

09/20/2012 COMPREHENSIVE COMMUNITY HEALTH CENTERS

801 S CHEVY CHASE DR STE 20

GLENDALE, CA 91205

(818) 265-2238



DCN: 5500000018848351 Process Date: 09/21/2000

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CHOI, JOON

Date Released Entity Name

10/30/2012 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

11/14/2012 HEALTHCARE PARTNERS MEDICAL GROUP

2175 PARK PL

EL SEGUNDO, CA 90245

(310) 354-6242

Date Released Entity Name

01/22/2013 CARE1ST HEALTH PLAN

601 POTRERO GRANDE DR MONTEREY PARK, CA 91755

(323) 889-6638

Date Released Entity Name

01/31/2013 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/21/2013 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

03/14/2013 THRIFTY MANAGEMENT SERVICES

1025 N BRAND BLVD STE 100 GLENDALE, CA 91202

(818) 265-0800

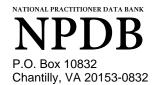
Date Released Entity Name

03/29/2013 PROSPECT MEDICAL

600 CITY PKWY W STE 800

ORANGE, CA 92868

(714) 938-5266



DCN: 5500000018848351 Process Date: 09/21/2000

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CHOI, JOON

Date Released Entity Name

04/27/2013 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

07/24/2013 PACIFICA HOSPITAL OF THE VALLEY

9449 SAN FERNANDO RD SUN VALLEY, CA 91352

(818) 252-2231

Date Released Entity Name

07/30/2013 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

10/30/2013 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

11/07/2013 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER GLENDALE, CA 91206

(818) 409-8010

Date Released Entity Name

01/17/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

01/18/2014 PACIFICA HOSPITAL OF THE VALLEY

9449 SAN FERNANDO RD SUN VALLEY, CA 91352

(818) 252-2231



DCN: 5500000018848351 Process Date: 09/21/2000

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CHOI, JOON

Date Released Entity Name

02/10/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

03/19/2014 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

03/21/2014 CHEVY CHASE AMBULATORY CENTER, LP

801 S CHEVY CHASE DR STE 106

GLENDALE, CA 91205

(818) 265-2275

Date Released Entity Name

04/28/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

05/02/2014 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

07/29/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

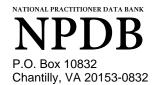
(818) 654-3400

Date Released Entity Name

09/03/2014 LOS ANGELES MEDICAL CENTER

2115 COMPTON AVE CORONA, CA 92881

(951) 280-7788



Date Released

DCN: 5500000018848351 Process Date: 09/21/2000

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CHOI, JOON

Date Released	Entity Name
09/12/2014	REGAL MEDICAL GROUP
	8510 BALBOA BLVD STE 150
	NORTHRIDGE, CA 91325
	(818) 654-3400

Entity Name

10/30/2014 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325 (818) 654-3400

Date Released Entity Name

01/30/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

04/30/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

07/31/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

10/09/2015 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER GLENDALE, CA 91206

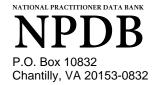
(818) 409-8010

Date Released Entity Name

10/21/2015 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400



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CHOI, JOON

Date Released Entity Name

01/15/2016 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/19/2016 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930

Date Released Entity Name

05/13/2016 VALLEY PRESBYTERIAN HOSPITAL

15107 VANOWEN ST VAN NUYS, CA 91405

(818) 902-3956

Date Released Entity Name

08/03/2016 PROSPECT MEDICAL

600 CITY PKWY W STE 800 ORANGE, CA 92868

(714) 938-5266

Date Released Entity Name

11/08/2016 SEOUL MEDICAL GROUP

520 S VIRGIL AVE STE 507 LOS ANGELES, CA 90020

(213) 480-7770

Date Released Entity Name

02/08/2017 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

02/17/2017 SEOUL MEDICAL GROUP

520 S VIRGIL AVE STE 507 LOS ANGELES, CA 90020

(213) 480-7770



DCN: 5500000018848351 Process Date: 09/21/2000

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CHOI, JOON

Date Released	Entity Name

03/16/2017 COAST HEALTHCARE MANAGEMENT, LLC

10833 VALLEY VIEW ST STE 300 CREDENTIALING DEPARTMENT

CYPRESS, CA 90630

(562) 602-1563

Date Released Entity Name

04/06/2017 ARROYO VISTA FAMILY HEALTH CENTER

6000 N FIGUEROA ST

LOS ANGELES, CA 90042

(323) 254-5291

Date Released Entity Name

06/14/2017 KOREAN AMERICAN MEDICAL GROUP, INC.

PO BOX 6300

CYPRESS, CA 90630

(714) 947-8600

Date Released Entity Name

08/25/2017 PROSPECT MEDICAL

600 CITY PKWY W STE 800 ORANGE, CA 92868

(714) 938-5266

Date Released Entity Name

09/12/2017 REGAL MEDICAL GROUP

8510 BALBOA BLVD STE 150 NORTHRIDGE, CA 91325

(818) 654-3400

Date Released Entity Name

10/12/2017 GLENDALE ADVENTIST MEDICAL CENTER - MEDI

1509 WILSON TER GLENDALE, CA 91206

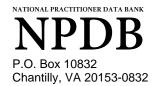
(818) 409-8010

Date Released Entity Name

01/09/2018 PROVIDENCE ST. JOSEPH MEDICAL CENTER

501 S BUENA VISTA ST BURBANK, CA 91505

(818) 847-3930



Date Released

Date Released

10/26/2018

DCN: 5500000018848351 Process Date: 09/21/2000

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CHOI, JOON

04/14/2018	AVALON SURGERY & ROBOTIC CENTER 716 W BROADWAY STE 200 GLENDALE, CA 91204 (818) 696-0091
Date Released	Entity Name
06/20/2018	HEALTHCARE PARTNERS MEDICAL GROUP 2175 PARK PL EL SEGUNDO, CA 90245 (310) 354-6242
Date Released	Entity Name
07/20/2018	PRIME HEALTH SERVICES, INC.

7110 CROSSROADS BLVD STE 100

BRENTWOOD, TN 37027

(615) 565-9011

SELF-QUERIER

Entity Name

Entity Name